

Rhode Island WIC Program
Operations Manual

The Hon. Gina Raimondo, Governor

Nicole Alexander-Scott, MD. MPH, Director of Health

Rhode Island Department of Health

SECTION 1

GENERAL INFORMATION

STATEMENT ON A DRUG FREE WORKPLACE

The Rhode Island Department of Health WIC Program has taken measures to maintain a drug free workplace as part of an effort to maintain a drug free workplace in all state offices. Employees have attended meetings informing them of their rights and responsibilities and of consequences of drug abuse. Employees have also been asked to voluntarily sign and submit to the Office of Personnel a statement that they would not use illegal drugs. See State of Rhode Island Drug Free Workplace Policy.

PREAPPLICATION PACKAGE

1. Pre-application letter
2. WIC Program Information Sheet, FNS-131
3. Application Form
4. Current WIC Program Federal Regulations (deleted for State Plan)
5. Rhode Island WIC Policies for Program Initiation, Expansion and Selection.

Dear

Thank you for expressing an interest to have your agency operate a WIC Program in the State of Rhode Island. A Rhode Island Department of Health WIC Program application package is enclosed. This package consists of the following information:

1. FNS-131, Special Supplemental Nutrition Program for Women, Infants and Children Information Sheet provides a description of criteria for local agencies.
2. Application Form; Information needed to determine if an applicant agency is eligible to operate a WIC Program
3. Current WIC Program Federal Regulations Regulations pursuant to Public Law 95-627 under which the WIC Program operates. Note: Section 246.6, Agreements with Local Agencies, which delineates the responsibilities of a local agency that operates a WIC Program.
4. Rhode Island policies for program initiation, expansion, and selection.

The Rhode Island Department of Health (RIDOH) requires of each agency, which desires approval as a local agency to submit a written application, which contains sufficient information to enable the RIDOH to make a determination as to the eligibility of the local agency. Within fifteen (15) days after receipt of an incomplete application the RIDOH shall provide written notification to the applicant agency of the additional information needed.

RIDOH shall notify the applicant agency, in writing, of the approval or denial of its application within thirty (30) days of a receipt of a completed application. When an application is disapproved, RIDOH will advise the applicant agency of the reasons for disapproval and of the right to appeal as set forth in WIC Program Federal Regulations.

RIDOH shall deny application from local agencies if funds are not available for program initiation or expansion. Such agencies shall be notified when funds become available.

Please contact the RIDOH WIC Program with any questions or concerns you have about the information in this package or in completing the application form.

Sincerely,

Ann M. Barone, Chief
WIC Program
(401) 222-4604

**SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR
WOMEN, INFANTS & CHILDREN**

US DEPARTMENT OF AGRICULTURE/FOOD AND NUTRITION SERVICE/WASHINGTON, DC
FNS-131

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) provides specified nutritious supplemental foods to pregnant, postpartum, and breastfeeding women and to infants and children up to their fifth birthday who are determined by competent professionals (physicians, nutritionists, nurses, and other health officials) to be at “nutritional risk” because of inadequate nutrition and inadequate income. Funds are made available to participating State health departments or comparable State agencies: to Indian tribes, bands or groups recognized by the Department of the Interior or their authorized representative or to the Indian Health Service of the Department of Health, Education, and Welfare. These agencies distribute funds to the participating local agencies. These funds are used to provide specified supplemental foods to WIC participants and to pay specified administrative costs, including those for nutrition education.

WHAT ARE THE ELIGIBILITY CRITERIA FOR INDIVIDUAL PARTICIPANTS?

Infants, children, and pregnant, postpartum or breastfeeding women are eligible for the WIC Program if they: (1) reside in an approved project area or are a member of a special population; (2) meet the income eligibility standards of the local agency; and (3) are individually determined by a competent professional to be in nutritional need of the supplemental foods provided by the WIC Program. A person is determined in nutritional need for such reasons as anemia, abnormal growth, high risk pregnancy, and inadequate diet. When a local agency no longer has funds to serve additional participants, applicants are placed in one of six nutritional need priority levels in order to assure that those persons in greatest need are placed on the WIC Program as soon as space is available.

WHAT SUPPLEMENTAL FOODS DO THE PARTICIPANTS RECEIVE?

Under the WIC Program, infants up to one year old can receive iron-fortified formula, cereal which is high in iron, and infant fruits, vegetables or meats depending on how the parent chooses to feed their infant. Participating women and children receive fortified milk and/or cheese and yogurt, eggs, hot or cold cereal which is high in iron, concentrated juice, whole grains, fruits and vegetables and peanut butter or legumes. Women and children with special dietary problems may receive special formula by request of the physician. Fully Breastfeeding women will receive an enhanced food package.

HOW DO PARTICIPANTS RECEIVE SUPPLEMENTAL FOODS?

WIC participants receive foods from a food delivery system operated by their State Agency, which is responsible for the accountability of the system and its effectiveness in meeting their needs. Systems the State agencies use are: (1) retail purchase systems in which participants obtain supplemental foods through local retail stores; (2) home delivery systems in which food is delivered to the participant's home; and (3) direct distribution system in which participants pick up food from a storage facility. RI WIC provides food through the retail purchase system.

HOW ARE LOCAL AGENCIES SELECTED?

Each State agency may rank areas and special populations under its jurisdiction in order of greatest need based on economic and health statistics and may or may not approve new programs in this rank order. When funds are available to open a WIC Program in an area, the State agency selects a local agency in the following order; (1) a health agency which can provide both health and administrative services; (2) a health or welfare agency which must contract with another agency for health or administrative services; (3) a health agency which must contract with a private physician in order to provide health services to a particular category of participant (women, infants, or children); (4) a welfare agency which must contract with a private physician in order to provide health services; and (5) agencies that will provide routine pediatric and obstetric care through referral to a health provider. Such local agencies must have a plan for continued efforts to make health services available to participant at the clinic or through written agreements with health care providers.

WHAT RECOURSE DOES A PERSON HAVE FOR ANY ADVERSE DECISION WITHIN THE WIC PROGRAM?

- Each State agency is required to have a fair hearing procedure under which pregnant, postpartum and breastfeeding women parents, or guardians can appeal any decision made by the local agency regarding program participation.
- In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.
- To file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to USDA at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at Program.intake@usda.gov. Individuals who are hearing impaired or have speech disabilities may contact USDA through the federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). This Institution is an equal opportunity provider.

STATE OF RHODE ISLAND
RHODE ISLAND DEPARTMENT OF HEALTH

AGENCY APPLICATION TO OPERATE WOMEN, INFANTS AND CHILDREN
SPECIAL SUPPLEMENTAL NUTRITION PROGRAM (WIC)

FISCAL YEAR 2019

1. Name of Applicant Agency _____

Address _____

City/Town _____

State, Zip Code _____

Telephone _____

Officials to be responsible for WIC Program

Chief Executive Officer Name _____

Title _____

Medical Director or
Physician on call Name _____

Title _____

Application Contact Person Name _____

Title _____

Agency Tax ID Number _____

2. Name and address of organization sponsoring applicant agency, if any.

- 3. Sources of funding for local agency, (Private nonprofit organizations must attach documentation of tax-exempt status).

USDA _____	HUD _____	RIDEA _____	Private Nonprofit
USDHHS _____	RI Health Dept. _____	RIDHS _____	Other (specify)
USDOE _____	Local Gov't. _____		

- 4. Congressional district: _____

- 5. Will any of the WIC Program health and administrative services be provided through a contractual relationship with another agency(ies), or individual(s)? If yes, please specify.

- 6. Identify by type and number health professionals who will determine eligibility for WIC Program and authorize supplemental food.

Physician	_____	Number	_____
Registered Nurse	_____	Number	_____
Nutritionist	_____	Number	_____
Health Aides	_____	Number	_____
Pediatric Nurse	_____	Number	_____
Practitioners	_____	Number	_____
Other	_____	Number	_____

7. Health services offered to: (Please check all that apply).

	<u>Women</u>	<u>Infants</u>	<u>Children</u>
Physician	_____	_____	_____
On-Call Physician	_____	_____	_____
Nursing	_____	_____	_____
Home Health	_____	_____	_____
Nutrition	_____	_____	_____
Dental	_____	_____	_____
X-Ray	_____	_____	_____
Occupational Therapy	_____	_____	_____
Physical Therapy	_____	_____	_____
Pharmacy	_____	_____	_____
Other (Specify)	_____	_____	_____

8. Brief description of financial, residential or other socioeconomic criteria applied to determine the eligibility of such individuals for health care including treatment, free or at less than the customary full charge.

9. Medical record data maintained. (Check)

Type	Women	Infants	Children
<u>Height</u>			
<u>Weight</u>			
<u>BMI</u>			
<u>Hemoglobin</u>			
<u>Hematocrit</u>			
<u>Lead</u>			
<u>Immunizations</u>			

10. Proposed geographic areas for WIC Project (attach map to clarify, if needed).

11. Population estimates (WIC Affirmative Action Plan data may be used)

<u>Project Area</u>	<u>WIC Eligible Total Population</u>	<u>% Unserved by WIC</u>
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*Identify criteria used _____

List all subdivisions within the proposed project area which will be participating in WIC.

12. Data indicating Rates/1,000 of Nutritional Risk Within Program area. (WIC Affirmative Action Plan data may be used as well as RI Kids Count Factbook, and the most recent Vital Statistics Annual Report).

(If data is unavailable, place n/a in space provided).

- a) ____ Adult Pregnancies = $\frac{\text{Pregnancies (ages 20-40 yrs.)}}{1,000}$ x 1,000
- b) ____ Teenage Pregnancies = $\frac{\text{Pregnancies (ages 10-19 yrs.)}}{1,000}$ x 1,000
- c) ____ Fetal Mortality = $\frac{\text{Fetal deaths at gestation (20 wks. Or over)}}{\text{Live births}}$ x 1,000
- d) ____ Low birth weight infants = $\frac{\text{Birth weight less than 5.5 lbs.}}{\text{Live births}}$ x 1,000
- e) ____ Infant Morbidity = $\frac{\text{Sickness under one year of age}}{\text{Live birth}}$ x 1,000
- f) ____ Infant Mortality = $\frac{\text{Death under one year of age}}{\text{Live birth}}$ x 1,000
- g) ____ Neonatal mortality = $\frac{\text{Live births dying under 28 days of age}}{1,000}$ x 1,000
- h) ____ Premature rate = $\frac{\text{Birth between 20 \& 36 wks gestation}}{1,000}$ x 1,000
- I) ____ Low income persons = $\frac{\text{Low income persons within program area}}{1,000}$ x 1,000
- j) Nutritional Anemia
 Pregnant or lactating Women
 Infants
 Children
 - 1) ____ % of Pregnant/lactating women with WIC risk of low hemoglobin / hematocrit levels
 - 2) ____ % of Infants with WIC risk of low hemoglobin / hematocrit levels
 - 3) ____ % of Children with WIC risk of low hemoglobin / hematocrit levels

13. Estimated growth to maximum caseload

Year _____	<u>Women</u>	<u>Infants</u>	<u>Children</u>	<u>TOTAL</u>
July	_____	_____	_____	_____
August	_____	_____	_____	_____
September	_____	_____	_____	_____
October	_____	_____	_____	_____
November	_____	_____	_____	_____
December	_____	_____	_____	_____
Year	_____	_____	_____	_____
January	_____	_____	_____	_____
February	_____	_____	_____	_____
March	_____	_____	_____	_____
April	_____	_____	_____	_____
May	_____	_____	_____	_____
June	_____	_____	_____	_____
July	_____	_____	_____	_____
August	_____	_____	_____	_____
September	_____	_____	_____	_____
October	_____	_____	_____	_____
November	_____	_____	_____	_____
December	_____	_____	_____	_____

14. Estimated number average monthly participation of pregnant or lactating women, infants and children by racial/ethnic group in program area.

Participation by Group	Number of Participants			Race /Ethnicity Makeup of Total Population
	Women	Infants	Children	
a) Hispanic or Latino				
b) White				
c) Black or African American				
d) American Indian and Alaska Native				
e) Asian				
f) Native Hawaiian and other Pacific Islander				
TOTAL				

15. Describe any past substantiated civil rights problems or noncompliance situations and corrective actions taken.

16. Describe your agency’s procedures for handling civil rights complaints.

17. Do any clinic sites or agency offices deny access to any person because of his or her race, color, national

origin, age, sex, or handicap?

18. What languages are spoken by residents in the area you will serve? What staff, volunteer or other translation resources are available (specify by language)? Please note consistent with the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health Care, staff providing translation services should have their skills assessed with opportunities for training when needed.

19. Describe your agency's procedures for handling customer service, mistreatment or inadequate/inappropriate treatment/service complaints or grievances.

20. A brief description of method of making supplemental foods available to expected participants.

21. A brief description of any non-WIC supplemental type feeding program for the benefit of pregnant or lactating women, infants or children which is already in operation in the project area. Include an estimate in the number of participants in project target group served, type of food provided, and an explanation of the expected relationship between any such program and the WIC program.

22. Please describe method of providing Nutrition Education, including staffing.

23. Please describe method and source of obtaining dietary assessments, anthropometric and hematological measurement, and eligibility related medical data for each category of applicant.

- 24. Please describe MIS equipment, software and support to be provided.

- 25. Please describe measuring equipment, furnishings, space and clerical support to be provided.

- 26. Identify each location where WIC related services will be rendered and specify services offered at each.

The applicant proposes to implement the described grant program within the proposed budget in accordance with the guidelines established by the Department of Health. The applicant recognizes that any departure from the stated program objectives of this grant or of the budget, as approved, is not authorized and that procedures for modification of this grant, if they become necessary, are provisions of this grant application, or its modifications will be the liability of the applicant. The information furnished in this application is true and accurate to the knowledge of the signer.

Applicant:
(Name of Applying Agency) _____

(Address) _____

Signature:
(Authorized Agency Official) _____

(Title) _____

Date _____

The signature of the official in the local agency who shall be responsible for supervising local WIC Program operation.

S-1 SELECTION OF LOCAL AGENCIES

GOAL

To ensure that local agencies are selected and funded in accordance with the need for program benefits in an area and with the efficient and effective utilization of administrative and program services funds.

GENERAL

In addition to this policy, the State Agency will employ the provisions of 7 CFR Part 246.5.

This section sets forth the procedures for the selection of local agencies and the expansion, reduction and disqualification of local agencies already in operation. In making decisions to initiate, continue and discontinue the participation of local agencies, the State agency shall give consideration to the need for program benefits as delineated in the Affirmative Action Plan.

STATEWIDE SOLICITATION OF PROVIDERS - See Goals I, Selection of Local Agencies

INDIVIDUAL AGENCY SELECTION

Application Of Local Agencies

Each agency, which desires approval as a local agency, must submit a written local agency application. Within 15 days after receipt of an incomplete application, the State shall provide written notification to the applicant agency of the additional information needed. Within 30 days after receipt of a complete application, the State agency shall notify the applicant agency in writing of the approval or disapproval of its application.

When an application is disapproved, the State agency shall advise the applicant agency of the reasons for disapproval and of the right to appeal as set forth in paragraph 246.18. An agency whose application is disapproved may not re-apply for a period of one year after the date of a notice of disapproval, unless specifically requested to do so by the HEALTH.

When an agency submits an application and there are no funds to serve the area, the applicant agency shall be notified within 30 days of receipt of the application that there are currently no funds available for Program initiation or expansion. The applicant agency shall be notified by the State agency when funds become available.

