I. FOOD DELIVERY

(Please indicate) State Agency: Wisconsin for FY 2025

The Food Delivery State Plan checklist collects information regarding vendor and farmer / farmers' market management as well as food delivery systems, food instruments, and electronic benefits. This checklist has combined the previous years' checklists "I. Vendor Management" and "IX. Food Delivery". Many questions pertaining to paper food instruments were removed, and the checklist was revised to capture the EBT environment. All new questions which were not pulled from either of the previous checklists, and new options for SAs to select in certain questions, are highlighted for ease of identification.

Vendor and farmer/farmers' market management includes all those activities associated with selecting, authorizing, training, and monitoring, stores and farmers/markets participating in the WIC Program.

Food delivery accountability includes the issuance, redemption, and monitoring of the Retail Food Delivery System, and the procurement and delivery of supplemental foods to participants in the Home Food and Direct Distribution Delivery Systems.

During disasters, emergencies, public health emergencies, or a supply chain disruption, the State agency may request to implement existing and allowable regulatory flexibilities or waivers to support the continuation of Program benefits and services. Waivers granted under Access to Baby Formula Act of 2022 (codified at 7 CFR 246.4a(30)) or temporary provision(s) authorized by Congress are not permanent amendments to the State Plan and should not be reflected in answers below. Instead, waiver flexibilities impacting Program benefits and services should be recorded in Appendix C. However, State agencies should consider any historical amendments as the result of waivers granted under prior waiver authority to develop policies and procedures for current and future disasters.

I. GENERAL ADMINISTRATION

II. HOME FOOD DELIVERY SYSTEMS

7 CFR 246.4(a)(14), 7 CFR 246.4(a)(14)(viii), 7 CFR 246.12(m):

Describe how the home delivery system operates including the types of authorized home food delivery contractors, the frequency of deliveries, and the procedures for documenting deliveries. Include a description of specialty infant formula, if applicable.

III. DIRECT DISTRIBUTION FOOD DELIVERY SYSTEMS

7 CFR 246.4(a)(14), 7 CFR 246.12(n):

Describe the methodology and procedures used in the direct distribution of supplemental foods, including types of foods distributed, warehouse and distribution centers, the

verification process, and assurance of safety. Include a description of specialty infant formula, if applicable.

IV. RETAIL FOOD DELIVERY SYSTEMS: BENEFIT ISSUANCE AND FOOD INSTRUMENTS

- **A.** Electronic Benefit Transfer (EBT) Management 7 CFR <u>246.12(y)(4)(ii):</u>
 Describe updates on any active EBT projects.
- B. Food Instrument Overview 7 CFR 246.4(a)(11)(iii), (14)(i), (vi), (xii): Describe the policies and procedures used by the State agency in producing, monitoring, and accounting for the use of food instruments.
- C. Benefit Issuance 7 CFR 246.4(a)(11)(iii), (14)(xx); 7 CFR 246.12(r)(4); 7 CFR 246.4(a)(14)(i), (x), (xi), (xv):

Describe the State agency's procedures for issuing food instruments to participants, including procedures for verifying identity, providing education on how to use food instruments, and proxy policies. Include alternative benefit issuance procedures for special circumstances.

D. Food benefit redemption and disposition – 7 CFR <u>246.4(a)(14)(xiii)</u>, <u>(xix):</u>

Describe the procedures used to monitor food benefit redemption and disposition and the management of lost/stolen/damaged food instruments.

V. RETAIL FOOD DELIVERY SYSTEMS: VENDOR MANAGEMENT

- **A. Participant Access** –7 CFR <u>246.4(a)(14)(xiv)</u>, <u>7 CFR 246.12(l)(1)(ix)</u>:

 Provide information about the State agency's definition of participant access.
- **B.** Vendor Selection and Authorization 7 CFR <u>246.4(a)(14)</u>, <u>(15)</u>, <u>246.12(g)(3)</u>, <u>(8)</u>; 7 CFR <u>246.12(h)(1)(ii)</u>:

Describe limiting criteria, application periods, selection criteria, relevant exemptions (if applicable), how above-50-vendors are assessed, and if pharmacies are authorized. Attach a sample vendor agreement. Include description of peer groups, and a brief description of how the SA informs vendors of allowable infant formula providers.

