

Hawaii WIC Services Branch Vendor Training 2009



*Hawaii Special Supplemental Nutrition
Program for Women, Infants, and Children*

Training Packet Materials

- Training Outline/Acknowledgement
sign and return
- Training Handout (PowerPoint)
- WIC Allowed Foods List
- WIC Identification Folder
- WIC Shelf Markers
- Vendor Complaint Form
- Vendor Order Form

Training Topics

- Purpose of the WIC Program
- Foods authorized by WIC
- Minimum stocking requirements
- Procedures for transacting and redeeming WIC checks & C V Vs
- Vendor sanction system
- Vendor complaint process
- Recent changes in WIC Program policies

WEB PAGE

http://hawaii.gov/health/family-child-health/wic/index_html

WOMEN, INFANTS AND CHILDREN



The Special Supplemental Nutrition Program for Women, Infants and Children (WIC), is a federally funded program which provides Hawaii residents with nourishing supplemental foods, nutrition education, breastfeeding promotion and health and social service referrals. The participants of WIC are either pregnant, breastfeeding, or postpartum women, and infants and children under age five who meet income guidelines and have a medical or nutritional risk.

News & Update



[New WIC Food Packages, effective October 1, 2009](#)

Program Information

[About WIC](#)

[Benefits of WIC](#)

[How to Apply](#)

[Income Eligibility Requirements](#)

[Hawaii WIC Clinic Locations](#)

[Nutrition Information](#)

[WIC Allowed Food List](#)

Public Resources

[Breastfeeding](#)

[Hawaii WIC Store List](#)

[Hawaii WIC Store Locations](#)

Job & Career Opportunities

Professional Resources

[Information for Hawaii WIC Vendors](#)

[Information for Healthcare Professionals](#)

[Information for WIC Local Agencies](#)

Data, Reports, & Surveys

Public Notices

Links

Different view
from handout

WIC Web Page

Professional Resources

[Information for Hawaii WIC Vendors](#)

[Information for Healthcare Professionals](#)

[Information for WIC Local Agencies](#)

Public Notices

Data, Reports, & Surveys

Links

NON-DISCRIMINATION INFORMATION

"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 complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.



HAWAII WIC VENDOR INFORMATION

In order to accept Hawaii WIC checks, a store must have a signed and approved Authorized WIC Vendor from the Hawaii WIC Services Branch. The current Vendor Authorization period ends September 30, 2010. Now becoming a WIC Authorized Vendor as well as vendors requesting reauthorization can apply by filling out Vendor Application Form. Stores interested in applying to be a WIC Vendor should first read: [Selection](#)

[Agreement](#)

[Allowed Food List](#)

[WIC Vendor Application Form](#)

[WIC Approved Infant Formula Suppliers List](#)

[Bottle Bill Information](#)

[Vendor Forms and Supply Requests](#)

[Vendor Manual \(pdf format\)](#)

[Maps of Participating Vendor Locations](#)

[Minimum Inventory Requirements](#)

[New Minimum Inventory Requirements October 01, 2009](#)

[Video: Store Processes and Cashier Training \(15 min. mpg\)](#)

[Vendor Training](#)

[WIC Tacks & Cashiers Alerts](#)

Choose a Topic...



Go

CONTACT INFORMATION

Tim Freeman, Vendor Management Specialist
WIC Services Branch
Lelopapa A. Kamehameha State Office Tower
235 S. Beretania Street, Suite 701
Honolulu, Hawaii 96813
(808) 586-4776 or Toll Free 1-888-820-6425
Fax (808) 586-8189

[Disclaimer and Terms of Use](#)

Hawaii State Department of Health • 1250 Punchbowl Street • Honolulu, HI 96813

Different from handout

WIC Program Goals

WIC was established in 1972 by the U.S. Congress to:

- Reduce the complications of pregnancy.
- Reduce iron-deficiency anemia in women, infants, and children.
- Decrease the number of infants born with low birth weight.
- Promote good growth and development of infants and young children.

Overview

- Studies have shown that inadequate nutrition and health care represents a threat to the physical and mental well being of certain individuals.
- Proper nutrition at the beginning of life can help prevent serious health problems.

National Overview

- U.S. Department of Agriculture Food and Nutrition Service
- 2,000 Local Agencies
- 10,000 Clinic Sites
- 50 State Health Departments
- 34 Indian Tribal Organizations
- District of Columbia
- 5 Territories – Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Puerto Rico & Virgin Islands

National Overview

- Over 7.9 million participants in U.S.
 - 22% of all pregnant women
 - 50% of all infants born
 - 20% of all children (1 – 5 yrs. Old)

Hawaii WIC Statistics

- Hawaii WIC serves an average of 34,050 participants per month.(2009)
- Average of 1 million checks issued worth over \$31.8 million were transacted.