Program Initiation And Expansion

- A. The State agency may fund local agencies serving those areas or special populations most in need first, in accordance with their order of priority as listed in the Affirmative Action Plan and in relation to the local agency priority system. The State may also consider the number of participants in each priority level being served by existing local agencies in determining when it is appropriate to move into additional areas in the Affirmative Action Plan or to expand existing operations in an area. The State agency may also give consideration to the extent of unmet need in areas considered to have high levels of risk factors and poor health factors, such as those identified in the needs assessment study conducted by the WIC and Data Evaluation Divisions.
- B. The State agency may fund more than one agency to serve the same area or special population as long as more than one local agency is necessary to serve the full extent of need in that area or special population.
- C. Local agency priority system. The selection of new local agencies shall consider the local agency priority system, which is based on the relative availability of health and administrative services, in the selection of local agencies. Unless warranted by extraordinary circumstances, an agency may not be selected unless it will provide ongoing, routine pediatric and prenatal care and administrative services:
 - 1. First consideration shall be given to a public or a private nonprofit health agency that will provide ongoing, routine pediatric and obstetric care and administrative services.
 - 2. Second consideration shall be given to a public or a private nonprofit health or human service agency that will enter into a written agreement with another agency for either ongoing, routine pediatric and obstetric care or administrative services.
 - 3. Third consideration shall be given to a public or private nonprofit health agency that will enter into a written agreement with private physicians, licensed by the State, in order to provide ongoing, routine pediatric and obstetric care to a specific category of participants (women, infants or children).
 - 4. Fourth consideration shall be given to a public or private nonprofit human service agency that will enter into a written agreement with private physicians, licensed by the State, to provide ongoing, routine pediatric and obstetric care.
 - 5. Fifth consideration shall be given to a public or private nonprofit health or human service agency that will provide ongoing, routine pediatric and obstetric care through referral to a health provider.
- D. Other standards to be considered in the selection of local agencies include, but are not limited to:
 - 1. The effective and efficient administration of the program.
 - 2. Satisfactory compliance with a Civil Rights Pre-Review.

3. A new agency, if selected, shall not duplicate services to a significant portion of an existing WIC local agencies service area, unless the State agency deems selection will further the standard in 1., above.
4. The applicant agency must demonstrate short and long range viability as to staff, location, facility, equipment, management, corporate situation, finances, and so forth.
5. Whether the agency is convenient for participants as to location, hours and accessibility.
6. Whether the agency has the potential need and capacity to serve a caseload of at least 500 participants, as determined by the HEALTH.
7. Demonstrates, in conjunction with a comprehensive review by State agency staff, the capability, if selected, of complying with applicable standards of the WIC Local Agency Review.
8. The agency must provide all information and documentation requested by the State agency needed to make judgments as to the agency's fitness and readiness to comply with all of the herein listed standards.
9. Whether another agency can operate the Program more effectively and efficiently for a particular geographic area.
10. Whether the State's program funds are sufficient to support an additional agency(s).
11. No local agency may be selected if it is debarred or suspended from entering into contracts or agreements with grantees and subgrantees of federal funds under the terms of 7 CFR Part 3017.

* SOLICITATION FOR NEW AGENCIES

Solicitation of Local Agency Providers

In the event the state agency determines it is in the best interests of the Program and its actual or potential clients to contract with additional provider(s) to serve as WIC Local Agency(ies), the Department will issue a Request For Proposals for Agreements for WIC Local Agency services. The RFP will include the following:

1. Performance objectives.
2. Description of service areas and relative need.
3. Proposals to address underserved areas.

4. By reference, the current State Plan and Procedure Manuals and require bidder acceptance of USDA approved revisions to those core documents.

Local Agency Proposals

The local agency proposals should address the information requested in the above areas and acceptance of the requirements set out in the core documents. The proposals should also include:

1. A description of WIC service provider experience.
2. Experience with providing allied programs such as maternal and child health care, immunization, anti-hunger and similar programs.
3. Demonstrate the quality of performance of any WIC services or similar services to date.

Evaluation of proposals

The HEALTH will evaluate local proposals in determining which agencies are qualified to be WIC providers. Such evaluation will include review of the following:

1. The local agency's proposal.
2. Prior WIC Management Evaluation results.
3. Corrective actions taken for WIC exceptions or deficiencies cited.
4. Communications from the public, applicants or participants in the Department's files.
5. Evaluation reports by allied programs.
6. Unmet need in the service area.
7. Size and population of the high risk population.
8. The bidder's financial and managerial stability.
9. The bidder's experience in providing similar health, nutrition, education or financial assistance services.
10. The quality of the bidder's similar services and service and fiscal record-keeping.
11. Compliance with business and professional law, regulations and accepted standards of practice.

Agreement to provide WIC services

The Department will enter into Agreements with those agencies selected to be WIC providers. The following elements will comprise the entire Agreement:

1. The terms and conditions of the Request For Proposal.
2. The contents of the provider's Proposal.
3. Any agreed to additions or modifications to the Proposal.
4. Any Department of Health and/or Administration award document.

Term of Agreement

The Agreement shall be for an initial period and additional renewal periods. The initial period shall be for two full fiscal years or one fiscal year plus the balance remaining in the year of implementation. For example, if implemented in March, the Agreement would be effective from March to September of that fiscal year and then for the full following fiscal year. The initial period will be followed by three, one year renewal periods. Renewal will be based upon:

1. Review of local agency qualifications (7 CFR 246, Operations Manual Sec. 1, S-2, S-3)
2. Mutual Agreement between the Department and the Provider.
3. Acceptance by the Provider of any change in terms and conditions the State may need to stipulate as a result of changed federal or state rules or changes in the State Plan.

Extension of Existing Agreements

Until completion of any RFP Proposal, evaluation and contracting process, the HEALTH may extend existing Agreements. The extension period will be until notification of each current WIC local agency provider whether it has been accepted for a new Agreement or whether it has not been selected as a provider.

In the event that a current local agency is not selected as a provider for the new Agreement, the State and the agency will develop a plan for phasing out of services and transfer of participants to active agencies.

Response to Unacceptable Local Agency Proposals

In the event that a current WIC local agency submits a Proposal which in the judgement of the HEALTH fails to meet the requirements of the RFP or is evaluated as an unacceptable Proposal or if there appears to be a likelihood that the agency will not be accepted as a WIC provider after the evaluation process, the State agency will advise the local agency as to the deficiencies in its Proposal. The HEALTH may offer

suggestions to the local agency regarding how it may revise its Proposal to be acceptable and satisfactory and provide the local agency with a reasonable opportunity to modify its Proposal. The State will set what it determines to be a reasonable deadline by which time the local agency must submit a modified and acceptable Proposal or have its Proposal rejected.

Advertisement of Request For Proposal

The State Agency shall advertise the issuance of the Request for Proposal on the state website and is available statewide. The posting will provide the RFP and guidance for responding as a potential contractor.

The State Agency will also hold a Respondent's Conference at which potential responding agencies may seek additional information and clarification from State representatives to assist them in preparing their Proposal.

S-2 DISQUALIFICATION OF LOCAL AGENCIES

- A. The State agency may disqualify a local agency:
 - 1. When the State agency determines serious noncompliance with Program regulations and the Local Agency Agreement which the local agency has been unable to correct, given reasonable opportunity to do so.
 - 2. When the State's Program funds are insufficient to support the continued operation of all its existing local agencies;
 - 3. When the State agency determines, following a review of local agency credentials, that another local agency can operate the Program more effectively and efficiently;
 - 4. When a local agency fails to meet such standards used in the selection of local agencies described above as are appropriate and applicable; or
 - 5. When a local agency is debarred and/or suspended from participating in any transactions involving federal funds or other assistance under the terms of 7 CFR Part 3017.

- B. The State agency shall notify the local agency of any additional State-established criteria. In addition to any State established criteria, the State agency shall consider, at a minimum:
 - 1. The availability of other community resources to participants and the cost efficiency and cost effectiveness of the local agency in terms of both food and administrative and program services costs;
 - 2. The percentages of participants in each priority level being served by the local agency and the percentage of need being met in each participant category;
 - 3. The relative position of the area or special population served by the local agency in the Affirmative Action Plan;
 - 4. The local agency's place in the local agency priority system; and
 - 5. The capability of another local agency or agencies to accept the local agency's participants.

- C. When disqualifying a local agency from the Program, the State agency shall:
 - 1. Make every effort to transfer affected participants to other local agencies without benefit disruption;
 - 2. Provide the affected local agency with written notice not less than 60 days in advance of the pending action which includes an explanation of the reasons for disqualification, the date of expiration of a local agency's agreement, the local agency's right to appeal; and
 - 3. Ensure that the action is not in conflict with any existing written agreements between the State and the local agency.

S-3 PERIODIC REVIEW OF LOCAL AGENCY QUALIFICATION

The State agency will conduct periodic reviews of the qualifications of authorized local agencies, through local agency reviews and periodic and special monitoring as warranted. Based upon the results of such reviews the State agency may make appropriate adjustments among the participating local agencies, including the adjustment of caseload and administrative and program services allocations or funding, disqualification of a local agency or non renewal of an agency's local agency agreement, when the State agency determines that another local agency can operate the Program more effectively and efficiently. In conducting such reviews, the State agency shall consider the factors listed in S-2, above, in addition to whatever criteria it may develop. The State agency shall implement the above procedures when disqualifying a local agency.

S-4 PRESENT SITUATION

Currently, there is a 35% un-served population.

The State is evaluating the need for an additional agency, since two WIC sites have closed this year. One agency opened an additional site and another agency was able to respond to transferring many clients to their site, so the State is reviewing the effect and need. Previous studies have shown that higher administrative costs are associated with increased numbers of small caseload local agencies. It is in the interests of Program efficiency, effectiveness, and stability to maintain the current number of local agencies.

In the event of additional funding, the State Agency may make an assessment and determination as to whether additional agencies are in the interests of the effective and efficient administration of the Program.

LIMITATION OF LOCAL AGENCIES

It is the general policy not to fund local agencies in addition to the number currently operating. This policy is subject to review in the event that funding is increased to an extent which can not be utilized by the current agencies, if actual or potential participants can be more efficiently and effectively served by additional agencies or if it is determined to be advisable to procure specified WIC services or operations from additional providers.

All WIC local agencies must be public or private non-profit health agencies or providers, unless an emergency exists, such as the permanent closing of the only WIC agency(s) serving a town or group of census tracts, as determined by HEALTH, with limited transportation to other clinics.

OPERATION OF ADDITIONAL CLINICS

The Rhode Island WIC Program encourages existing local agencies to establish additional WIC sites, as long as they are associated with on-site non-profit health care, in areas with demonstrated unmet need.

Establishment of any additional site must be with the prior review and approval of the state agency.

Costs of operation of any such site must be met through the local agency's WIC administrative allocation, or from Non-WIC sources.

C-1 CASELOAD ALLOCATION AND ADJUSTMENT

GOAL

To ensure service to the maximum number of women and children allowed by available funds, while protecting the Program from overspending.

PROCEDURE

1. Each year when funding becomes known, the most current monthly figures, from the preceding period of up to twelve months, shall be used as measures for determining levels of caseload allocation. The period to be reviewed shall be that which in the judgment of the State agency, best reflects current and projected caseload capability.
2. The factors utilized by the federal government in deciding on funding shall be given consideration in determining caseload adjustments as well as such factors as:
 - a. The local agency's demonstrated capacity, and its feasible plan, for implementation of expanded caseload.
 - b. Geographical unmet need.
 - c. Number and/or ratio of participants in each priority level being served by existing local agencies and indications of unserved high risk persons.
3. If necessary to ensure full utilization of funds, any caseload below the assigned range or figure at a local agency can be reassigned to other agencies.
- * 4. If statewide caseload is at less than 98% of allocated level or a local agency is at less than 95% of its allocated level or if funds exist to expand the allocated level, caseload and administrative and program services allocations may be allocated at a partial level plus additional allocation based on actual enrollment or participation.

The state agency may also make such interim adjustments to caseload and/or administrative allocations as needed to carry out the Goal stated above.

5. If an agency fails to carry out all requirements of federal and state law, regulations, policies and procedures or terms of the Local Agency Agreement or to provide all required services to any part of its caseload, the State agency may make such adjustment to caseload and local agency funding allocations as it deems necessary to maintain Program services which meet established requirements and criteria to clients or potential applicants and required administrative activities. Such adjustments may include changing the allocation(s) or reassigning any portion or all of such allocation(s) to another agency(ies).
6. Caseload being reassigned will be given to agencies which are within the assigned range or at the assigned figure, giving consideration to the factors described in 2, above.

7. Each quarter, after a caseload adjustment in accordance with the above, the state will reevaluate the need for additional adjustment. If over or under utilization or spending or other circumstances necessitate a caseload adjustment, current or averaged caseload figures should be used as the basis for adjusting a local agency's caseload.

C-2 SPENDING CONTROLSGOAL

To respond effectively and efficiently to situations where available funds will not support existing or projected levels of spending; to prevent overspending. In recent years, considerable debate has taken place within government about the future of WIC and the final funding level. The normal process for allocating funds has been at times severely altered for WIC and for many other federally funded programs. States have not always had a clear picture of future funding and have had to operate WIC in a very uncertain climate in which the prospects of suddenly reduced funding have been very real.

Because of this, and other factors which affect funding or expenditures, such as food price fluctuations, it is necessary to have a strategy for dealing effectively with situations where overspending is occurring or projected. This may require a reduction in caseload, at all or selected local agencies, or other measures to reduce expenditures. As it deems necessary because of actual or potential overspending, the Rhode Island WIC Program reserves its prerogative to take the following measures:

CONTROL OF FOOD COSTS* A. Curtailing Enrollment

While redetermining food dollar, caseload, and administrative allocations for local agencies, a cessation of certifications/recertifications of participants to the Program or delay of benefit issuance may be instituted if necessary to protect the fiscal integrity of the Program and to minimize the need for terminating participants during certification periods.

Enrollment curtailment should be in accordance with the Priority System to such extent as needed to reduce enrollment of participation, statewide, to achieve the level needed to bring spending to within that afforded by available resources. Available resources may take into account funds for the current fiscal year and such funds reliably anticipated and as can be utilized under carry forward and backspending rules. Prudent management should allow for balancing current and projected participation levels to achieve a reasonable level of stability.

B. Reduction of Costs

When funds are insufficient or there is a danger of overspending, the state agency may reduce food costs by such measures as restricting authorized purchase of more costly food types/brands, containers or forms, if nutritionally adequate less costly alternatives are available, and/or by lowering the prices allowed to be charged by vendors. Federal approval will be sought as required.

C. Termination or Suspension of Benefits

If necessary, mid certification delay, withholding, suspension, or termination of benefits will be implemented in proportion to funding limitations.

D. Reduction and Reallocation of Caseload

Caseloads may be reduced and/or reallocated in accordance with relative need. Such caseload changes will be determined through a multi-factor analysis and procedure:

- (1) Reduction of local agency caseload in relation to unutilized assigned caseload, (Measures ability to maintain caseload).
- (2) Reduction of local agency caseload in reverse order of priorities served. If data is incomplete or unavailable, other measures of higher risk service may be used. (Measures service to high risk)
- (3) Consideration of the Affirmative Action Plan in reverse to determine percent of unmet need and most needy areas and "market share" of each local and then determining the reductions by which locals may reach the new state mean (Measures geographic need). The reverse AAP may be updated by utilizing whatever most current economic or health data or state and local caseload data are available.
- (4) An agency which did not expand with previous expansions cannot be held immune from receiving its share of reductions.

E. Administrative and Program Services Funding-Local Agencies

Funding will be recomputed based on the changed level of funding for the total program and based on each local agency's revised caseload.

G – 1 REVISIONS IN PROCEDURE MANUALS

Manuals

- A. Procedure Manual
- B. State Operations Manual

* Procedure

- A. Each new proposed change to WIC procedures shall be reviewed for approval by the Chief, WIC Program.
- B. When approved by the Chief, the policy shall be enumerated according to placement in the appropriate manual.
- C. Policies - State and Local
 - (1) Policies concerning the internal management of the State agency shall become effective when approved by the Chief.
 - * (2) Policies affecting the participation, benefits, requirements and standards for the public, participants, local agencies or vendors whenever possible, will have a period for comment, in accordance with federal regulations and the State Administrative Procedures Act. This period shall be stipulated when the policy is distributed.
- * D. Policies which revise either Manual or the State Plan, except for technical language changes and error corrections, shall be submitted to USDA/FNS Regional Office for review.
- * E. Once internal, Division, Department and FCS approval is received, the policy should be transmitted to Division of Health Services Regulation for filing with the Secretary of State. Appropriate cover form or memo, shall accompany.
- * F. The submission shall stipulate an effective date, not less than twenty days after filing.
- * G. When printing copies to implement and promulgate, check Yes on the State Publication query on the Printing Requisition.
- H. Once in effect, the new policy shall be considered an integral part of the manual and shall be filed therein.

G – 2 USE OF WIC NAME AND LOGO PROHIBITED

The United States Department of Agriculture (USDA) and the Rhode Island Department of Health (HEALTH) WIC Program do not permit the use of the WIC name, acronym “WIC”, or the national and Rhode Island WIC logos in connection with a business or a commercial product. Such use may be mistakenly taken as an endorsement of the business, or the product by the agencies. USDA’s and HEALTH’s policy is to avoid endorsements, directly or indirectly, of any commercial business or product. Also note that the WIC acronym and logo are registered service marks of USDA.