C. Vendor Cost Containment (including management of above 50 percent vendors) – 7 CFR 246.4(a)(14), 7 CFR 246.12(g)(4)(vi):

If the State agency authorizes or plans to authorize any above-50-percent vendors, FNS must certify the State agency's vendor cost containment system. For certification, the State agency must describe the competitive pricing and reimbursement methods implemented to ensure that average payments per food instrument to above-50-percent vendors do not exceed average payments per food instrument to comparable regular vendors.

- D. Vendor Agreements –7 CFR 246.4(a)(14)(iii):
 - Describe information regarding the vendor agreement.
- **E.** Vendor Training 7 CFR <u>246.4(a)(14)</u>, 7 CFR <u>246.12(i)</u>:

 Describe State and local agency procedures for training WIC Program vendors.
- F. Routine monitoring 7 CFR 246.4(a)(14), 7 CFR 246.12(j)(2):

Describe the criteria used to select vendors for routine monitoring as well as the methods and scope of on-site routine monitoring activities. Include any relevant information about the State agency's plans for improvement in the coming year.

G. Administrative Review of State Agency Actions – 7 CFR 246.4(a)(14), (a)(18): Describe the procedures for conducting both full and abbreviated administrative reviews.

VI. RETAIL FOOD DELIVERY SYSTEMS: FARMERS AND FARMERS' MARKETS (if applicable) – 7 CFR 246.4(a)(14)(iii), (a)(14)(xii), (a)(14)(v); 7 CFR 246.12(v): If the State agency allows farmers / farmers' markets to transact cash value benefits, describe the farmer / farmers' market agreement, monitoring, and training procedures.

I. GENERAL ADMINISTRATION

1.	Which of the following food delivery systems does your State agency operate? Be sure to consider how the State agency provides specialty formula to participants. ☐ Home Food Delivery (please fill out section II) ☐ Direct Distribution Food Delivery (please fill out section III) ☐ Retail Food Delivery (please fill out sections IV, V, and VI)
	ODITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or the here to enter text.
II.	HOME FOOD DELIVERY SYSTEMS
\boxtimes	Does not apply (proceed to next section)
1.	The State agency uses home food delivery systems to: ☐ Provide all WIC program foods ☐ Reach select remote / rural participants ☐ Reach select participants with mobility or transportation concerns ☐ Provide specialty infant formula and or medical foods ☐ Other (specify): Click or tap here to enter text.
2.	Home food deliveries take place: ☐ Monthly ☐ Bi-monthly ☐ Every three month ☐ Other (specify): Click or tap here to enter text.
3.	Home food delivery vendors include: Dairies Private delivery service doing WIC business only Private delivery service Infant formula providers Hospitals Other (specify): Click or tap here to enter text.
4.	Participants who receive home food delivery: ☐ Are notified in writing of the types and quantities of food they will receive ☐ Indicate by authorized signature on FI, receipt, or signature device that supplemental foods were received ☐ Are delivered only a one-month supply of supplemental foods per delivery

I.	FOOD DELIVERY CHECKLIST
	☐ Other (specify): Click or tap here to enter text.
5.	
	☐ Only to the participant
	☐ To the proxy
	☐ To any adult at home during time of delivery
	□ To anyone at home during time of delivery□ Other (specify): Click or tap here to enter text.
6.	Documentation:
	 a. The forms verifying delivery are reconciled against vendor invoices: □ Weekly □ Monthly
	☐ Other (specify): Click or tap here to enter text.
	b. Signatures of participants who sign the receipt are compared to signatures on file: \Box Yes \Box No
7.	Please attach a list of the names of contractors/providers that the State agency works with to provide Home Delivery services: Click or tap here to enter text.
	DITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or tape to enter text.
III.	DIRECT DISTRIBUTION FOOD DELIVERY SYSTEMS
\boxtimes	Does not apply (proceed to next section)
1.	The State agency uses direct distribution food delivery systems to: ☐ Distribute all WIC program foods
	☐ Distribute all wic program roods ☐ Distribute specialty infant formula and/or medical foods
	☐ Distribute specialty infant formula and/of medical foods ☐ Distribute foods to accommodate the needs of select participants
	☐ Other (specify): Click or tap here to enter text.
2.	The State agency uses:
	☐ One central warehouse and delivers directly to local agencies
	\square One central warehouse from which foods are sent to one or more subsidiary warehouses before delivery to local agencies
	☐ Other (specify): Click or tap here to enter text.