Use of the WIC name and the WIC logos is reserved for official use by Program officials, only. Examples include Program issued identification, public notification and outreach purposes.

- Please inform this office of any commercial use of these identifiers.
- Local agencies should also obtain approval from the State WIC office before initiating any public use of these identifiers (see VII, B of the Instruction), or the RI WIC logo.

If you have any questions about the use of the WIC name or logo, contact the HEALTH Information line at 401-222-5960

Section 2

Eligibility and Enrollment

E-1 VERIFICATION OF PARTICIPANT ADDRESSES

Goal

To maintain a methodical check on the accuracy of participants' addresses, at both local and state level.

Procedure

A. New Participants

1. Community liaison staff will stress the importance of accuracy with local agencies, having local agencies verify addresses (maps, personal checks, objective verification, letters received, rent receipts, utility bills, Medicaid, reliable collateral contacts (must obtain applicant/parent's authorization). Post Office Box alone is not sufficient.
2. Address verification will be regarded as a standard part of the certification procedure. Primary responsibility for providing evidence is the applicant's.
3. Any mailing to a WIC participant returned undelivered will be subject to further review by State staff for the existence of an address for each participant.
4. At the State WIC office, addresses of new WIC participants may be verified:
 - (a) If address is nonexistent or invalid, State office will contact the local agency in writing listing those addresses found to be unverifiable. The local agency will be instructed to flag the participant's chart, review the address in person with the participant, and either verify the address or make the proper changes to verify the address. The State WIC office will be notified within two weeks of this notification as to the findings of the local agency.
 - (b) If suspension is warranted, the local agency shall send a termination notice to the participant.

B. Existing Participants

1. The State WIC office will produce periodic general mailings of information and support to participants by:
 - (a) Securing addresses by local agencies.
 - (b) Preparing message.
 - (c) Securing and addressing envelopes.

2. The State WIC office will specify "Do Not Forward; Return to Sender" on envelope, and
 - (a) When returned, alert local agency of incorrect address.
 - (b) Have local agency reach participant (telephone, clinic contact) re: address, and document the contact in person's file.
 - (c) Make a determination for each return: error, new address, "fraudulent address" given by participant.
 - (d) If fraudulent or misrepresentation by participant, have the local agency interview the participant and pursue suspension or removal from the Program, following proper Fair Hearing and Civil Rights procedure.
 - (e) In three months, the local agency shall review the eligibility of the participant as a new applicant. Suspension shall be reviewed if a serious health risk may result from Program disqualification.

E-3: FUNDING SHORTAGES - DISCONTINUANCE OF PROGRAM BENEFITS

If the State agency experiences funding shortages, it may be necessary to discontinue Program benefits to a number of certified participants. Such action may be taken only after the State agency has explored alternative actions. If taken, the action should affect the least possible number of participants and should affect participants whose nutritional and health status would be least impaired by withdrawal of Program benefits. The State may discontinue benefits by:

- A. Disqualifying a group of participants; and/or
- B. Withholding benefits of a group with the expectation of providing benefits again when funds are available.

When the State agency elects to discontinue benefits to a number of certified participants due to insufficient funds for a period of time, it shall not enroll new participants during that period.

E-4: THE HOMELESS AND HOMELESS FACILITIES AND INSTITUTIONS

Goal

To assure that WIC participants residing in homeless facilities and institutions derive full benefits from the Program and that such facilities and institutions do not accrue financial or in-kind benefits from any person's participation in WIC.

Procedure

In order to secure WIC benefits and participation privileges for residents of institutions and homeless facilities, directors of such facilities must sign a Statements and Assurances document (see Exhibit A) ensuring that the facility will meet the following three conditions:

- A. The homeless facility or institution must not accrue financial or in-kind benefit from a person's participation in WIC,
- B. Food items purchased with WIC food instruments must not be used in communal feeding, and
- C. No homeless facility/institutional constraints may be placed on the ability of the WIC participant to partake of supplemental foods and all associated WIC services made available to participants by the local WIC agency.

The State agency will periodically provide all local WIC agencies with a complete and up-to-date list of homeless facilities in their vicinity which comply with the three conditions described above and which have signed a Statements and Assurances document on file with the State agency.

The State agency will publish a notice annually in a statewide newspaper that includes information on program availability and eligibility criteria, the location of local agencies operating the program, and the three conditions described above. Such notice will also be distributed annually to organizations and agencies serving homeless individuals.

E-5 CONFIDENTIALITY AND DISCLOSURE OF WIC DATA

Goal

To ensure and maintain confidentiality of data collected from and during the WIC certification process from WIC applicants and participants.

Procedure

Disclosure of WIC Data with KIDSNET

- A. KIDSNET has several roles within the RI Department of Health.
 - 1. KIDSNET is the RI Department of Health’s pediatric preventive health services information system. It is the centralized repository for select data from the following public health programs administered through the RI Department of Health:
 - a. Immunization Registry
 - b. Lead Poisoning Prevention Program
 - c. RIHAP (Newborn Hearing Screening Program)
 - d. Family Outreach Program (Home Visiting)
 - e. Newborn Metabolic Screening
 - f. Newborn Level 1 Developmental and Psycho-Social Screening
 - g. WIC Program
 - 2. The programs disclosing data to KIDSNET (as listed above) are RI Department of Health’s public health programs.
 - 3. KIDSNET tracks the provision of pediatric public health services and assesses the unmet health needs of children in RI.
 - 4. KIDSNET acts as a reminder system to health care providers and parents, keeping them abreast of upcoming services and offering reminders of missed services.
 - 5. With parental / guardian consent, KIDSNET may also disclose information to third party entities. Example of third party entities would include:
 - a. Health Care Provider

- b. Head Start Health Care Coordinator
- c. Lead Center Care Coordinator
- d. School Nurse Teacher

B. WIC Linkage with KIDSNET

WIC Federal Regulations allow the disclosure of information provided by participants / applicants to representatives of public health and welfare programs that serve persons categorically eligible for WIC services. This information may be provided to designated health or welfare program representatives for purposes of:

- 1. Determining eligibility for programs administered by the recipient organizations,
- 2. Conducting outreach for such programs.

Select demographic, nutritional and medical information collected in the certification process of WIC infants and children is transmitted to KIDSNET. Public health programs use this information to determine eligibility and provide outreach to eligible WIC families.

C. Authorization for Data Disclosure to KIDSNET

See Appendix 2 for the following documents delineating the chain of confidentiality from WIC to KIDSNET.

- 1. RI Law *Confidentiality of Health Care Communications and Information Act*, PL 5-37.3-4 (Appendix 2-1)
- 2. RI KIDSNET Policy Handbook
- 3. RI KIDSNET Provider Agreement (Appendix 2-3)
 - a. This Agreement documents a Health Care Providers access to, use and protection of, patient related data obtained from KIDSNET.
- 4. RI Department of Health Agreement to Share Information with a Third Party (Appendix 2-4)
 - a. This Agreement documents a Third Party's access to, use and protection of, patient related data obtained from KIDSNET.

SECTION 2 Eligibility and Enrollment

5. RI WIC Program's WIC Participant Eligibility Agreement (WIC – 5) (Appendix 2-6)

- a. The Agreement documents the parent / guardian's permission to disclose demographic, nutritional and medical information to KIDSNET (public health programs), the health care provider and public welfare programs.

Parent / Guardian signs allowing release of medical, nutrition and /or demographic information to child's health care provider for coordination of care.

Also allows release of medical, nutritional and/or demographic information to RI Dept of Human Services, (FS, Medicaid, FIP), Dept of Health (Immunization, Early Intervention, Family Outreach Program, Newborn Screening, and Lead Poisoning Prevention Programs), URI (Co-op Extension) for outreach and eligibility determination / coordination of care. For those programs listed under the Dept of Health, the WIC data would be transmitted into the KIDSNET system and access restricted to those limited programs.

6. RI WIC Program's Request for Release of WIC Information to KIDSNET Program (WIC – 101) (Appendix 2-6)

- a. This Release documents the parent / guardian's permission to disclose demographic, nutritional and medical information to select third parties.

Separate from WIC eligibility determination, the parent / guardian may permit or deny sharing of WIC data with the KIDSNET Program which would permit or deny third parties from accessing WIC data. Third parties would be Head Start nurse coordinators, Lead Center caseworkers, CEDDARR workers and Early Intervention.

If parental permission is denied, the WIC data in KIDSNET is blocked from all programs except those listed in the WIC – 5 Eligibility Agreement.

7. RI WIC Confidentiality Matrix (WIC – 103) (Appendix 2-7) outlines the public health and public welfare programs, providers and third parties who have access to defined WIC data.

SECTION 3

Food Delivery System

FOOD DELIVERY SYSTEM

(Goals - III, Procedures - 300)

Description of System

Department of HEALTH WIC Program

The State of Rhode Island Department of HEALTH WIC Program (HEALTH WIC PROGRAM) operates a statewide, computerized food delivery/management system. This system has four main components: the banking community, vendors, the state agency, and WIC local agencies. The Rhode Island food delivery system consists only of contracted retail grocery or food stores, or pharmacies, located in Rhode Island. Participants receive the Program's supplemental foods free of charge.

In June, 2006 the Rhode Island WIC Program converted to a Web Enabled computer system (RIWEBS) Food Instruments are tailored more to meet the nutritional needs of each individual client. Data is inputted into the system at the clinic and one, two or three months worth of benefits are printed for each qualifying household member. By April 1, 2015 the final food package rule was completed and deployed into the RI WEBS system.

The system now consists of a PC central computer at the state WIC office linked by modem to PCs at each clinic. Clinic configurations range from Novel LAN systems of 2 to 8 PCs, stand alone PC clinics and a few clinics using portable PCs. The state agency computer telephonically polls local agencies on a nightly unattended basis to send and receive data. The central state computer also connects to the bank FTP system to nightly upload and download information pertaining to check issuance, bank payment and rejection activity and a vendor information file consisting of vendor stamp file, peer group prices and authorized vendor by type. Each check issued is designated as to food package and check type and each check type has the capability of different maximum allowed prices depending upon the vendor classification system related to size.

The starting point for the system is with the order and delivery of blank WIC check stock to the State WIC Agency and ultimately to the local WIC sites (See WIC Procedure Manual (Section 320 – Check Accountability). The local agencies begin participant certification. Staff members assign to the applicant a caseload slot, issue an identification (ID) folder, checks, and enter enrollment and nutrition information in the computer such as participant's name, address, food prescription, certification date, , as well as other data. The computer assigns the individual's ID number and household numbers.

The computer maintains the participant's record as active for the duration of the certification period (in most cases, one year). During that time, the computer produces a monthly set of two or three months of checks for the participant as prescribed by the nutritionist. A participant's input data passes through an edit to locate errors. For example, if a participant is coded as a child, the computer checks to see that the transition from date of birth to action date is less than five years.

At the retail store, the participant selects the WIC foods authorized. If an alternate shopper is shopping for the participant, the alternate's signature on the check should match the alternate's signature on the ID card. The grocer enters the cost of the food items on the face of the check in the presence of the participant, in the designated space, and the participant countersigns the check. The grocer verifies that the participant's ID card matches the number on the check, and that the signature on the check match the ID folder signature.

Retail grocers must enter into a written agreement with the HEALTH WIC PROGRAM prior to their accepting any WIC food checks. Once an Agreement is signed, grocers receive a special WIC stamp bearing the store's name and an identifying number. The HEALTH WIC PROGRAM is responsible for supplying the retailers with the special store stamp. Grocers can redeem WIC checks at their banks only if they stamp them with the designated stamp.

After a retailer deposits a WIC check at the bank, the check moves through the banking system in much the same manner as a personal check. After passing through a clearinghouse bank, the check is deposited at the contracted service bank, where the state has set up a WIC account.

The process for paying participating food vendors is in conjunction with participating banks throughout the state. When the retailer delivers a redeemed WIC check to a bank, the bank will post a ledger credit to said vendor's account. At this time, the participating bank sends the deposited WIC checks to the Rhode Island WIC bank. The bank encodes the vendor number from the check on the issue file for that check and then runs a series of prepayment edits upon receipt of said checks. If the check clears all edits, the bank remits the funds to the vendor's bank.

At this point the WIC contract bank charges the established Rhode Island Department of HEALTH WIC Program WIC account for monies paid out for redeemed checks. The bank is under contract with the HEALTH WIC PROGRAM to:

1. Reject payment of all checks over sixty days old.
2. Reject and pay over the maximum value of the checks through ACH payments.
3. Stop payment on checks at HEALTH WIC PROGRAM request.
4. Provide web based records of all WIC transactions.
5. Perform the prepayment edits including, but not limited to:

NO WIC STAMP
NO SIGNATURE
EXPIRED
FUTURE DATED
EXCESSIVE DOLLAR AMOUNT
IMPROPERLY COMPLETED
ALTERED OR MISSING DATA
STOP PAYMENT
VOIDED
NOT ON ISSUE FILE

PREVIOUSLY REJECTED
ALREADY PAID

The HEALTH WIC PROGRAM will be charged for these and other services as outlined in the State of Rhode Island and bank agreement.

The HEALTH WIC PROGRAM maintains funds in the bank to cover the obligation estimated for the next three days. Using recent redemption data, the WIC staff determines these estimates, in accordance with amounts spent and current CMIA guidelines in concert with the Controller's Office and the Treasurer's Office.

Food Instrument Reconciliation

Using reports generated by both the bank and the WIC state automated system, state staff will collect questionable redeemed checks and other related information with a method of collection as follows:

A. Bank Reconciliation

After the close of each day, the bank submits to the HEALTH WIC PROGRAM a transaction file of paid and rejected checks. This information is matched against the state file sent each night to the bank of checks issued and voided. The files are merged, and the HEALTH WIC PROGRAM learns the difference between the amount obligated for food costs, and the amount that WIC participants actually expended. This difference is added to or subtracted from the next drawdown of federal monies.

B. Check Reconciliation (monthly from the bank in file format and on fiche)

An automated check reconciliation.

This report provides an analysis of each check the bank has processed. The computer has an average price index that fluctuates according to price changes. Checks that exceed the average price for the items specified are identified and the amounts of overage are provided. The state monitors will use this report to locate vendors with overcharges and take the appropriate action.

The amount of overcharges is forwarded to the retailer, who in turn must submit payment to the Rhode Island Department of HEALTH WIC Program for the amount of overcharge. Checks received by the Rhode Island Department of HEALTH WIC Program will be credited back into the WIC account established at the state level. Stores that overcharge will receive notice in writing. Warnings, sanctions and other steps are taken to correct the problem.

Checks that do not match during this reconciliation process are listed and investigated by the HEALTH WIC PROGRAM staff. These unmatched checks fall into the categories in the table listed above.

Monthly, the computer system and the Vendor Unit perform a detailed vendor specific analysis. It is then matched with participant and vendor information and vendor for volume, average price, and any irregularities analyzes checks.

As staff resources allow, the state takes a sample of checks to investigate overcharges, the presence or absence of an authorized WIC vendor stamp, and any other discrepancies. Investigation follows significant abnormalities noted, and appropriate measures are taken.

**FD-1 Lost or Stolen Check Procedures
(Procedure Manual Sec.320)****Goal**

To protect the WIC Program from financial obligations resulting from the redemption of stolen WIC checks.

Procedure

The following procedures will be adhered to by Rhode Island Department of HEALTH WIC Program and local agency personnel in cases involving theft, and/or loss of checks:

- A. The local agency will phone, within a reasonable time, with relevant information. The call should be directed to the staff member who maintains the computer "Bad Check" Register and Check Alert Log Book or, if absent, to the alternate. If both are absent, the staff person who takes the call will record the information in the Log that is maintained on the WIC shared site on the DOH network.
- B. A log number will be issued to the Local Agency for each lost or stolen check. These numbers will be consecutive and entered into the Register along with date of alert, check number, local agency number, description of loss and void instructions. The Local Agency will fill out a WIC-10 (Lost/Stolen check form) with the log number filled in.
- C. If replacement checks are requested and authorized by the State Agency, reissued check numbers must be entered into the computer Register. The replacement food package must be prorated to reflect the remaining days of the check month period minus one week to notify vendors and the bank and/or minus any redeemed checks for the period. Local agencies will fill out the WIC-10A that includes the replacement check numbers. This form is sent to the SA.
- D. If a "stop payment" order is to be placed on checks, the responsible staff person will coordinate with Vendor Staff to alert stores. The Program Chief will be notified. A "Stop Payment" WIC Checks Notice will be prepared and mailed/e-mailed to all WIC Vendors.
- E. Local agency will notify the police department of any theft from the agency.
- F. Liaison will verify that the appropriate police department has been notified of any possible theft.
- G. When a completed WIC-10 (WIC CHECK ALERT ORDER) is received from a Local Agency, the responsible person will file it in the Check Alert Log Book. If a form is not returned within a week, that person will follow up with the Local Agency.

H. Replacement of Checks

1. Checks that have been received by the participant or alternate shopper may not be replaced except as set forth below (I.2).
2. Local agency will notify the participant that if lost or stolen checks are found they cannot be used. The checks should be returned to the local agency. If dates are still valid, checks may be reissued based on number of checks returned.

I. Assistance to Participants

1. When a local agency requests State Agency assistance due to Inadequate Participant Access, the liaison will help the local agency to identify available food resources (ex: formula supplies, food closets.)
2. No replacement checks may be issued unless the Program Chief or his/her designee authorizes such issuance under exceptional circumstances. Evaluating exceptional circumstances shall include, but not be limited to, consideration of the following factors:

- a. There is local agency documented undue hardship to the participant. Undue hardship is considered:

- * Loss of formula checks which is a direct threat to the nutritional status of the participant
- * High risk status of participant
- * Chronic illness or medical condition
- * Difficult guardian situation
- * Others determined by the Program Chief
- * Family income below 185 percent of poverty level

- b. There is corroborative evidence that the loss was the result of unavoidable catastrophe or crime, and evidence that the receiver(s) of the checks took reasonable steps to safeguard the checks.
- c. Bank records have been reviewed to see if originals were redeemed.
- d. Liaison and Local Agency have investigated whether participant (or agent) redeemed originals.
- e. Any possible theft was reported to police.
- f. The payee's history of check loss. Consider whether the payee is responsible enough to provide the WIC food to the infant or child. Consider if another payee should be assigned. Replacement checks should not be issued to a payee more than once in any twenty-four month period.
- g. The payee signs a witnessed statement giving details of loss, and stating the payee:

Did not authorize anyone to receive or redeem the checks.

Did not receive any benefit therefrom.

Is willing to appear in court to give evidence regarding the loss.

Is making the statement for the purpose of obtaining replacement check(s).

J. Reimbursement to Vendors

Any voided or reported lost, stolen or damaged checks submitted for reimbursement and rejected by the bank will be evaluated by the Program Chief or his/her designee, to determine whether reimbursement will be made. There is no obligation to reimburse vendors for any voided or stop payment check. Such a decision will be based on consideration of relevant factors including, but not limited to:

1. Whether all proper redemption procedures had been followed.
2. The vendor's efforts to validate each of the redemptions at the time of the redemption.
3. The vendor's justification for having participated in the redemption.
4. The vendor's witness credibility and willingness to cooperate in any subsequent investigation and prosecutions.
5. Whether a notice of stop payment had been sent to vendors.

Any such exceptions, furthermore, must be in the interests of the Program's accountability and protection of funds to serve the optimal number of eligible persons.

K. Follow-up - Questionable Redemptions

The State Agency data, liaison and vendor staff will continue to monitor for redemptions of original or replacement checks. If the original checks are redeemed the state and local agency will confer on an appropriate course of action:

1. Determine which checks were redeemed and by whom.
2. Determine whether all proper redemption procedures were followed.
3. Determine how to prevent any improper redemptions from reoccurring, either by the particular participant/family or payee, or at the local agency in general.
4. Determine appropriate participant or vendor education and/or warning notice, or agency corrective steps.
5. Determine sanctions as appropriate (see Procedures Sec. 242 and Operations Sec. 3, Vendor Monitoring).
6. Place payee on monthly check pickup schedule for at least the next six consecutive certified months (term doubled for a second occurrence for a payee).

OPERATION OF THE RETAIL VENDOR MANAGEMENT SYSTEM

The objective of the state's retail vendor management system is to prevent, detect and correct or sanction possible or actual fraud, waste and error; to efficiently and effectively deliver food benefits to insure participant convenience and access; to select, authorize and maintain the authorization of only those vendors who demonstrate that they are, will be and continue to be a benefit to the Program and to train vendors so that they may better comply with WIC Program requirements in order that each vendor will be a benefit to the Program. In this way, the fiscal and nutritional integrity of the Program is protected.

Definition of Vendor

The word, vendor, means and includes the *grocery or pharmacy* vendor specified in a Vendor Participation Agreement, a business in process of applying to be a participating WIC *grocery or pharmacy* vendor; the business and any person, firm, corporation officer, owner or manager or entity who/which has, has had or having a controlling or partnership (>45%) interest in, or managerial control of, such a *grocery or pharmacy* vendor or business, or any individual who participates in the transaction of a WIC check other than the WIC payee or alternate shopper authorized to transact the check, or bank or WIC staff in the performance of their duties.

No grocery or pharmacy vendor will be accepted or continued on the Program that would be a detriment to the effective and efficient administration of the Program.

Vendor Authorization

Only properly authorized vendors are allowed to participate in the Rhode Island Program. The state uses a uniform vendor application form for all vendors applying for Program participation. The locations of Rhode Island WIC vendors have been tracked by zip code for the purpose of assuring that food vendors or pharmacies are located in areas accessible to participants and that the number of food vendors or pharmacies servicing the area is sufficient. All applicants are reviewed for ability to stock and provide Program food benefits; willingness and ability to operate in accord with Program regulations, guidelines, and procedures; business integrity; potential for risk; and benefit to the Program. **Changes in ownership/control, etc. Are grounds for authorization review.** The agency's ability to effectively monitor and educate vendors is also considered in approving additional vendors (see Vendor Applicant Selection, V-1) **(see Change of vendor ownership, V-12.)**

Online Vendor Application System:

The Online application system was developed and implemented in 2013 to automate the basic paper application with an online application. The online application will benefit both the vendors and the WIC program. The applicants will know when they make a mistake and what they need to do to correct it with the help of the validation controls. Also the vendors receive an email as they submit their application stating their confirmation number and State office contact information. This will enable the applicants to check the status of their application faster. Additionally, this

transition will improve tracking the applications through the state office process. Data consistency will increase by capturing all the required information, conducting electronic price survey and increasing productivity of the Program by reducing processing time.

Vendor Agreement

No party may accept (authorized participants and proxies excepted) or deposit WIC checks or otherwise attempt to conduct WIC vendor activities without first entering into a written Vendor Participation Agreement with the State Agency. Agreements are in effect for up to eighteen months subject to termination, disqualification, suspension and extension provisions. A standard vendor agreement form is in effect statewide. This agreement provides for compliance with all regulatory requirements (see Vendor Participation Agreement.)

Vendor Evaluation, Monitoring and Sanctions

The State agency assumes responsibility for vendor monitoring and sanctioning. State agency staff makes site visits to authorized vendors. Vendors are selected for site visits on the *basis of potential for risk* and/or representative sample selection. In the event that violations of Program regulations and rules are discovered in the course of vendor monitoring or review of records or reports from other parties, Program procedures provide for appropriate corrective measures. These measures include sanctions, warnings, and education. Sanctions may include claims for repayment, probation, disqualification, termination or other appropriate action.

The State agency also conducts compliance investigations and inventory audits in order to determine possible violations. Violations uncovered through this method are also dealt with through vendor education, warning and/or sanction, as appropriate.

Section 4

Supplemental Foods

SUPPLEMENTAL FOODS

(Goals - IV, Procedures - 420)

B-1: SELECTION OF WIC ALLOWED FOODS

GOAL

To ensure that supplemental foods provided are good sources of nutrients lacking in the diet of the target population, contain food costs and administrative burdens and take into account the different nutritional needs and food preferences of participants.

PROCEDURE

Once every two years, or as needed for the efficient and effective operation of the WIC Program, as determined by the Program Chief, the allowed foods will be reviewed for inclusion of additional items and removal of items which no longer meet federal and state criteria. The decision to include or exclude any item(s) will be made by the Program Chief with input from the WIC fiscal manager, client services manager and vendor manager. To be included, foods must meet the following criteria:

Acceptance as an allowed food will be based upon reasonable determination of whether or not the food promotes the effective and efficient operation of the Program including such factors as nutrient composition, relative cost, product availability, appropriateness to the operations of the food delivery system, the purpose, goals and objectives of the Program, and the nutrition, health and well-being of participants. Foods must meet the requirements specified for supplemental foods in Federal WIC Program rules as well as other criteria described in this Policy.

Food products must have been on the market in Rhode Island, statewide, for at least one year, at the time of the review, be available statewide and not include artificial sweeteners.

Single serving or individual portion packages, containers etc. will not be allowed. Cereal packages must contain at least twelve (12) ounces, net weight and cheese packages must contain sixteen (16) ounces, net weight. Only the lowest price brand of milk, deli American cheese, fish, peanut butter, beans and eggs available at each vendor will be allowed for purchase with WIC checks (eg. generic or store brand or lowest price label brand).

The product packages should not contradict the Program's goals of positive nutrition and health practices, nor should promotional messages. If a product is a WIC allowed item or is being considered for inclusion, the front or most prominent side of the package must be clearly labeled in a manner that permits it to be distinguished by most participants from similar products which are not,

or are not being considered for inclusion as, WIC allowed foods.

Products which no longer meet federal or state selection criteria may be removed from the WIC Allowed Foods List, as soon as practicable.

Certain high priced types, or brands or packages (some percent above the average price for the type, as determined by the state agency) may be removed from the allowed list or denied inclusion.

As long as at least one food from a food package group is approved, the Rhode Island WIC Program is under no obligation to approve additional foods.

Section 6

Financial Management

Section 6-1

FINANCIAL MANAGEMENT
(Procedures Sec. 600)

Description of Financial Management System

Letters of Credit

The Rhode Island Department of Health is notified of the amount of funds available by Letter of Credit. This figure usually represents one quarter (1/4) of the State's yearly allocation, plus or minus any amount of reallocation. This approved funding level can then be drawn upon to fund the WIC Program for the succeeding quarter. The Automated Standard Application for Payments (ASAP) system is used to initiate drawdown of funds.

Monies are requested on a projected need basis according to the daily collected balance report as reported to Financial Staff of the WIC Program by the contracted bank. This report is used to eliminate excess cash on hand by the State Agency. A direct wire transfer is performed to transmit monies from the Federal Reserve Bank to the contracted bank for deposit. Once completed, the drawdown request is receipted via computer with the General Treasurer. A corresponding adjustment is performed each month to offset the cumulative amount of state receipts of these funds transfers with their expenditure at the bank.

Local Agency Allocations

The Rhode Island Department of Health WIC Program provides each of its local agencies with a quarterly allocation based upon assigned caseload that represents the maximum quarterly reimbursable expenditure for each agency. Allocations may be adjusted in relation to caseload maintained, as directed by the HEALTH.

Allocations are made in accordance with Goals I, and VI, other provisions of this Section, and the Local Agency Agreement.

The Rhode Island Department of Health WIC Program requires the local agencies to submit a monthly WIC Actual Expenditure Report, supported by two additional reports: 1) Staff Time for Nutrition Education and Nutrition Services and Administration; 2) Monthly Nutrition Education Expenditure Report, and Monthly Nutrition Services Administration Report (See Procedure Manual, Section 612 for description of use of reports). These reports are used by the RIDH as a monitoring tool to observe how WIC monies are spent. Reimbursement to local agencies will be made upon

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review and approval by HEALTH for allowable costs reported on a monthly basis, in relation to caseload actually maintained.

All local agencies have been instructed that documentation must be kept for NSA Costs being charged. Ongoing assistance and monitoring of reporting procedures is provided via telephone and/or site visit conferences between HEALTH and local agency WIC staff.

All local agencies have been instructed by HEALTH staff on the purpose of Federal Management Circular FMS-74-4, "Cost principles applicable to grants and contracts with State and local governments." The intent of this circular is designed to provide the basis for a uniform approach to the problem of determining costs and to promote efficiency and better relationships between grantees and the Federal Government.

Disbursement Procedures

Local Agencies

Local Agencies are reimbursed to cover one month's operating costs. No monies are disbursed to local programs to cover food or food delivery computer system costs; both these costs are handled centrally by the State.

Reimbursement is made on a monthly basis by the state on an invoice voucher. The HEALTH WIC Program prepares the invoice voucher after verification of the charges being requested has been done. This form is signed by the proper designated authority in the Health Department's Division of Management Services, logged into a computer billing system, and then processed through the state Division of Accounts and Control, which in turn processes the voucher to the General Treasury Department, where the check is completed and mailed out to the vendor.

State WIC System Description

The state of Rhode Island, WIC Program is currently hosted by CSC (Covansys) a Kansas, IT firm. The CSC (covansys), NET internet automation system consists of software written for PC- based computers that reside in WIC clinics, Local Agency site and the State office. The WIC clinic software allows the user to search and view all participant data, document provision of WIC services, and produce food instruments for participants on demand.

The web-enabled architecture operates in a real time web-enabled environment and allows participant information and transfers to occur instantaneously. Food instrument issuance information is transmitted to the contract-banking agent on a night basic.

The Central Administrative site software allows the WIC coordinator to perform administrative tasks as well as produce standard and ad-hoc reports for all participants with in the agency.

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The State Office software allows state WIC staff to produce standard and ad-hoc reports for all participants with in the state. The Vendor system component also resides at the state office where it automates the tasks for the Vendor Management Unit.

- Platform: (web-enabled) The State WIC Office application run on a Citrix presentation server.
- Application: Written in Microsoft Visual Basic 6.0 for 32-bit Windows environments.
- Database: The State Office application run on Oracle 10 G

Current Technology environment:

Host Site (CSC) Covansys Hardware/Software

<u>Servers</u>	<u>Configuration</u>
1. End of Day server (mirror)	Single Xeon Dual Core, 4GB Ram, 2x 146 GB HDD
2. Citrix Server 1 (mirror)	Single Xeon Dual Core, 4GB Ram, 2x 146 GB HDD
3. Citrix Server 1 (mirror)	Single Xeon Dual Core, 4GB Ram, 2x 146 GB HDD
4. Database Server	Dual, Dual Core, 8GB Ram, 3x 300 GB HDD (RAID 5)
5. EXS Server (Host)	Dual, Dual Core, 8GB Ram, 3x 300 GB HDD (RAID 5)

Software

1. Windows 2003 standard edition
2. EXS 3.5 standard edition
3. Windows 2003 enterprise edition

Local Agency Hardware (Dell)

- Base Unit: OptiPlex 780 small form factor base standard PSU (224-2476)
- Processor: OptiPlex 780 core 2 duo E7500 with VT/2.93GHz ,3M 1066FSB
- Hard Drive: 250 GB SATA 3.0Gb/s and 8MB Data Burst Cache

State Office Hardware

- Base Unit: OptiPlex 760 small Minitower base standard PSU (224-2211)
- Processor: OptiPlex 760 core 2 duo E8400/3.0 GHz, 6M, 1333 FSB
- Hard Drive: 160 GB SATA 3.0Gb/s and 8MB Data Burst Cache

System Software:

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- Oracle 10 G (Database enterprise edition)
- Citrix Systems – Meta Frame Access Suite 3.0
- Dell ASAP Software
- Secure Gateway installation configuration

WIC State Office information system annual cost survey

The annual WIC information system cost survey, fulfill (FNS) financial management audit requirements and provide data useful in tracking trends in information cost.

Three major cost categories are broken out on the cost survey:

- New MIS acquisition costs
- On-going operations/maintenance costs
- Major commercial hardware and software upgrade costs

See MIS system annual cost survey

Bank Contract Costs

Method of reimbursement is described under "Food Delivery System."

Outstanding Obligations

Federal requirements mandate the reporting of outstanding obligations. Funds are maintained to ensure that payment can be made when these obligations are redeemed. At the State level, administrative costs are reported on a modified accrual basis according to State Agency policy.

In addition, outstanding food obligations are available through the automated check reconciliation system and are reported on a monthly accrual basis to the Regional Office on Form FNS-798, WIC Monthly Financial and Program Status Report.

Management and Program Income

Administrative interest income earned on funds held by the WIC bank is deducted from the bank's monthly service charge for the system maintenance.

Food Rebate Funds See Goals VI,

Indirect Cost Rate

The WIC Program is required to pay indirect costs, on state office operating expenses in accordance with the federally approved indirect cost rate.