3.	Warehouses are operated by: ☐ State agency ☐ Local agencies ☐ Other public agency ☐ Under contract with private business ☐ Other (specify): Click or tap here to enter text.
4.	Warehouses used for WIC foods are also used to store other FNS program commodities (please specify which):
	☐ Yes, Click or tap here to enter text. ☐ No
5.	Foods are distributed to participants: Grocery store fashion Pre-packaged Other (specify): Click or tap here to enter text.
6.	Upon receipt of foods, participants / caregivers / proxies are required to sign: ☐ A receipt for each food received ☐ A receipt for all foods received (as a whole package) ☐ Other (specify): Click or tap here to enter text.
7.	Foods are distributed to participants: Monthly Every three months Other (specify): Click or tap here to enter text.
8.	Participants with limited access to distribution sites can utilize: ☐ Home food delivery ☐ Cost-free transportation ☐ Other (specify): Click or tap here to enter text.
9.	Monitoring and Inventory Control: Describe the State agency's methods for ensuring WIC supplemental foods are adequately received, in stock, and issued. Click or tap here to enter text.
	Please indicate the provisions the State agency includes in its inventory control policies for direct distribution contractors: Separation of duties for intake and inventory Stock rotation Performance of perpetual and physical inventory duties

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☐ Reconciliation against issuance records
☐ Other (specify): Click or tap here to enter text
10. Please attach a list of the names of contractors that the State agency works with to provide Direct Distribution Delivery services: Click or tap here to enter text.
ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation):: Click or tap here to enter text.
IV. RETAIL FOOD DELIVERY SYSTEMS: BENEFIT ISSUANCE AND FOOD INSTRUMENTS
A. Electronic Benefit Transfer (EBT) Management
1. Does the State agency have any future EBT changes planned?
⊠ Yes □ No
 a. If yes, what type of changes: ☒ EBT contract re-procurement ☒ Self-checkout installation at vendors ☒ Offline to Online EBT transition ☒ Other (specify): Expand current Hy-Vee and Walmart online shopping pilots to Wisconsin stores.
b. If yes, please provide a short description of the type of changes and when they are expected to be implemented. Contract negotiations in progress for re-procurement with FIS expected to be finalized summer or early fall 2024. Sole source waiver has been requested internally and with FNS to cover any time between the July 20, 2024, current contract expiration, and when the new contract is approved and in place. Piggly Wiggly stores are developing self-checkout for their POS but have not shared an expected date. Online shopping pilot (HyVee and Walmart) expansion in Wisconsin is being discussed with our contractors. No timeline has been determined yet.
Additional information if applicable: Click or tap here to enter text.
B. Food Instrument Overview
 The State agency uses the following types of Food Instruments (check all that apply): ☑ EBT card ☑ QR code
☐ Other (e.g., paper voucher): Click or tap here to enter text.

2. Please provide a description of the State agency's system for ensuring the accountability and security of food instruments and electronic benefits. Attach and cite relevant policies and procedures. Policy 4.41 eWIC Card

Additional information: Please provide a facsimile of the EBT card as an Appendix or cite the location in the State agency's Food Delivery Policy: Appendix I.IV.B. eWIC Card

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	for Sch	e State agency: Requires participants to pick up food instruments at the local agency when scheduled an in-person nutrition education or a certification appointment. Allows benefits to be issued remotely to participants except when the participant is neduled for nutrition education or a certification appointment. Mails food instruments to participants. Other (specify): Allows benefits to be issued remotely if the certification, transfer, or an education is conducted remotely.		
2.	 The State agency requires the following proof of receipt when issuing Food Instruments □ Participant / caretaker / proxy signature confirming receipt □ Local agency staff initials □ Documented in MIS ☑ Other (specify): information, including staff issuing, is documented in MIS 			
3.	Ma	ailing of Food Instruments:		
	a.	The State agency provides local agencies with guidelines / procedures for mailing Food Instruments to participants: ☐ No		
	b.	The State agency has implemented the following policy regarding mailing Food Instruments (FI) (check all that apply) FI are sent first class mail *(first class is considered regular mail) FI are sent registered mail FI are sent certified mail FI are sent restricted mail Return receipt is requested on FIs sent certified mail Envelope specifies, "do not forward, return to sender" or "do not forward, address correction requested" Other (specify): Click or tap here to enter text.		
	c.	The State agency approves mailing Food Instruments under the following conditions: \boxtimes Participant resides in rural area		