Nutrition Education Costs - Local Agency

HEALTH has developed a format for documenting that one-sixth of administrative funds is spent on Nutrition Education activities as delineated in the Federal regulations. These regulations now require all staff funded through WIC to perform periodic time studies that illustrate time devoted to the major WIC activities. Technical assistance is available to local agencies to assist them in documenting nutrition education and other costs. These forms have been integrated into the reports submitted by local agencies (see Procedure Manual, Sections 613 & 614 for description of use of reports).

Food Rebate Funds See Goals VI,

Indirect Cost Rate

The WIC Program is required to pay indirect costs, on state office operating expenses in accordance with the federally approved indirect cost rate.

Nutrition Education Costs - State Agency

HEALTH has its Nutrition Education Program directed by a State WIC Nutrition Coordinator. In addition to salary, funds are set aside at the State level for printing of nutrition education materials, for purchase of CDs, reference materials, and equipment, for a portion of the state office administrative salaries for monitoring of nutrition education and for travel and other costs.

These total expenditures plus nutrition education expenditures at local agencies are budgeted to amount to at least one-sixth of total administrative funds. The state fiscal staff monitor expenditures on a monthly basis to ensure the one-sixth requirement is met.

Nutrition Education Costs - Local Agency

HEALTH has developed a format for documenting that one-sixth of administrative funds is spent on Nutrition Education activities as delineated in the Federal regulations. These regulations now require all staff funded through WIC to perform periodic time studies that illustrate time devoted to the major WIC activities. Technical assistance is available to local agencies to assist them in documenting nutrition education and other costs. These forms have been integrated into the reports submitted by local agencies (see Procedure Manual, Sections 613 & 614 for description of use of reports).

Breastfeeding Promotion Costs

HEALTH has earmarked funds at the state level for a Breastfeeding Promotion Program directed by the State WIC Breastfeeding Coordinator. Allowable breastfeeding costs include, breastfeeding aids, salaries and benefits for training, education and development, a portion of state office administrative salaries for the monitoring of breastfeeding promotion, travel and other costs.

Total state and local agency breastfeeding expenditures are a budgeted amount in addition to the 1/6th nutrition education expenditure requirement. HEALTH's breastfeeding budget is determined based on the number of pregnant and breastfeeding women in the state, as a percentage of the number of pregnant and breastfeeding women in all states. The state fiscal staff monitors expenditures on a monthly basis to ensure breastfeeding funds are expended.

Breastfeeding Promotion Costs - Local Agency

HEALTH has developed a format for documenting local agency salaries for time spent on breastfeeding promotion and for other breastfeeding activities. The state fiscal staff tracks breastfeeding expenditures using the monthly and annual expenditure reports submitted by the local agencies.

Allocation Standards

Presently, WIC NSA funds are allocated to local agencies on the basis of assigned caseload but are adjusted in relation to an agency's maintenance of enrolled caseload as directed by HEALTH. In the event of an agency's failure to maintain caseload as directed, payments may be reduced or withheld. The agency may be held liable for any over expenditures, in food or administrative costs, related to such failure. Future payments to the agency may be reduced to offset the amount of any claim.

If there is a danger that statewide caseload conversion earnings will be insufficient to support allocated levels allocations may be made at 90% assured and the balance allowed for caseload actually maintained between 90% and 100% of allocation.

Nutrition Services and Administration Funding Procedure

As part of the WIC State Plan development process each year, HEALTH establishes a State Plan Committee to provide an opportunity for WIC local agencies to participate in the development of the State Plan. The committee generally includes a representative sample of local agencies; large and small, rural and urban and of diverse organizational makeup. These locals also represent a range of racial/ethnic groups. This committee reviews the area of local agency administrative and program services funding as well as other aspects of Program functioning.

The state agency has also been guided by the considerations of previous state plans and public hearing comments on the method of administrative funding procedure. The criteria considered were:

Type and ratio of staff needed to serve the estimated numbers of participants. The number of participants served by the Local Agency. Salary variations of personnel among Local Agency staffs. The types of equipment needed to be purchased for certification. Local agency costs incurred for providing bilingual services and material. Costs related to special population groups. Costs related to demographic composition. Costs related to financial and in-kind resources and other program funds available to local agencies. Costs related to caseload activity levels.

The advantage of a "negotiated" determination of administrative funding for local agencies has been extensively considered. Although a "negotiated" administrative funding theoretically can address on a very individualistic basis the needs and capacities of local agencies, the problem of applying a fair standard acceptable to all locals is a very prohibitive concern. It has been decided, therefore, to forego a negotiated determination, in favor of a more objective formulation.

After consideration of the above, HEALTH has determined that the allocation to each local agency will be predicated on the assigned caseload with total administrative funding allocated by the following formula:

$$\begin{array}{rcl}
 \text{Total Number} & & \text{Admin. Cost} & & \text{Quarterly} \\
 \text{Of Assigned} & \times & \text{Allocated per} & = & \text{Admin.} \\
 \text{Slots} & & \text{Enrollee} & & \text{Allocation} \\
 & & & & \text{per Quarter}
 \end{array}$$

In addition to the assigned number of slots, and related administration allocation, the state may permit an agency(ies) to enroll additional persons and may reimburse the agency(ies) on the basis of persons enrolled. In order to ensure service to the number of persons permitted by available food funds, the state agency may make adjustments to a local agency quarterly caseload and/or administrative and program service allocations, and/or may limit reimbursement in relation to caseload actually maintained.

Recovery of Vendor Claims

The state agency shall retain funds collected by the recovery of claims assessed against food vendors or funds not paid to food vendors as a result of reviews of food instruments prior to payment. The State agency may use these funds for administrative and program services purposes, provided that the base amount from which the percentage may be taken is not established until after the vendor has had opportunity to correct or justify the error or apparent overcharge. The State agency shall not transfer any such funds from its food account to its administrative and program services account until after the vendor has exercised this right, if the vendor chooses to do so. After such funds have been transferred, the remainder shall be used to pay food costs. When these funds are used for administrative and program services purposes, the State agency shall report such expenditures to FNS through routine reporting procedures.

Money received by the State as a result of civil money penalties or fines assessed a vendor and any interest charged in the collection of these penalties and fines shall be considered as program income.

The state agency shall maintain documentation to support the level of funds retained under this paragraph by the State agency for administrative and program services purposes

Backspending and Carry-Forward

Backspending

The state may, at its option, expend state or federal funds allocated to the state agency for food costs incurred in the preceding fiscal year.

Carry-Forward

The state agency may, at its option, carry-forward a portion of the state or federal funds allocated to the state agency for food costs and for administrative costs in any fiscal year, and to expend funds carried forward in the immediately following fiscal year.

Any backspending or carrying forward of funds under this policy shall be in conformance with federal and state law, regulation and administrative instruction.

Basis of Accounting

The State of Rhode Island uses a modified accrual basis of accounting. Monthly administrative outlays for the HEALTH WIC Program are taken directly from the state's central accounting system, RIFANS and are listed by payee, account number, voucher number and payment amount.

A review of outstanding obligations is conducted on a monthly basis and reported on the WIC 798 report.

Proposed Budget

The proposed budget will be submitted no later than thirty days after the state's annual grant level, including any negotiated amount, is announced. The USDA budget format will be used.

AUDITS
(Goals - VI, Procedures - 622)

Goal

To assure the financial integrity of WIC Program operations and to use audit reports as a basis for formulating guidance and directions issued to local agencies in the area of financial management.

Background

In order to comply with Federal WIC Regulations, Section 246.20 mandates audits of State and local agencies every two years; the following audit procedures have been followed:

On a biannual basis, a financial review of each Local Agency is performed. All expense records are reviewed and results are shared with the agency.

Annually, each Local Agency is required to have an independent audit performed and the audit report is to be submitted to the state office.

To assist and prepare each local agency for audit requirements, a copy of "Audit Guide 8270.13" was distributed to each agency prior to the audit process.

Site visits were made to all local agencies to assist fiscal personnel in the area of financial management. A copy of the Federal Management Circular FMC-74-4; "Cost principles applicable to grants and contracts with State and local governments", was given and reviewed with each local agency fiscal person. Guidance was also provided for preparation of the annual budget and monthly expenditure reports.

Single Audit Act

Under this Act, WIC has been audited annually since FY83, on a rotating basis, by the State Office of the Auditor General. Findings have been addressed as necessary.

Annually, the state agency reviews the organization-wide audit report of each local agency for significant findings having a bearing on WIC and for compliance with the requirements of the local

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agency agreement and OMB Circulars A-110, A-122, A-128 and A-133 and regulations 7CFR3015, 3016, and 3017. Said circulars have been provided to local agencies for guidance.

Future Audits (See Goals, VI)

Financial Records

The State Agency works with each local WIC agency to establish uniform financial procedures to provide sufficient documentation for Program costs reported on their monthly expenditure reports and a clear audit trail for purposes of accountability.

Audit Exceptions

In the event it becomes necessary to reclaim funds as a result of audit findings, several methods are employed as appropriate. The amount of the claim may be withheld from payments to the local agency. If this procedure cannot be used, the local agency is required to submit a check in the amount of the claim. If the local agency refuses to comply, the matter is turned over to the Office of the Attorney General to seek claims action against that agency.

All prior Federal Fiscal Year reclaim amounts will be returned to FNS. Payment will be made either directly from local agency to FNS (documented to SA) or by transfer through the State or by offset. Details would be worked out by between FNS and SA.

Staffing Resources

Position and Description of Duties

Chief - Responsible for the overall direction, implementation, and coordination of the WIC Program.

Sr. Public health Promotion specialist (State WIC Client Services manager/Nutritionist) - Responsible for relationships with local agencies and monitoring compliance with regulations; for supervision of community liaison, Parent Consultants and Program Nutritionist (see SPHPS); for outreach and coordination with health and human service agencies and for educational programs and materials and community relations; responsible for developing and evaluating the Nutrition Education Plan; for reviewing and ensuring development and implementation of local agency nutrition education plans and for providing consultation, training, and resource materials to local agencies in all aspects of WIC nutrition and nutrition education.

Public Health Promotion Specialist (2 FTE) Public Health Nutritionist - Assists the State WIC Client Services Manager, especially in areas of nutrition services monitoring, local staff training and education, developing client educational materials, and recruitment and retention;

WIC Breastfeeding Coordinator (1 FTE) – Coordinates the WIC Peer Counselor Program, electric Breast Pump Program, serves on the Breastfeeding Coalition and works with community partners to support and promote breastfeeding in the community.

Community Health Liaison (1 FTE) - Maintains regular and frequent contacts with local agencies to explain and review WIC procedures and to evaluate local agency program operations; conducts outreach activities and fosters relationships with allied professionals and organizations; interviews WIC participants to obtain feedback concerning program services and operations.

Health Policy Analyst (Deputy Chief) – Responsible for fiscal, caseload, and program data and reporting; coordinates with state computer system, supervises the IS staff, coordinates hardware for SA and LA;

Health Policy Analysis (Grants Manager)- Responsible for financial management, operations and reporting state agency level fiscal operations; records, monitors and reconciles expenditures; prepares federal and state fiscal reports; manages procurement and Office equipment needs.

Chief Field Investigator (1 FTE) - Responsible for vendor selection, authorization, monitoring and education: investigations and sanctions and supervises staff involved in conducting vendor related activities. Prepares food expenditure reports and forecasts; and manages the Farmers Market Nutrition Program.

Vendor Monitor (1 FTE) – Monitors, trains and provides technical assistance to Vendors who are authorized by the Program.

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Project Manager (1 FTE) – responsible tracking, implementation, planning of IS projects for improved efficiencies in the Program.

Administrative Aide (1 FTE) - Perform clerical and secretarial tasks including word processing and filling agency supply requests; support for vendor monitoring activities.

Vendor Manager (1 FTE)- Responsible for overseeing the Vendor Unit. Identifies 50% vendors, ensures cost containment and is responsible for the ongoing Vendor Unit functions.

Parent Consultant – Provides program outreach, information to communities and provides feedback to SA staff on the Program’s effectiveness.

FISCAL PROCEDURES AND CONTROLS

COST MONITORING

SF-1: AVERAGE CHECK PRICE MONITORING

Goal

To monitor the average value of a WIC check on a daily basis.

Procedure

- A. Solutran reports daily and the following data are obtained.
 - (1) Rhode Island WIC Program balance of funds on hand at bank.
 - (2) Number of checks redeemed to date for the specific month.
 - (3) Dollar amount of the number of checks redeemed to date for the specific month.
- B. To derive the cost per check the following derivation is performed:
$$\frac{\$ \text{ amount of the } \# \text{ of checks redeemed}}{\# \text{ of checks redeemed to date for the specific month}}$$
- C. Once the cost per check is derived, the amount is charted on a spreadsheet maintained by the Grants Manager.
- D. Any abnormal rise (except for the first eight days of the month) shall be reported to the Chief, WIC Program.
- E. A significant increase may require revision of food cost projections.

* SF-2: MONTHLY COMPUTER CHECK RECONCILIATION REPORT

Goal

Verification of the Monthly Computer Check Reconciliation Report with the monthly bank statement.

Procedure

A. Monthly Computer Check Reconciliation

1. Add next month's redemption total plus reporting month's redemption total plus one month's redemption total plus two month's prior redemption total. To this amount subtract the prior month's redemption charge to the reporting month.
2. This amount should equal the "Value of Checks Redeemed" total reported on the Monthly Computer Reconciliation Report.
3. To the "Value of Checks Redeemed:" total add the amount of dollars expended on the "Unmatched Check redemption report." This total should correspond with the amount reported on the fiche total of the monthly bank statement.
4. See attached forms A, B, C for example. Add figures from Form A redemptions: $a + b + c + d$ - Form C, line e = Form B, line f.

B. Monthly Bank Statement

1. Verify the return credits and credit memos listed on the bank statement.
2. Utilizing the bank statement total
Less: Return credits
Less: see Credit Memos
Less: see Debit Memos
Less: Credit Memo next statement
Plus: Debit memos next statement
Equal: Fiche total

- 3. Fiche Total
 - Less: Unmatched Redemption Total
 - Equal: Total derived when Monthly Check Redemption Report was verified

- 4. See attached Form D:
 - Add: Line g
 - Minus: Lines h, i, j and k
 - Plus: Line l

 - Equal: Line n

 - Line m Fiche total
 - Minus: Form A, l line n

 - Equal: Form B, line f

**SF-3: METHOD FOR ESTIMATING WEEKLY
FOOD EXPENDITURES**

Goal

To transmit an appropriate amount of funds to Solutran to cover food check disbursements.

Procedure

1. This procedure utilizes the month-to-date expenditures at Solutran to determine the rate of Rhode Island WIC Program spending.
2. Daily, the month-to-date figure for the check redemption is received from Solutran via fax transmission.
3. This total is then divided by the number of banking days to arrive at an average daily expenditure.
4. The amount to cover 3 to 4 days of settlements is then determined.
5. A direct wire transfer is performed, if required, to transmit adequate funds to Solutran.

SF-5: CHECK RECONCILIATION STATEMENT - MONTHLY REPORT

Goal

To reconcile each check to participant to tell if cashed, voided, or unclaimed and the date cashed or de-obligated.

Procedure

- A. Staff will take the reconciliation performed by the computer.
- B. Staff will visually scale for checks redeemed at greater than sixty days from date of issue.
- C. Staff will compose letter to go to the Solutran, advising them of these checks which were not refused as described by the agreement of the State of Rhode Island and Solutran.

SF-7: WIC PROGRAM ANNUAL CLOSEOUT REPORT (FNS 798)

Goal

Beginning with the preparation of the FY15 WIC Annual Closeout, the RI State WIC Program will access the electronic FNS-798 spreadsheet, as informed by FNS.

Procedure

- A. Utilize requirements as established by FNS.
- B. Refer to fiscal year instructions and information papers for completing the WIC Program Annual Closeout Report.

SF 7A: MONTHLY FINANCIAL AND PROGRAM STATUS REPORT (FNS-798)

Goal:

Revised 11/03

Beginning August 1994, the WIC Monthly Financial and Program Status Report (FNS-498) was utilized by accessing the on-line State Cooperative Data Exchange (SCDEX) System. Beginning in FY 2001 the FNS-498 was replaced by the FNS-798 report, which is accessed in the same manner.

Procedure:

- A. As outlined by FNS, NESF-062-4*
- B. Utilize the state agency user manual, which provides descriptions and detailed instructions for the Special Nutrition Programs Integrated Information System (SNPIIS).*

CASELOAD MONITORING

SF-8: CHARTING - CASELOAD MONITORING

Goal

To maintain a monthly count of local agency caseloads.

Procedure

- A. The MIS Unit runs the caseload report from WEBS. This determines a calculated caseload (number of Active participants beings served at an agency and/or specific clinic) by calculating the actual current caseload by adjusting the previous caseload figure (adding any new adds, reinstates, and subtracting terminations, transfers).
- D. This calculated caseload is utilized for monitoring purposes.
- E. Local agencies are provided the caseload numbers on a monthly basis. Trends are established and reviewed by the Client Services Manager who provides the local agency coordinator ideas/solutions to increase or reduce the caseload based on funding and informs the Chief, WIC Program.

SF-9: MONITORING OF NUMBER OF ADMISSIONS TO PROGRAM

Revised 11/03

Goal

To track the level of enrollments to each local clinic.

Procedure

- A. On a monthly basis, WEBS will generate a report, by local agency, which will calculate the number of enrollments which were added to the Program during the particular time frame.
- B. The total enrollments to the Program are charted for each agency by the MIS Manager.
- C. Any abnormal patterns shall be reviewed by the MIS and Client Services Managers and the Chief, WIC Program.

SF-10: COMPLETION OF FNS-798 Report (MONTHLY PARTICIPATION CALCULATIONS)

Goal

Required Federal report. Reported on a monthly basis and identifies the enrollment of each category.

Procedure

A. Number of Participants

This data is generated by WEBS by the fiscal/MIS unit and automatically entered in to the 798 Report.

SF-13: Allocation of State Office Salaries and Fringe Benefits

GOAL

To establish a reliable and accurate method of allocating personnel costs according to function and purpose.

Procedure

Annually, the supervisory staff of the Rhode Island WIC Program meet with the Chief of the WIC Program to determine the rates to be used to allocate state office salaries of the Program to various WIC activities, namely, Administration, Client Services, Nutrition Education, and Breastfeeding Promotion and Support. As with Local Agency staff, quarterly time studies are performed for the state agency staff. The effort is tabulated and used for 798A reporting.

Spreadsheets are maintained that list WIC agency staff and detail annual projected expenditures. The data is used for various reporting requirements, both state and federal.

**SF-14: NONPROCUREMENT OF GOODS AND SERVICES
FROM ENTITIES DEBARRED OR SUSPENDED**

Goal

To ensure a system for non-procurement of goods and services from entities debarred or suspended under 7CFR Part 3017.

Procedure

In compliance with the requirements of 7CFR Part 3017 the state agency will before entering into any contracts or agreements require that applicable entities certify that they and their principals have not been debarred or suspended. The state agency will also review the Nonprocurement List distributed by the General Services Administration and not enter into a contract or agreement with any entity on the list, for the appropriate period of time. The state agency will go to the national database website to search for vendors that may be suspended or debarred.

SF-15 Capital Equipment Acquisition and Inventory Control

Goal

To ensure appropriate management of procurement, logging and tracking of capital equipment.

Procedure

A. Procurement

1. The request is originated from a WIC staff person on a Departmental Requisition.
2. The Administrative Aide routes the paperwork to the Chief for approval, files a copy in the fiscal files under the appropriate fiscal year, and forwards to Management Services.
3. Once the Purchase Order is awarded, the Administrative Aide gives a copy to the originator and files the original.
4. Once the equipment arrives, the originator checks the order for accuracy, completeness, and lack of damage.
5. The originator then initials the bill or gives a note to the Administrative Aide to process payment.
6. The Administrative Aide completes the Purchase Order and fills out a Report of Equipment Acquired and Traded In (A-59). The P.O. and A-59 are forwarded to Management Services, and a copy of the A-59 is given to the Senior Administrative Aide.

B. Inventory Control

1. The Senior Administrative Aide logs the equipment on the WIC Computerized Inventory System from the A-59. If the equipment is to be located outside of the office, the originator completes a WIC-17 for each item and gives it to the Senior Administrative Aide. The WIC-17, after entry is then filed in the agency's inventory folder.
2. The Senior Administrative Aide tags the equipment with the Rhode Island WIC Program inventory tags. These numbers are also logged on the computer.
3. When the state inventory tags are received, the Administrative Aide gives the Senior Administrative Aide the tags that are affixed on the equipment and logged in the computer.
4. When items are acquired by the Local Agency, the WIC-17 is filed in the agency's inventory folder and a copy given to the Senior Administrative Aide for entry on the system.

C. Transfer of Equipment

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1. When any equipment is relocated to an agency, returned from an agency, or relocated in the office, the Senior Administrative Aide must be notified with a copy of the WIC-17. As a courtesy, the originator should also be informed.
 2. The Senior Administrative Aide logs the transfer on the computer and notes the changes on the file copy of the WIC-17.
 3. If the equipment will no longer be at the original Local Agency, a copy of the original WIC-17 will be made and put in the folder of the new agency.
- D. Retirement or Disposal
1. The agency will notify the Rhode Island WIC Program office prior to the disposal of equipment. If approved, the Senior Administrative Aide notes the retirement on the computer system.
 2. If the equipment has a state tag, the Senior Administrative Aide asks the Administrative Aide to prepare an A-60. This is placed in the state or agency inventory folder with the other paperwork.

Purpose

To ensure: The reconciliation of all food instruments (within 150 days) issued under the WIC Food Benefit Program (WIC) are in compliance with the Federal regulations governing the accountability of all issued Food Instruments.

Policy

Food Instruments that the local agency (LA) has in its possession which have been issued and are unusable, or which were issued to a participant and returned to the clinic unusable/unwanted shall be appropriately coded in the system as “voided”. Redeemed Food Instruments must be identified as one of the following: (1) Voided / Issued, (2) Lost/Stolen, (3) Expired, (4) Duplicate, (5) Unmatched. All redeemed Food Instruments will be reconciled to the issued Food Instruments on a one- to-one basis.

Procedures

Reconciliation

The Rhode Island WIC Program, accessing WEBS and banking reports, will utilize a series of monthly reports that provide complete tracking for every check issued. These include:

Bank Transaction Listing: Lists each check cleared by the bank during the processing month, date cleared, dollar amount and transaction code.

Bank Exception Report: Identifies checks that cannot be reconciled to the issue records either because the check number is not recognized as currently valid, or because the check was not identified as voided/issued, lost/stolen, expired, duplicate or unmatched. These checks are researched to determine their final disposition.

Closeout Reconciliation Report: Provides a one-to-one reconciliation report that shows, at a detailed check level, the disposition of each check that was created during the month being closed out.

Checks Rejected by the Bank Report: Lists detailed data of checks rejected by the bank during the screening and prepayment audit.

In addition, the state WIC Office receives check image records of all checks processed during the month. This combination of reports and check images allows the WIC Program to track every check and determine its final disposition. (See attached reports).

SF – 17 Management of Equipment Acquired with Federal Funds- Property Management

Purpose

To assume Compliance with Sub-part C of 7CRF Part 3016

Policy

The Local WIC Agencies will maintain complete accountability and security for all equipment purchased with WIC Program Funds, (computer, printers, etc.) placed in their care. The Local WIC Agencies will be held financially responsible for all equipment lost, damaged, or stolen.

Procedures

All equipment purchased by the State WIC Program will be inventoried on the WIC computer data base system.

- > Once a year a physical inventory will be conducted of equipment purchased with WIC Program Funds and placed in custody of the Local WIC Program.
- > The inventory will be reconciled with the property records to verify the existence, current utilization, and continued need for the equipment. Any discrepancies between quantities determined by the physical inspection and those shown in the accounting records will be investigated to determine the causes of the differences.
- > Any loss, damaged, or theft of equipment will be investigated by the Local WIC Site and fully documented.
- > Stolen equipment will be reported to the State WIC Office as soon after it is discovered as missing as possible. Phone call reports should be followed up in writing including a copy of a police report.

Equipment Inventory

- >> Documentation of expenditures more that \$5,000.00 will be sent to DOA Inventory Control. Inventory Control will assign an equipment number and add the item to the DOA Inventory Listing. An equipment number tag will be forwarded to the location of the equipment and permanently affixed to the item.
- >> A computerized inventory listing is printed semi-annually for each agency showing all equipment numbers, equipment description, cost, date acquired, and the funding source purchasing the equipment.

Section 7
Monitoring

7

Monitoring

(Goals-VII, Procedures-700)

M-1 Local Agency Monitoring

Goal

Ensure the quality and integrity of the WIC operations of each local agency and to develop corrective actions.

Procedure

The State agency for the WIC Program, administered by the Rhode Island Department of Health, is required by Federal regulations (7CFR Section 246.19) to conduct biennial and continuing reviews of local agency WIC programs. The State agency is required to establish evaluation and review procedures and to document the results of these procedures. The purpose of each local agency review is to arrive at a comprehensive assessment of all aspects of the local agency WIC Program, including compliance with the requirements of the local agency agreement and Program procedures such as certification, notification, nutrition education, civil rights compliance, accountability, financial management, food delivery, coordination with other programs, outreach, and fair hearings.

The effective monitoring of local agency operations includes consideration of many kinds of communication and interactions between state agency and local agency. These include staff visits, telephone contacts, written correspondence, formal and informal meetings involving members of the respective staffs, and on-site fiscal reviews, both periodic and as needed, as well as operations records.

Biennial Agency Review

The "biennial local agency review" is one specific vehicle for monitoring the local agency. The review is conducted according to these procedures:

Procedures

- A. The review format is organized according to major areas of WIC functioning. Within each area are questions designed to assess local agency functioning as compared to contractual and procedural requirements and to Federal regulations.
- B. The State agency will contact the local agency chief administrative officer and local WIC

staff to mutually establish a time for the team to conduct an on-site review. A visit will begin with a discussion of the purpose, format and procedures to be followed. A Local Agency Self-Assessment and Monitoring tool will be provided to the agency Coordinator prior to the onsite visit. This tool will be utilized to collect information regarding the agency's implementation of the Farmers' Market Nutrition Program (FMNP).

- C. At the established time, the review team will meet with the local agency WIC staff to go over the areas covered in the review format and secure answers to the questions. Review team members will utilize a combination of discussion with local agency staff, observation of local agency procedures, review of local agency records, and participant interviews, in securing the information needed for the review.
- D. The local agency review process is intended to be a way to identify both strengths and weaknesses of the WIC Program. The review team will conduct the process in a constructive, objective, and professional manner that will result in information that is useful to the local agency. In the course of the review, the team will be sensitive to local needs and deficiencies, and endeavor to suggest feasible corrections and improvements.
- E. If the agency corrects a deficiency before the review visit(s) is completed, the reviewer will decide whether to delete the deficiency, note its correction, or cite the deficiency. Such a decision would be based on the thoroughness and permanence of the correction.
- F. At the completion of the local agency review, the review team will meet with the local agency administrator (and other staff at the administrator's discretion) in an exit conference, giving a verbal summary of findings and recommendations.
- G. Following the exit conference, the WIC State agency will submit a letter to the local agency administrator presenting a formal statement of review findings and recommendations. Positive program aspects, as well as areas in need of further attention to meet contractual, procedural, and regulatory obligations, will be listed. Technical assistance and counsel will be offered to the local agency as needed for the establishment of plans of correction.
- H. Within thirty (30) days of the letter of review findings, the local agency executive director must submit to the State agency a response to the findings, including specific plans of correction and projected dates of implementation (and dates of corrections that have already been made).
- I. The state agency may accept and approve the plan of correction or require revisions in accordance with regulatory, procedural, and contractual requirements.
- J. The local agency review, including plans of correction and follow up findings, will be kept on file in the State agency, and will be used as a reference for the next review.

- * K. At the option of the State Agency the local agency review may be conducted more frequently than biennially if needed to determine the quality and effectiveness of agency operations, implementation of corrective actions, etc.
- L. The state agency shall require local agencies to establish management self evaluation systems to review their operations and those of associated clinics or contractors.

Format and Content

The local agency review format is organized according to functional areas. The content of the questions within each area reflects specific contractual, procedural, or regulatory obligations. In answering the questions, an objective basis is established to arrive at a fair judgment of the local agency's performance and compliance with requirements. State agency and local agency staff will also begin to determine mutually acceptable solutions to problems.

M-2 WIC Participant Interviews

Introduction

State staff or WIC Parent Consultants interview a sample of participants at each local agency in order to obtain participant input into all aspects of the operations of the WIC Program.

Definition - "Participant" may refer to potential, active, or former participants, applicants or denied applicants.

Procedures

- A. Local agency staff should assist state agency liaison staff in scheduling participant interviews and coordinating the interviews with other required participant visits.
- B. A representative sample of non-English-speaking participants should be arranged, if possible, including arrangements for translation resources.
- C. The interview is for Program improvement purposes and is, therefore, voluntary and not associated with Program eligibility. Local agencies should, however, seek to arrange for participant comfort and cooperation.
- D. As appropriate, the state liaison will bring issues, complaints, or questions on behalf of participants to local agency staff which should be responded to and followed up as appropriate.

Follow-up

- A. The appropriate local agency person will be notified of any matters to be jointly evaluated and resolved, or plans made for resolution. Depending on the complexity of the issue, further follow-up may be required.
- B. In the event of evident or possible health, social, or nutritional problems and needs local staff should work with the liaison to advise the participant of appropriate resources or of referral sources. Local agency resources should also be enlisted.

Related Local Agency Activities

The participant interview process is most efficient and effective when performed through the cooperation of the local agencies. Local agencies, then, will:

- A. Assist in participant random selection and notification.
- B. Confirm any scheduled appointments with the participants just before their visit.
- C. As available, provide interview facilities which allow for comfort and privacy. Assist with language interpretation, if needed.
- D. Follow-up with recommendations and solutions worked out with the liaison and the state agency.
- E. Submit appropriate reports to the liaison as requested, if follow-up is extensive in scope or time.

M - 3 Monitoring: Segregation of Duties

Goal

Ensure compliance with Segregation of Duties (SOD) procedures, thereby reducing the opportunity for any one individual to both perpetrate and conceal errors or irregularities in the normal course of his or her duties during certification / recertification of WIC participants.

Procedure

Local WIC Agencies are responsible for determining program eligibility, the amount of benefits received, and the actual distribution of WIC checks. Segregation of duties at the local agency level is important so that no individual performs both the intake/eligibility determining function, the nutritional risk assessment/food package assignment function and check printing functions. The State Agency will review SOD procedures submitted by local agencies. SOD compliance will be monitored through a variety of mechanisms including the biennial program / fiscal management evaluation process, during local agency site contacts (ie, supply deliveries), site visits, and as indicated (follow-up, reports received, etc...). A minimum of two SOD visits will be made yearly at each WIC local agency.

Dual Participation Prevention in the WIC Nutrition Program

Goal: To detect and prevent dual participation by WIC clients and staff, in-state and with bordering states.

Local agency- All local agency staff are trained and required to search the database state wide by date of birth, and name for all who apply to the WIC program. The RIWEBS system will alert staff of any record which matches the entry. All duplicate participant numbers created in error are required to be reported to the State WIC Office.

State Agency- The state agency processes two reports at the end of month.

- Dual enrollment
- List of Dual Participation participants

All system identified potential duals are sent to the local programs to investigate and report back to the State Office within two weeks. The State Agency also reviews any duplicate benefits the client may have received and identify other family members to review benefits received.

All participants that receive duplicate benefits are forwarded to the Local agency, documented in the participant sanctions worksheet, and sanctions are determined by the sanction table in the procedure manual section 240. The State Agency works with the Local Program to ensure the integrity of this process.

RIWEBS permissions are set to ensure Segregation of Duties.

Any allegation of a potential dual identified between State Agencies requires a data match with the bordering states. A participant determined to be receiving food benefits in two states will be required to return the checks, determination of actual residency and the determined sanctions are followed.

Section 8

Civil Rights and Appeal Procedures

CIVIL RIGHTS AND APPEAL PROCEDURES

Civil Rights Compliance

(Goals-VIII, Procedures-810)

The Rhode Island Department of Health WIC Program is open to all persons without regard to race, color, national origin, age, sex, handicap, creed, or political beliefs. The fundamental basis of this policy is contained in Title VI of the Civil Rights Act of 1964 and Section 504 of the Rehabilitation Act of 1973. Applicable regulations include USDA Regulations for the Special Supplemental Nutrition Program for Women, Infants, and Children. As an agency of the Rhode Island State Government, the Rhode Island Department of Health WIC Program operates in compliance with the Governor's Executive Orders concerning Equal Opportunity and non-discrimination. The Department of Health's Affirmative Action Plan also binds the WIC Program.