	 ☑ Participant is unable to visit clinic during operating hours (e.g., due to employment or childcare) ☑ Clinic management (e.g., temporary clinic closure) ☐ Participant safety (e.g., circumstances where participant safety can't be guaranteed at the clinic location) ☐ Cost effectiveness (e.g., the clinic is temporarily understaffed) ☐ Public Health Emergency ☑ Other (specify): when the certification or transfer is conducted remotely
	 d. When mailing Food Instruments, documentation of issuance is: ☐ Signed by participant at the next in-person appointment ☐ Documented in the MIS by local agency staff ☐ Other (specify): Click or tap here to enter text.
	e. Please describe how the state agency ensures program integrity in the mailing of food instruments: Policy 4.41 C.
4.	The State agency requires local agency staff to educate each new participant / caretaker / proxy regarding: \[\times \text{ Authorized vendors / farmers} \] \[\tau \text{ Transaction procedures} \] \[\times \text{ Transacting WIC-approved foods} \] \[\times \text{ Use of a proxy} \] \[\times \text{ Reporting problems / requesting assistance} \] \[\times \text{ Participant violations (i.e., selling WIC benefits)} \] \[\times \text{ Food Instrument security tips (i.e., regularly changing PIN)} \] \[\times \text{ Other (specify): Click or tap here to enter text.} \]
5.	The State agency's proxy policy includes the following: ☐ Limits the number of participants a single proxy may sign for, except that a proxy may pick up Food Instruments for all homeless WIC participants in a facility ☐ Limits proxy to specified number of Food Instrument pick-ups ☐ Limits proxy to a minimum age ☐ Limits proxy assignment to local WIC staff ☒ Proxies are required to show identification card at Food Instrument pick up ☐ Other (specify): Click or tap here to enter text.
6.	What are the State agency procedures for providing customer service during non-business hours for participant / vendor / farmer inquiries? ☑ EBT toll free number ☐ Other (specify): Click or tap here to enter text.

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	7.	Speci	al Food Instrument Issuance Accommodations
		a.	The State agency has established food delivery procedures in cases of natural disaster and emergencies including: ☑ Mailing food instruments ☑ Remote benefit issuance ☑ Direct distribution ☑ Home food delivery ☐ Other (specify): Click or tap here to enter text.
		b.	Does the State agency adapt its food delivery system to accommodate the needs of homeless individuals? \[\sum \text{Yes} \sum \text{No} \] If yes, please cite and attach policy: Click or tap here to enter text.
			DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or enter text.
D.	Foo	od Ins	trument Redemption and Disposition
	1.	⊠ Ye	state agency system assures 100% disposition of all Food Instruments: s
	2.	(PAN done EBT c ⊠ Ye	BT systems disposition, does the State agency link the Primary Account Number) associated with the electronic transaction to valid issuance records? (This can be by matching the electronic benefit record for the household to redemptions by the card number (PAN) at the aggregate household benefit level.) So No Specify how the State agency ensures disposition for EBT: Click or tap here to enter
	3.	⊠ Ye	the disposition happen within 120 days of the first date of use for the participant? s
	<mark>4.</mark>		omer Service Standards
		a.	he State agency's customer service procedures enable participants or proxies to do

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			the following during non-business hours:
			Report a lost/stolen/damaged card
			Report other card or benefit issues
			Receive information on the EBT food balance
			Receive the current benefit end date
			Other (specify): Click or tap here to enter text.
		b.	Describe how the State agency responds to reports of lost/stolen/damaged cards
			within one business day of the date of the report. The state agency does not receive
			these reports, the local agency does. If this were to happen, the local agency would
			be contacted and respond the same day.
	5.	Los	st / Stolen / Damaged Food Instruments - Please attach and cite the policies and
			ocedures for replacing lost, stolen, or damaged Food Instruments, including how the
		ass	sociated benefits are transferred within seven business days. Policy 4.41
ΑD	DITI	ONA	AL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or tag
			er text.
v.	RE	TAII	FOOD DELIVERY SYSTEMS: VENDOR MANAGEMENT
A.	Pa	rtici	pant Access
	1.	inc acc	ease provide the State agency definition for participant access. Include full criteria, cluding geography, density, and any other parameters in your response: Participant cess is assessed using a one-mile driving distance to nearest authorized store from qualified/denied location in an urban area. The distance for rural areas is five miles.
			AL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or tager text.
В.	Ve	ndo	r Selection and Authorization
	1.	Nur	mber and Distribution of Authorized Vendors
		a.	Does the State agency use limiting criteria to limit the number of vendors it authorizes?
			☐ Yes
		b.	If yes, check and specify the type(s) of criteria used (e.g., vendor / participant ratio of 1:100 per county):

 \square Vendor / participant ratio

	 □ Vendors / local agency ratio □ Vendors / local service area or county ratio □ Vendors / geographic area □ Vendor / State agency staff ratio □ Statewide cap on the number of vendors □ Other (specify): Click or tap here to enter text.
2. Ver	ndor Application periods:
a.	The State agency considers applications: ☐ On an ongoing basis ☐ Annually in Choose an item. for a new agreement that begins in Choose an item. ☐ Every two years (specify month): Choose an item. ☐ Every three years (specify month): Choose an item. ☐ Any time there is a participant access need The State agency is currently under a: ☐ Federal Moratorium ☐ State agency – imposed deferral of application processing ☐ Other (specify): Click or tap here to enter text.
b.	If the State agency does not accept applications on an ongoing basis, please explain how the State agency processes applications if it is determined there will otherwise be inadequate participant access: Click or tap here to enter text.
3. Ver	dor Selection and Authorization
a.	The vendor selection criteria used to select vendors for program authorization includes:
	Required criteria: I EBT capable as defined in 7 CFR 246.12(aa)(4)(ii) I Competitive price criteria based on: I Market basket prices I Vendor applicant prices I WIC redemption data I A State agency standard drawn from a price survey I Other (specify): Click or tap here to enter text. I Minimum stocking requirements (MSR) that include the federal minimum. MSR
	are: ⊠ Statewide

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□ Peer group specific

Please attach a copy and cite: The minimum stock requirements are applied statewide based on the number of cash registers. MSR are reduced for stores with 10 or less registers to reduce barriers for stores which do not typically have families purchasing foods in all categories. Appendix I.V.B.3.a Minimum Stock Requirements A requirement to obtain infant formula only from sources included in the State agency's list of State licensed infant formula wholesalers, distributors, and retailers and manufacturers registered with the U.S. Food and Drug Administration

☑ A business integrity criteria that includes:

oxtimes No history during the past six years, among the vendor's owners, officers, or
managers of criminal convictions or civil judgments for activities listed in 7 CFR
246.12(g)(3)(ii)

- □ No history of other business-related criminal convictions or civil judgments
- ☑ Other (specify): The vendor has not been adjudged to be delinquent in the payment of taxes under Wis Stats. Chs 71, 72, 75, 77, 78, or 139
- ☐ Lack of current SNAP disqualification or civil money penalty for hardship per 7 CFR 246.12(g)(3)(iii)
- ☑ Incentive items management (if the State agency is certified to authorize A50) vendors) (specify): A-50 vendors are informed incentive items are not allowed.

Optional criteria

☐ A requirement to stock a full range	of foods in addition t	o WIC supplemental
foods		

- ☐ Redemption of a minimum value/volume of food instruments and CVBs
- ☐ Satisfactory compliance with previous vendor agreement
- ☐ Certification by an approved State or local health department
- ☐ Proof of authorization as a SNAP retailer, including SNAP authorization number
- ☐ Lack of previous WIC sanctions
- ☑ Hours of operation which meet State agency criteria (specify): Store must be open at least two 4-hour blocks of time on each of 5 days.
- ☑ Other (specify): Vendor has no outstanding forfeitures, recoupment assessments, enforcement assessments or civil money penalties for violations of WIC Program rules. Vendor has not accepted food instruments before becoming an authorized vendor.
- b. Infant formula: Please attach or briefly explain the policies and procedures for compiling and distributing to authorized WIC vendors, on an annual or more frequent basis, a list of authorized infant formula wholesalers, distributors, and retailors: The list of authorized vendors is posted on https://www.dhs.wisconsin.gov/publications/p4/p40146.pdf
- c. Does the State agency assess all vendor applications not meeting selection criteria