Public Notification

In Rhode Island, local WIC agencies are located in, or adjacent to, most of the areas populated by ethnic and language minorities. All of the local agencies focus their health care delivery directly to the low income and minority groups present in their areas. The composition of their caseloads documents that outreach from these agencies is reaching the minority population. Each local agency has been issued ". . . and justice for all" posters and has posted them in conspicuous locations within each clinic. Minority oriented media are utilized in outreach and information activities.

Program materials, for public information or display, advise of the nondiscriminatory policy of the WIC Program and of the procedure for filing discrimination complaints. The nondiscrimination statement is available in translated versions.

Whenever it is determined that a substantial portion of the potentially eligible population of a local agency speaks a language other than English, essential Program materials are made available in the appropriate foreign language. Program posters, nondiscrimination posters, and information forms have also been translated and distributed. The WIC information brochure for participants and potential participants is available in appropriate foreign languages. Media items should be published in languages other than English to the extent feasible. An informational telephone line to the Department of Health has been established for the hearing impaired.

All contracts through HEALTH adhere to culturally and Linguistically Appropriate Services (CLAS standards) for providing WIC services to the community as well as Civil Rights requirements.

Through the use of bilingual local staff members, volunteer translators, and resettlement agencies, all reasonable efforts are made to provide participants and applicants with translator services in order that they may benefit from the Program.

Because local agencies may be at maximum caseload, many public notification materials are aimed at advising the public, not only of the availability of the Program, but also of the priority system and waiting list.

Data Collection and Reporting

For the purpose of assuring that the WIC Program equitably serves all minority populations in the state, the state and local agencies cooperate in obtaining minority population data at all points relevant to the WIC Program.

A. Potential Eligible Data

2010 Census data on population, race, income, and recent five-year vital statistics data are available. If directed by the USDA, estimates of potential eligible by minority group will be attempted.

B. Actual Participation Data

Local agencies determine the racial/ethnic identity of WIC applicants by asking each applicant what his/her racial or ethnic identity is, clients are informed this is voluntary information and will not affect eligibility. Those choosing not to self-report are informed that staff will make a visual assessment. All information collected is entered into the automated RIWEBS computer system. The computer can generate reports on racial/ethnic data at any time. Data is maintained using safeguards that prevent its use for discriminatory purposes through restricting access, coding, and using aggregate data in reports.

Handicapped Access

The Department of Health's Affirmative Action Plan prohibits discrimination and ensures access in affirmative action, program services, contract compliance, minority business inclusion, and grievance processing. FNS guidance on USDA regulations pertaining to Section 504 of the Rehabilitation Act of 1973 has been issued to all local agencies. Access for the handicapped is reviewed through the Annual Local Agency Evaluation.

Many local clinics have been recently built or renovated. These clinics have included provisions for handicapped access. The Health Department has implemented a telephone line for the hearing impaired and the number is listed on Department letterhead.

Compliance Review

Local agencies and applicant local agencies will be objectively reviewed for any discriminatory practices and for the presence of adequate procedures and safeguards to ensure against any discriminatory practices.

A. Pre-award Compliance Reviews

In evaluating applications from local agencies that participate in the WIC Program, the state agency will ensure that:

1. The local agency has corrected all past substantiated civil rights problems or noncompliance situations.
2. The Civil Rights Assurance is included in the State-Local Agency Agreement.
3. Civil Rights complaints are being handled in accordance with procedures outlined in Section XI, FNS Instruction 113-2.
4. Clinic sites, certification offices, vendors, and other food distribution sites do not deny access to any person because of his or her race, color, national origin, age, sex, or handicap.
5. Appropriate staff, volunteers or other translation resources are available in areas where a significant proportion of non-English or limited English speaking persons reside.
6. The description of the racial/ethnic makeup of the service area is included in the application.

B. Routine Compliance Reviews

State agency staff conducts Civil Rights Compliance Reviews as part of the annual local agency review procedure. This review specifically seeks to document the absence of any discriminatory practices, and the presence of safeguards to ensure against any such practices, through observation of staff and facilities, review of participant records, and direct participant interviews.

1. On-Site Review - Specific review procedures are set forth in Management Evaluation Review Format.

2. Data Review

Information from data collection and compliance reviews will be analyzed by the state agency WIC staff through several mechanisms:

- a. Statistical data will be analyzed by liaison and administrative staff with the Supervising Planner for quantitative patterns of ethnic population/ participation variance.
- b. Liaison and supervisory staff will review the findings of the local agency compliance review for questionable practices, and schedule follow-up reviews when the information indicates a need.
- c. Liaison and supervisory staff will review field visit observations and participant interview results for any suspected visible or subtle discriminatory practices.
- d. Any complaint pertaining to eligibility determination or personnel or vendor behavior and attitudes will be investigated and analyzed for possible civil rights implications.

3. Additional Review

Throughout and following the evaluation of data, the state agency will initiate closer scrutiny whenever such is indicated:

- a. When statistical comparisons reveal population/participation variance:
 - (1) Additional data may be sought through further local agency population reviews, with the local agencies responsible for reconciling discrepancies.
 - (2) Program changes (in data collection, personnel training, outreach, etc.) can be implemented.
 - (3) Ongoing and periodic reviews will be initiated.
- b. When the Compliance Review reveals lack of information or the presence of deficiencies:

- (1) Further investigation will be done by state staff.
 - (2) Corrective recommendations will be made.
 - (3) Follow-up activities will be performed.
- c. When actual or potential discriminatory practices are observed:
- (1) Corrective recommendations will be issued and compliance monitored.
 - (2) Sanctions may be imposed if practices continue.
 - (3) Close monitoring will be maintained.
- d. All instances of actual or probable noncompliance will be brought to the attention of FNS for possible regional compliance review. Compliance Reviews will be conducted at all local agencies as part of the annual local agency evaluation.

Training

- A. Compliance review staff have been trained by the state agency and FNS in regulation provisions and in utilizing the Civil Rights/Fair Hearing portion of the Rhode Island WIC local agency review format.
- B. Field staff conferences will focus on utilization of the review format and on observation techniques in agencies and participant contacts.
- C. As needed, State and local agency workshops can review civil rights policies and practices and monitoring practices.
- D. Local agencies shall train WIC staff in civil rights requirements through orientation for new employees and, where no specific training has been provided, through in-service training to existing employees.

Noncompliance

Any instance of noncompliance discovered or reported must be corrected and monitored for non-recurrence. All Program materials must be monitored for compliance.

Assurances

The required assurances by the state agency that it will comply with Title VI will be submitted to FNS.

Vendor Monitoring

A significant amount of interaction in the WIC Program occurs at the participant/vendor level. It is the policy of the Rhode Island WIC Program to ensure that its contracted vendors serve all participants equally, with respect, and on a nondiscriminatory basis (see Section 3, Vendor Monitoring).

- A. The vendor monitoring staff of the Rhode Island WIC Program is trained in all WIC nondiscrimination requirements.
- B. The vendor monitoring staff will train vendors in these requirements and monitor for vendor practices, presence of nondiscrimination displays, and training of vendor employees.
- C. Liaison meetings with local agency staff and participant interviews are geared to also elicit information concerning vendor practices of a possibly discriminatory nature.
- D. Any questions of any actual or possible discriminatory attitudes or practices are referred to the appropriate supervisor, who will follow through with the vendor monitoring staff.
- E. If such practices are documented, legal and program sanctions will be applied as appropriate.

Complaints

Refer to:
Grievance Procedure, following page
Procedure Manual, Sec. 810

Decision-Making Process

A. Hearing Officer Independence

The decision of the hearing officer shall be final and binding on the local agency. The officer's decision shall not be subject to review or approval by any official or employee of the local agency. No official or any other employee of the local agency shall review, interfere with, change or attempt to influence any hearing decision. The decision shall become part of the record.

B. Time Limits

The hearing officer shall render and issue his/her decision in writing within forty-five days of the date of receipt of request for a hearing. In the case where the appellant requests and is granted delay or continuance prior to or at the hearing, the period of delay shall be added onto the forty-five days.

C. Judicial Review

If the appellant is dissatisfied with the decision of the hearing officer, the hearing officer shall explain the appellant's rights to pursue judicial relief from the State Superior Court.

FAIR HEARING AND ADMINISTRATIVE APPEAL

A - 1 FAIR HEARING PROCEDURE

In accordance with section 246.23 of USDA Regulations governing the administration of the Special Supplemental Food Program for Women, Infants and Children (WIC), the Rhode Island Department of Health has established a procedure which guarantees each potential WIC recipient the right to a fair hearing to appeal a decision made by a local or state agency which results in the individual's denial of participation, suspension or termination from the Program or which results in other sanctions against the individual. In order to comply with this regulation, the Rhode Island Department of Health, Office of Fiscal Assistance, sets forth the following fair hearing procedures:

General Provisions

A. Definitions

1. "Appellant" means an applicant or participant who is determined to be ineligible (or their parent or guardian) and who requests a fair hearing.
2. "Applicant" means a person who has applied or attempted to apply for the WIC Program.
3. "Fair Hearing Officer" means an impartial person within the Rhode Island Department of Health designated to conduct hearings and render decisions pursuant to the regulations governing the WIC Program. This person is impartial in that he/she did not participate in making the decision under appeal nor has he/she held any previous conference between local agency staff and the appellant. Additionally, he/she must attempt to secure equitable treatment for all parties.
4. "Local Agency" means a health or welfare agency or a private, non-profit agency which directly, or through an agency with which it has contracted, operates and administers a WIC Program.
5. "Participant" means pregnant women, breastfeeding women, post-partum women, infants and children who are receiving supplemental foods or food instruments under the Program.
6. "State Agency" means the Rhode Island Department of Health, Office of Fiscal

Assistance - WIC Program.

B. General Description of the Fair Hearing Process

The fair hearing process is an administrative proceeding through which a person can appeal a local or state agency's decision which denies participation in the WIC Program or initiates other sanctions against the person. The process is designed to secure and protect the interests of both the appellant and the appropriate agency personnel to ensure equitable treatment for all involved.

C. Fair Hearing Officer

The fair hearing officer shall be appointed by the Director of Health. The fair hearing officer will administer the fair hearing process, holding hearings and rendering decisions. The fair hearing officer must be impartial and must be qualified to evaluate all evidence fairly and realistically to explain to the claimant the laws and regulations.

D. Local Agency Responsibility

The local agency's responsibility is to assure an applicant, who is determined ineligible to participate or against whom other sanctions have been imposed, unrestricted freedom to request a fair hearing. Every effort must be made to help the appellant submit and process the fair hearing request.

Each WIC participant shall be informed of his/her right to a fair hearing during the initial contact with the local agency.

Each applicant/participant denied benefits shall be informed in writing, at the time sanctions have been imposed upon them, of the following:

1. Reason for ineligibility.
2. Right to a fair hearing as described in the regulations.
3. How to request a fair hearing.
4. Right to representation by a lawyer or another person of his/her choosing.
5. Right to examine prior to and during the hearing, any documents and records presented to support the decision under appeal.

6. Right to cross-examine all witnesses and bring witnesses.
7. Right to question evidence and present evidence.
8. Benefits shall continue to be provided to participants until a hearing decision is reached only for those individuals who are to be terminated during their certification period and who appeal within 15 days after notification of termination. An appeal after the 15 day time limit will not result in continued benefits. Applicants who are denied benefits at the initial certification or at a subsequent certification may appeal the denial but shall not receive benefits while awaiting the hearing.

The local agency will retain documentation of each case for a minimum of three year.

E. Other Liabilities and Sanctions

Federal Regulations provide that: "The provision of sanctions for program abuse to be imposed on food vendors and recipients shall not be construed as excluding or replacing any criminal or civil sanctions or other remedies that may be applicable under Federal and State statute or local ordinance."

Request for a Fair Hearing

A. Grounds for Appeal

An applicant or participant who is determined ineligible to participate in the program or against whom other sanctions have been imposed has the right to request a fair hearing. The program does not provide appeals due to reduction in benefits.

B. Publicity of Request for Fair Hearing

The local agency must employ a simple, publicly announced method for a person to make an oral or written request for a hearing. Each participant, at the time of initial certification and at the time of denial or termination from the program or when other sanctions have been imposed will be given the Fair Hearing information form and the Request for Fair Hearing form and the appropriate notice. These forms will be made available to recipients at every local agency.

C. Request for Fair Hearing

A request for a fair hearing is defined as an oral or written statement by the appellant or his/her authorized representative which asks for the opportunity to present his/her case to

higher authority. This request may be made to personnel of the local agency or presented directly to the state agency.

D. Time limits for Steps in Fair Hearing Process

The date of request for a fair hearing is the day on which the state agency receives the appellant's oral or written statement requesting the opportunity to present a grievance to higher authority. The appellant must make his/her request within 60 days from the date the agency gives or mails the applicant or participant the notice of adverse action.

The hearing must be held within three weeks from the date of receipt of such a request. At least ten days prior to the hearing, the appellant will receive written notice as to the time, date and site for hearing.

E. Receipt of Benefits

Except for participants whose certification period has expired, participants who appeal the termination of benefits within the 15 day advance adverse notification period shall continue to receive Program benefits until the hearing official reaches a decision or the certification period expires, whichever occurs first.

F. Denial or Dismissal of Request

The State and local agencies shall not deny or dismiss a request for a hearing unless:

1. The request is not received within the time limit set by the State agency.
2. The request is withdrawn in writing by the appellant or a representative of the appellant.
3. The appellant or representative fails, without good cause, to appear at the scheduled hearing.
4. The appellant has been denied participation by a previous hearing and cannot provide evidence that circumstances relevant to Program eligibility have changed in such a way as to justify a hearing.

Prehearing Procedure

A. Scheduling

Upon receipt of a request for a fair hearing, the state agency in conjunction with the fair

hearing officer shall set up a date for a hearing and so notify the appellant and the applicable local agency. If the applicant has a handicap or there is another circumstance that prevents his/her appearance at the designated site, then at his/her request the hearing may be held at his/her home or other designated place as determined by the hearing officer.

B. Notice of Fair Hearing

Written notice must be given to the appellant at least ten days prior to the hearing and must specify the date, time, and site of the hearing.

C. Examination of Records and Documents

The local agency shall provide the appellant or his/her representative adequate opportunity to examine all records and documents to be presented at the fair hearing in support of the decision under appeal at any time after the request for fair hearing has been made. An appellant's representative shall have written authorization from the appellant to examine such records.

D. Request for Rescheduling

Prior to the day on which the fair hearing is scheduled, the hearing officer may change the date, time or place of the hearing upon reasonable notice to the parties involved; or he shall, at the request of the appellant or local agency, continue the hearing to another date within ten days.

Any continuance granted by the fair hearing officer at his own instance, or at the instance of the local agency, may not waive the time limits set by regulations.

Fair Hearing

A. Description of Fair Hearing

The fair hearing provides an opportunity for the appellant and the local agency to present all materials relevant to the decision under appeal. A hearing is conducted by a hearing officer appointed by the Director of Health. The decision is based only on those matters which are presented in the hearing. The officer examines the facts and regulations and other appropriate circumstances of the case presented by the parties to determine the appropriateness of the local agency's action. The decision of the hearing officer is the final administrative adjudicatory decision of the Office of Fiscal Assistance WIC Program. It is binding upon all employees of the Division and local agency.

B. Participation at the Fair Hearing

The following will participate at the fair hearing although others may attend at the discretion of the hearing officer:

1. Appellant, and his/her authorized representative(s) and witness (es).
2. A staff person (or persons) from the local agency assigned by the director or his/her designee.
3. A Division or local agency attorney to represent the Division or local agency when requested by the Division or local agency and/or a staff member of the Division.
4. The hearing officer and his/her staff.

C. Appellant's Rights

The appellant at his/her option can present his/her own case or can be assisted by authorized representative(s) and shall have the right to:

1. Bring witnesses.
2. Present and establish all relevant facts and circumstances by oral testimony and documentary evidence.
3. Advance any pertinent arguments without any undue interference.
4. Question or refute any testimony including an opportunity to confront and cross-examine adverse witnesses.
5. Examine the documents and records presented to support the decision under appeal and introduce any pertinent records or other evidence in support of his/her case.