		for participant access?	
		⊠ Yes □ N	0
		Describe or attach and as an appendix the pro- applications for participant access: Participant driving distance to nearest authorized store from a area. The distance for rural areas is five miles	access is assessed using a one mile
	d.	Does the State agency authorize mobile store ☐ Yes	
		AL DETAIL – Food Delivery Appendix and/or Progression	rocedure Manual (citation): Click or tap
nere to	enu	ter text.	
C. Ve	endo	or Cost Containment	
1.	Ass	ssessing for above-50-percent (A50) status:	
	a.	 Does the State agency authorize any vendor their annual food sales from WIC transaction	ns (i.e. A50 vendors)?
	b.	 When does the State agency assess vendors ☑ At authorization 	for above-50-percent status?
		☐ 6 months after authorization	
		☑ Annually ☐ Other (specify): Click or tap here to	ontortoyt
		Definer (specify). Click of tap here to	enter text.
	c.	 How does the State agency assess vendors f ☑ Use the Potential A50 Vendors rep ☑ Collect food sales documentation f 	ort in FDP (previously WIC-6 in TIP) rom vendor
		☐ Collect food sales documentation f	
		\square Other (specify): Click or tap here to	enter text.
	d.	l. If the State agency authorizes above-50-per	cent vendors, please provide a copy of
		the State agency's policies and procedures c	
		CFR 246.12(g)(3)(iv). Vendors are required to	o offer participants the same courtesies

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offered to other customers and in accordance with the equal opportunity guidelines under Title 7 CFR Part 15. This includes money saving promotions like coupons, price matching, free ounces, "buy one, get one free deal" and reward programs. Offers cannot be made to only WIC customers. Details on how to handle incentives are found in the *WIC Vendor Manual*. Above-50-percent vendors are prohibited from providing any incentive items to WIC participants. Incentives include items or services provided by a vendor to attract customers or encourage customer loyalty.

	CL	istomer loyalty.				_
2.		r Peer Groups (If the nment system instead	= -	=		
	<mark>a.</mark>	Does the State agend	•		· · · · · · · · · · · · · · · · · · ·	and maximum
		allowable reimburse	ment levels for			
				<u> </u>	<mark>No</mark>	
	b.	Briefly describe how	the State agen	<mark>cy considers</mark>	participant acces	s by geographic
		area when establishi reimbursement leve Carroll, and Associates Wisconsin.	<mark>s</mark> . Geographic ai	rea isn't used	in peer group assig	nment. Burger,
	c.	Are vendors assigned	d to peer group	s for selection	on / authorization	?
		⊠ Yes		□ No	•	
	Ь	Are vendors assigned	to neer group	s for reimbu	irsement niirnose	ς?
	u.		to peer group		racinent purpose.	J:
	e.	Peer groups are base		ving:		
		☐ WIC sales volume	9			
		☐ Gross food sales				
		Number of cash □ Compare the second cash □	registers			
		☐ Square footage				
		☑ Type of Store☐ Location of store				
		☐ Local agency serv				
		☐ City, county, or r	_	15		
		☐ Urban, suburban ☐ ZIP codes	, Turai, Islanu			
		☐ Other (specify): (Click or tap here	e to enter te	xt.	
	f.	Has the State agency	received appro	oval for an e	xemption from th	e requirement

to use geography as one of the criteria for developing the peer groups?

		☐ Yes - date of most recent FNS approval: Click or tap here to enter text.☒ No
	g.	The State agency assesses the effectiveness of its peer group system and competitive price criteria to enhance system performance: ☐ Annually ☐ Biennially ☐ Every three years ☐ Other (specify): Click or tap here to enter text.
	h.	How does the State agency assess the effectiveness of its peer group system and competitive price criteria? Evaluate prices for a market basket of items at vendor re-application to determine if current peer group assignment is appropriate.
		 i. Provide date of most recent FNS peer group assessment of effectiveness per 7 CFR 246.12(g)(4)(ii)(C): 10/1/2022
		ii. Using the Vendor Peer Groups Chart (see Attachment 1), describe the peer groupings that the State agency plans to use during the upcoming fiscal year (e.g., supermarkets, medium and small grocery stores, convenience stores). See Appendix I.V.C.2.h
•		
3.	Vendo	r Exemptions
3.		If the State agency has no peer group system, and instead uses an alternative cost containment system:
3.		If the State agency has no peer group system, and instead uses an alternative
3.		If the State agency has no peer group system, and instead uses an alternative cost containment system: i. Has the State agency received approval for an exemption from the vendor peer group system requirement (7 CFR 246.12(g)(4)(v))? ☐ Yes, date of most recent approved exemption Click or tap to enter a
3.		If the State agency has no peer group system, and instead uses an alternative cost containment system: i. Has the State agency received approval for an exemption from the vendor peer group system requirement (7 CFR 246.12(g)(4)(v))? □ Yes, date of most recent approved exemption Click or tap to enter a date.
3.	a.	If the State agency has no peer group system, and instead uses an alternative cost containment system: i. Has the State agency received approval for an exemption from the vendor peer group system requirement (7 CFR 246.12(g)(4)(v))? ☐ Yes, date of most recent approved exemption Click or tap to enter a date. ☒ No ii. Describe the State agency's alternative system for comparing the prices of new vendor applicants and currently authorized vendors and selecting for authorization or reauthorization vendors that offer the program the

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☐ Yes

from competitive price criteria?

	If yes, please provide the notification sent to FNS explaining the exemption.
	Click or tap here to enter text.
c.	Did the State agency exempt non-profit WIC vendors (other than health or human services agencies that provide food under contract with the State agency)

 \bowtie No

D. Vendor Agreements

- 1. Please provide a copy of the State agency's current standard vendor agreement as an appendix and cite: I.V.D.1 Vendor Agreement
- 2. Describe how the State agency transmits to vendors the sanction schedule and the process for notification of violations. Sanction schedule is included in WI Admin. Code ch DHS 149 which is linked in the Vendor Manual and on the WIC Vendor website at https://docs.legis.wisconsin.gov/code/admin_code/dhs/110/149
- 3. Does the State agency use a nonstandard vendor agreement to meet any unique circumstances (e.g. commissaries, etc.)?☐ Yes, if yes, please attach a copy of the agreement as an appendix and cite: Click or tap here to enter text.

 \bowtie No

4. Does the State agency delegate the signing of vendor agreements to its local agencies?
 ☐ Yes, provide a description of the supervision and instruction provided to local agencies to ensure the uniformity and quality of this activity: Click or tap here to enter text.
 ☒ No

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): I.V.D.4 WIC Vendor Manual

E. Vendor Training

1.	Does annual vendor tra	ining cover the required content in 7 CFR 246.12(i)(2)?
	⊠ Yes	\square No (please explain why): Click or tap here to enter text.

2. Vendors or vendor representatives receive training on the following occasions and / or through the following materials:

☐ On-site (in-store)) meetings/	conferences
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☐ Off-site meetings/conferences

			☑ During routine monitoring visits (e.g., educational buys)
			When specialized technical assistance is requested
			Written materials (e.g., newsletters)
			☐ Audio or video recordings☒ Teleconference, video conference, or webinars
			□ Vendor hotline
			○ Other (specify): State agency website
	3.	Ver	ndors or vendor representatives receive interactive training as follows:
			oxtimes At or before initial authorization
			□ At least once every three years □
			☐ Annually or more frequently than once every three years
	4.	Del	legation of Vendor training
		a.	The State agency delegates its vendor training to:
			☑ None (State agency conducts all vendor training)
			☐ Local agencies
			☐ A contractor (specify):
			\square A vendor association / representative (specify):
			☐ Other (specify):Click or tap here to enter text.
		b.	If not conducted by the State agency, please provide a description of the supervision
			and instruction provided to the training party to ensure the uniformity and quality of
			training: Click or tap here to enter text.
	5.	Do	cumentation of Vendor Training
		a.	Please describe how the State agency documents the content of and vendor
			participation in vendor training. The annual training letter and the PowerPoint
			presentation are saved in electronic files. Vendors complete an electronic proof of
			training form which is stored in our MIS system.
	ADI	DITIC	ONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or
	tap	here	e to enter text.
F.	Ro	utin	e Monitoring
	1.	Rou	utine monitoring visits
		í	a. Visits are conducted by:
			State agency staff