D. Local Agency's Rights

The local agency can present its own case or can be assisted by a local agency attorney and:

1. Is responsible for an adequate investigation before reaching a decision as to eligibility.
2. Is responsible for submitting at the hearing complete information on which any decision at issue is based.

3. Should introduce into the hearing only the material which pertains to the issues.
4. Must designate and send a staff person (or persons) from the local agency to the hearing to justify the action of the local agency.
5. Must ensure that the documents and records pertinent to the decision under appeal are present at the hearing and that the appellant has adequate opportunity to examine prior to and at the hearing.
6. May bring witnesses.
7. May present and establish all relevant facts and circumstances by oral testimony and documentary evidence.
8. May advance any pertinent arguments without any undue interference.
9. May question or refute any testimony, and have an opportunity to confront and cross-examine adverse witnesses.
10. May examine and introduce the documents and records produced to support the decision under appeal and examine any other pertinent documents produced by the appellant.

E. Responsibilities of the Division or Local Agency Attorney

1. The division or local agency's attorney may appear at the request of the local agency or division whenever appropriate.
2. Costs for the attorney of local agency may be part of, but must not exceed, the allowed administrative funds available to the local agency for the month in which the hearing is conducted.
3. Whenever they appear, such attorneys shall represent the position of the division, or the local agency, but do not represent the position of the Hearing Officer.

F. Hearing Officer's Duties and Powers at Fair Hearing

Duties: The Hearing Officer shall have the duty to conduct a Fair Hearing to ensure that the rights of the appellant and the local agency are secured expeditiously. She/he shall conduct the proceedings in a manner which is not unduly complex or legalistic, and shall take into consideration the appellant's

background and education. She/he shall consider issues, receive and consider all relevant and reliable evidence and exclude irrelevant evidence and reach a fair, independent and impartial decision based upon the issues and evidence presented at the hearing. She/he shall have the following specific duties:

1. Regulate the conduct and course of the hearing consistent with due process to ensure an orderly hearing.
2. Administer the oath to all people who are going to testify at the hearing.
3. Assist all those present in making a full and free statement of the facts in order to bring out all the information necessary to decide the issues involved.
4. Ensure that all parties have a full opportunity to present their claims orally, or in writing and to secure witnesses and evidence to establish their claims.
5. Review, rule on, exclude or limit evidence pursuant to Section H below.
6. Introduce into the record any regulations, memoranda or other materials she/he believes to be relevant to the issues at the hearing.

Powers: The Hearing Officer shall have the following specific powers:

1. Change the date, time and place of the hearing on his/her own motion or on request of any party upon reasonable notice to the parties.
2. Request a statement of the issue(s) and define the issue(s).
3. Regulate the presentation of the evidence and the participation of the parties.
4. Examine witnesses and ensure that relevant evidence is secured and introduced.
5. Order, where relevant and necessary, an independent medical assessment or professional evaluation from a source mutually satisfactory to appellant and the state agency.
6. Continue the hearing to a subsequent date to permit either party to produce additional evidence, witnesses or materials.
7. Render a hearing decision based exclusively on the hearing record.

G. Defaults

If either the appellant or the local agency fails to appear at the hearing, the WIC Program director, at the request of the hearing officer, shall notify the non-appearing party in writing that if said party fails to request a rescheduled hearing within ten days of the notice, a default will be entered against the party. If pursuant to said notice from the WIC Program director, the non-appearing party requests and is granted a rescheduled hearing and again fails to appear at the rescheduled hearing, a default will be entered against the non-appearing party, provided, however, that the default may be removed for good cause by the hearing officer, but the WIC Program director at the direction of the hearing officer shall grant another rescheduled hearing only for good cause.

H. Evidence and Testimony

All evidence and testimony, materials and regulations on which a decision is based, must be presented at the hearing. Oral testimony must be given under oath at the hearing. Witnesses shall be available for cross-examination.

The rules of evidence observed by courts shall not apply but the hearing officer shall observe the rules of privilege recognized by law. The hearing officer shall consider all evidence and testimony which is pertinent and shall exclude unduly repetitious or clearly irrelevant evidence.

All regulations, memoranda and other relevant documents must be placed into evidence by reference to the citation or by a copy of the regulations. Memoranda or other material may be put into evidence by a copy of the memoranda or other material.

All documents and other evidence offered or taken for the record shall be open to examination by the parties and opportunity shall be given to refute facts and arguments advanced on either side of the issues. The appellant or his/her representative shall have reasonable opportunity prior to and during the hearing to examine all records and documents to be used by the local agency at the hearing.

A written record shall be prepared which shall include the decision under appeal and documentary evidence admitted and a summary of any oral testimony presented at the hearing; the decision of the hearing officer, including reasons therefore, and a copy of notification to the appellant of the decision of the hearing officer. Such written record shall be preserved for a period of three years and shall be available for examination by the appellant or his/her representative at any reasonable time and place during such period.

I. Reopening Prior to Decision

After the close of the hearing and prior to a decision, the hearing officer, if she/he finds need

to consider further testimony, evidence, materials or regulations before rendering a decision, may reopen the hearing to consider such further information. If she/he so decides, she/he must send seven days written notice to all parties of the reopening and his/her reasons therefore, including the date, time and place of the resumed hearing, which shall be held at a location accessible to the appellant.

J. Hearing Officer Independence

The decision of the hearing officer shall be final and binding on the state or local agency. The officer's decision shall not be subject to review or approval by any official or employee of the state or local agency. No official or any other employee of the state or local agency shall review, interfere with, change or attempt to influence any hearing decision. The decision shall become part of the record.

K. Time Limits

The hearing officer shall render and issue his/her decision in writing within forty-five days of the date of receipt of request for a hearing. In the case where the appellant requests and is granted delay or continuance prior to or at the hearing, the period of delay shall be added onto the forty-five days.

L. Judicial Review

If the appellant is dissatisfied with the decision of the hearing officer, the hearing officer shall explain the appellant's rights to pursue judicial relief from the State Superior Court.

M. Basis of Fair Hearing Decision

The hearing officer may take a number of courses of action in his/her decision.

1. Find in favor of the appellant.
2. Uphold the action of the local agency.
3. Accept written withdrawal of the appeal by the appellant.
4. Accept settlement of the issues agreed to by the parties.
5. Default any party who fails to appear and does not request a rescheduling of the appeal within the allotted time period after the hearing date.

The hearing officer's decision is based upon the evidence, testimony, materials and regulations referenced or presented at the hearing. Any evidence, testimony, materials and regulations presented after the close of the hearing will be excluded unless the hearing is reopened by the hearing officer for the taking of said evidence.

The hearing officer's decision must be rendered in accordance with the regulations governing the WIC Program. The officer, however, shall not render decisions which require his/her determination of the legality of the regulations. Such matters shall be decided by the courts without any necessity of going through the fair hearing process. In administrative hearings involving the legality of the regulations, the officer will render a decision that she/he cannot consider the legality or illegality of a regulation and base his/her decision on the applicable regulation.

N. Findings, Rulings and Orders

The decision itself shall be a comprehensive statement of the hearing officer and shall include:

1. A statement of the issues involved in the hearing.
2. A summarization of the facts.
3. A statement of the relevant regulations upon which his/her decision was based.
4. A statement of the conclusions drawn from the findings of fact and regulations, including the reasoning used by the officer in reaching the decision.
5. If the decision is in favor of the appellant, a precise, clear order to the appropriate official of the local agency to take necessary corrective action.
6. In the decision, all parties shall be notified of their right to a judicial review.

Post-Decision Process

A. Access to the record

The fair hearing record shall be preserved for a period of three years and shall be available for examination by the appellant and his/her representative at any reasonable time and place during such period.

B. Implementation

The signed decision of the hearing officer is final and binding on the local agency.

The local agency must fully implement the decision within seven days of receipt of the appeal decision. No official or any other employee of the local agency shall interfere with, review, change or attempt to influence the implementation of the fair hearing decision.

In the notice of decision, the officer shall notify the appellant of his/her right to full and prompt implementation within the seven day period and advise him/her to contact the WIC Program director if there is no prompt or full compliance.

A-2 Administrative Appeal of State Agency Decisions

In accordance with U.S.D.A. Regulations governing the administration of the Special Supplemental Food Program for Women, Infants and Children (WIC), the Rhode Island Department of Health is required to establish a procedure whereby a food vendor or local agency whose participation is adversely affected by a State or local agency action may appeal the action. In order to comply with this regulation, the Rhode Island Department of Health, Office of Supplemental Nutrition, WIC Program, sets forth the following hearing procedures:

A. Definitions

"Agency" means a public health or welfare agency or a private, non-profit health or welfare agency which directly, or through an agency or physician with which it has contracted, submits application for approval as a local WIC agency.

"Hearing Official" means an impartial person within the Rhode Island Department of Health who is the designated representative for the Department to conduct hearings and to render decisions pursuant to the regulations governing the WIC Program. This person is impartial in that she/he did not participate in making the decision under appeal, nor has she/he held any previous conference between the agency staff or food vendor and the state agency. She/he must attempt to secure equitable treatment for all parties.

"Local Agency" means a public health or welfare agency or a private, non-profit health or welfare agency which directly, or through an agency or physician with which it has contracted, operates and administers a WIC Program.

"State Agency" means the Rhode Island Department of Health, Office of Supplemental Nutrition.

"Vendor" means a provider of any or all of the Special Supplemental Food Program

(WIC) foods who has entered into agreement with the State agency to accept WIC food checks for same, or a person or entity which has made a request to be a participating WIC vendor.

B. General Description of the Hearing Process

The hearing process is the administrative proceeding through which the adversely affected agency or vendor may appeal the decision. The process is designed to secure and to protect the interests of both the agency or food vendor and the State agency to ensure equitable treatment for all involved.

C. State Agency Responsibility

Each agency or food vendor whose participation is adversely affected by a state agency action shall be informed in writing of the right to a hearing as described in the regulations (246.18) including:

1. Adequate advance notice of time and place of the hearing to provide sufficient time to prepare for hearing;
2. An opportunity for the aggrieved agency or food vendor or its representatives to present its case.
3. The opportunity for the agency or food vendor to confront and cross examine adverse witnesses;
4. The opportunity for the agency or food vendor to be represented by counsel, if desired;
5. The opportunity to review the case record prior to the hearing;
6. An impartial decision-maker, whose decision as to the validity of the state agency's action shall rest solely on the evidence presented at the hearing and the statutory and regulatory provisions governing the Program. The basis for the conclusion shall be stated in writing, though it need not amount to a full opinion or contain formal findings of fact and conclusions of law;
7. The agency or food vendor shall be notified in writing of the decision concerning the appeal within sixty days from the date of receipt of the request for a hearing.

If, after exhausting all stated rights, a food vendor is found to have committed any violations of Program rules, the State agency shall ensure that the food vendor is denied,

or disqualified from, participation in the Program for such period of time as provided for in vendor selection and compliance policies as set forth in this State Operations Manual.

Request for a Hearing

A. Grounds for Appeal

The right of appeal shall be granted when a local agency's or a food vendor's application to participate is denied or, during the course of an agreement or contract, when an agency or vendor is disqualified or whenever any adverse action which affects participation is taken. Expiration of a contract or agreement with a food vendor or local agency shall not be subject to appeal.

B. Request for Hearing

A request for a hearing is defined as a written statement by the agency or vendor or its authorized representatives which asks for the opportunity to present its case to a higher authority. This request should be made to the Chief, WIC Program.

C. Time Limit for Date of Hearing and for Rendering Decisions

The date of request for a hearing is the day on which the agency or vendor presents its written statement to the State agency asking for the opportunity to present a grievance to a higher authority. A vendor has up to thirty days from the date of action causing dissatisfaction to request a hearing. A local agency shall be provided a period of sixty days from the date of the action to appeal the decision.

Written notice of the hearing officer's decision will be sent to the agency or vendor and any designated representative within sixty days from the date of receipt of the request for a hearing. A copy of this written notice will be forwarded to the State agency.

D. Rescheduling

The local agency or vendor shall have at least one opportunity to reschedule, upon specific request. A minimum of two hearing dates shall be allowed. Additional rescheduling shall only be allowed for good cause, at the discretion of the Hearing Official.

E. Postponing of Action

1. The adverse action affecting a participating local agency shall be postponed until a hearing decision is reached.

2. The State agency may take adverse action against a vendor after a 15-day advance notification period has elapsed. In deciding whether or not to postpone or suspend the adverse action until a hearing decision is rendered, the State agency shall consider whether participants would be unduly inconvenienced (Refer to Policy V-4 Vendor Compliance, Participant Hardship) and may consider other relevant criteria, such as delay in the appeal process on the part of the State agency, whether the action is proper and warranted and the weight of the evidence.

F. Continuing Responsibilities

Appealing an action does not relieve a local agency, or a food vendor, permitted to continue in the Program while its appeal is in process, from the responsibility of continued compliance with the terms of any written agreement or contract with the state agency.

Procedure

A. Scheduling

The hearing officer will set a date for the hearing and so notify the agency or vendor. The hearing officer will designate a date and site for the hearing which is accessible to the agency or vendor.

B. Notice of Hearing

Ten day's written notice will be given to the agency or vendor prior to the hearing which will specify the date, time and site of the hearing. An explanation of the hearing procedure and the agency's or vendor's right to representation shall be included with the notice. If fees are charged by legal counsel, the agency or vendor is responsible for payment.

C. Evidence and Testimony

All evidence and testimony, materials and regulations on which a decision is to be based must be presented at the hearing. Witnesses shall be available for cross-examination. The hearing officer shall consider all evidence which is pertinent and shall exclude unduly repetitious or clearly irrelevant evidence.

All documents and other evidence offered or taken for the record shall be open to examination by the parties and opportunity shall be given to refute arguments advanced on either side of the issue.

A written record shall be prepared which includes the decision under appeal, documentary evidence admitted and summary of any oral testimony presented at the hearing; the decision of the hearing officer (including his reasons for the decision), and a copy of the notification to the agency or vendor of the decision of the hearing officer. Such written record shall be preserved for a period of three years and shall be available for examination by the agency or vendor or its representative at any reasonable time and place during the period.

D. Findings, Rulings and Others

The decision itself shall be a comprehensive statement of the hearing officer, including:

1. A statement of the issues involved in the hearing.
2. Findings of fact on all relevant factual matters which are supported by evidence in the record.
3. A statement of all relevant regulations upon which his decision was based.
4. A statement of the conclusions drawn from the findings of fact and regulations, including the reasoning used by the officer in reaching the conclusions.
5. If the decision is in favor of the appellant, a precise, clear order to the appropriate official of the local agency or the State agency to take necessary corrective action.

E. Rendering the Decision

The signed decision of the hearing officer shall be final and binding on the State agency. Copies of the decision and reasons for it shall be forwarded to the State agency, the agency, or the food vendor and any authorized representative.

F. Other Sanctions and Liabilities

Federal Regulations state: "The State agency is allowed to disqualify a food vendor from the WIC Program who is currently disqualified from another FNS Program". The food vendor's privilege of serving the Program may not be reinstated until the other program with regard to which the food vendor was originally disqualified, reinstates the food vendor's privilege.

The provision of sanctions for Program abuse to be imposed on food vendors and recipients shall not be construed as excluding or replacing any criminal or civil sanctions or other remedies that may be applicable under any Federal and State statute or local ordinance.

G. Judicial Review

If a decision is rendered against the local agency or food vendor and it expresses an interest in pursuing a higher review of the decision, the hearing officer shall explain the right to pursue judicial review of the decision in the State Superior Court.

Section 9

Public Input and Notification

Section 9 -1

IX

PUBLIC HEARING PROCEDURES

(Goals-IX)

- A. A notice of the public hearing is published as a display advertisement in newspapers having an aggregate statewide distribution.
- B. Letters are sent to local agency directors, state health, financial aid, and social welfare department directors, medical societies, all Department of Health division chiefs, and other interested persons regarding the public hearing.
- C. Statements may be submitted regarding the proposed State Plan to the Director of Health in writing prior to and after the public hearing.
- D. The Rhode Island Department of Health Auditorium is utilized for the hearing. This location is accessible to the public by means of public, as well as private, transportation.
- E. A public hearing officer is appointed to preside and a stenographer records the proceedings.
- F. The hearing room is equipped with a public address system.
- G. Persons may register at the entrance to the hearing room.
- H. A written record of the proceedings will be obtained and summarized in the State Plan volume submitted to USDA.