	□ Local agency staff
	□ Contractor
	☐ Other (specify): Click or tap here to enter text.
b.	If not conducted by the State agency, please provide a description of the
	supervision and instruction provided to the monitoring party to ensure the
	uniformity and quality of monitoring: Click or tap here to enter text.
C.	The following procedures are used in determining whether a vendor is selected
0.	for a routine monitoring visit:
	☐ Random selection
	☐ Periodic / scheduled training
	□ Periodic / scheduled review
	☐ Complaints
	oxtimes Other (specify): Based on date of monitoring in the geographic area
2 <mark>Vend</mark>	or monitoring improvement plan - Please briefly describe the State agency's plan
	low up on last year's monitoring results in the coming fiscal year: Last year's
	toring results showed substantial compliance and did not require follow-up beyond
routi	ne monitoring, corrective action plans, and training.
3 Vend	or Sanctions
J. Vena	or surrections
a.	Attach the State agency's sanction schedule and the process for vendor
	notification. Cite attachments: The Department informs vendors of sanctions by
	providing written notice by certified mail to the address of record with the WIC
	Program or by personal delivery. I.V.D.4 WIC Vendor Manual, I.V.D.1 Vendor
	Agreement, and I.V.F.3.a. WI Admin Code DHS 149 Subchapter III.
b.	Does the State agency's sanction schedule contain the required vendor sanctions
	as described under regulation 7 CFR 246.12(I)?
	⊠ <mark>Yes</mark>
	If no, please explain why: Click or tap here to enter text.
c.	Does the State agency impose civil money penalties in lieu of permanent
	disqualifications?
	⊠ Yes □ No
	If yes, please describe the instances in which this occurs: Refer to DHS $\underline{149.12}$
	and DHS <u>149.14</u> Appendix I.V.F.3.a.
d.	Pursuant to § 246.12(I)(1)(i) - In lieu of disqualifying a vendor for trafficking
	convictions, does the State agency choose to impose a civil monetary penalty
	when it determines and documents that:

I.

 (A) Disqualification of the vendor would result in inadequate participant access; or
\Box (B) The vendor had, at the time of the violation, an effective policy in place to
prevent trafficking; and the ownership of the vendor was not aware of, did not
approve of, and was not involved in the conduct of the violation.
If yes, how many times has the State agency used this option in the previous two
fiscal years? Click or tap here to enter text.
ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): A Civil Money Penalty is not allowed in lieu of permanent disqualifications after a vendor is convicted of trafficking per Appendix I.V.F.3.a. Wis. Admin Code DHS 149.10(1)(a)1.
G. Administrative Review of State Agency Actions
1. Please attach a copy of the administrative appeals process for vendors, farmers, and farmers' markets (citation): Appendix I.V.F.3.a. Wis. Admin Code DHS 149.18
ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click o tap here to enter text.
VI. RETAIL FOOD DELIVERY SYSTEMS: FARMERS / FARMERS' MARKETS
☑ Does not apply
1. Food instrument:
 a. Please describe the type of food instrument used for CVB at farmers' markets: □ QR code sticker
☐ QR code on mobile app
☐ Printed QR code
☐ Mobile wallet
☐ EBT card
☐ Other (specify): Click or tap here to enter text.
2. General Management
a. Is CVB at farmers' markets state-wide?
\square Yes \square No, selected areas (specify): Click or tap here to enter text.

	b.	Does the State agency delegate any tasks related to the management of the Farmers or Farmers' Markets to another entity? ☐ Yes, to whom? Click or tap here to enter text. ☐ No
		If yes, which tasks? ☐ Authorization / agreements ☐ Monitoring ☐ Training ☐ Administrative reviews ☐ Other (specify): Click or tap here to enter text.
	C.	Does the State agency authorize farmers / farmers' markets to accept CVB based on authorization by the WIC Farmers' Market Nutrition Program (FMNP)? □ Yes □ No If no, please describe the selection criteria: Click or tap here to enter text.
3.		greements: Please provide a copy of the State agency's current farmer / farmers' arket agreement as an appendix and cite: Click or tap here to enter text.
4.	Tr	raining:
	a.	How often is training conducted for farmer / farmers' markets? ☐ At or before initial authorization ☐ Annually ☐ At least every three years following initial authorization ☐ Other (specify): Click or tap here to enter text.
	b.	How is training conducted? ☐ Newsletter ☐ Web-Based Training ☐ Video Conference ☐ In person ☐ Other (specify): Click or tap here to enter text.
	C.	Training is conducted by: ☐ State agency ☐ Local agency ☐ Contractor ☐ Other (specify): Click or tap here to enter text.
	d.	If training is conducted by an entity other than the State agency, please provide a

description of the supervision and instruction provided to the entity responsible for training to ensure the uniformity and quality of this Training: Click or tap here to enter text.

5. Monitoring:

a.	Farmers/farmers' markets are included in the: ☐ FMNP sample of farmers / farmers' markets for monitoring ☐ WIC sample of vendors for monitoring ☐ Other (specify):
b.	Monitoring includes: ☐ Covert methods, such as compliance buys ☐ Overt methods, such as routine monitoring ☐ Other (specify): Click or tap here to enter text.

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): Click or tap here to enter text.