Services Provided by WIC

- Nutrition education
- Breastfeeding support
- Supplemental foods
- Referrals to health care and social services

Who is Eligible for WIC?

1. The applicant must fall into one of the following categories served by WIC:

- Pregnant women.
- Breastfeeding women (up to one year).
- Postpartum women (up to 6 months).
- Infants (under one year of age).
- Children (one to five years of age).

WIC Eligibility

2. The applicant must live in Hawaii.
3. Nutritional need: Applicant must have a medical and/or nutrition problem which indicates a nutritional need that could be improved by participating in the WIC Program.
4. Income

WIC Gross Household Income Guidelines

July 01, 2009 – June 30, 2010

Family Size	Monthly Income
1	\$0 to \$1,921
2	\$0 to \$2,584
3	\$0 to \$3,247
4	\$0 to \$3,910
5	\$0 to \$4,573
For each additional family member	\$663.00

How are WIC foods delivered?

- WIC local agencies (clinics) screen and certify applicants, provide nutrition counseling, and issue food prescriptions (checks) to WIC participants.
- Retailers (Vendors) provide an avenue for the WIC customer to fill their prescriptions.
- WIC's banking contractor pays retailers for all WIC checks transacted according to WIC policies.

Vendor Selection Criteria

- 1. Competitive Prices - no exceptions**
- 2. Stocking Requirements**
- 3. Business Integrity**
- 4. History of Compliance with SNAP and WIC Programs for 6 years**
10/01/2008 Food Stamps changed name to Supplemental Nutrition Assistance Program (SNAP)
- 5. SNAP (Food Stamp) Authorization**
- 6. Business Type – including fixed location, not more than 50% annual income from WIC, full line/service grocery store,**

Vendor Selection Criteria *(cont.)*

7. **Volume of WIC Business (>90 checks transacted per quarter).**
8. **Accessibility To Participants (open a minimum of 10 hours, six days a week).**
9. **Sanitation (Valid Food Establishment Permit).**
10. **No conflict of Interest with the WIC Program or clinics.**
11. **Registered with the Hawaii State Dept. of Commerce and Consumer Affairs.**

Failure to comply with the selection criteria throughout the contract period will result in the termination of the Vendor's contract.

Authorized Vendors Must Post WIC Vendor Sign

- The WIC Vendor sign must be posted on or near the store's entrance.



Laminated 8 1/2" X 5 1/2"



Static Cling 4" X 5"

And / Or

Vendor Responsibilities

- Designate a WIC contact for your store.
- Post WIC Vendor sign.
- Stock an ample variety and quantity of WIC Allowed foods - Minimum Stocking Requirements
- Charge WIC clients same or lower prices.
- Mark or display prices clearly & near or on all WIC allowed foods.
- Post Hawaii WIC Shelf Markers for WIC authorized food.

Vendor Responsibilities (cont.)

- Process WIC customers in the same manner and offer same courtesies as other customers.
- Accept only Hawaii WIC checks presented by authorized purchaser.
- Provide the kind and quantity of foods listed on the WIC check
- Fill in the date used and amount of sale in permanent ink before having the customer sign the check.

Vendor Responsibilities (cont.)

- Reject any WIC Check that is altered, not in the valid date range, pre-signed or signatures do not match ID folder information.
- Enter vendor's unique ID number before depositing check
- Provide no cash refunds, rain checks or credit.
- Accept no payment from participants for return unpaid checks.

Vendor Responsibilities (cont.)

- Refund the WIC Program for overcharged checks.
- Attend WIC vendor training and provide training for store staff.
- Submit Price Surveys when requested.
- Comply with monitoring and compliance visits.
- Notify WIC in writing not less than 15 days of changes to stores status.

Time For A Change

Authorized Food

Minimum Stocking
Requirements



Time For A Change

- **The revisions align the WIC food packages with the 2005 Dietary Guidelines for Americans and infant feeding practice guidelines of the American Academy of Pediatrics**
- **The rule revisions reflect recommendations made by the Institute of Medicine (IOM)**
- **Interim rule comment period ends on 02/01/2010**

Hawaii WIC Allowed Foods List

- February 2008
- Least Expensive Milk
- Organic Foods Not Allowed
- Effective up to September 30, 2009

Hawaii WIC Program
Food List



Milk

Only least expensive fluid pasteurized: whole, reduced (2%), lowfat (1%), or fat free (skim or nonfat) in **gallon** size containers or as printed on WIC checks.

May be calcium plus or extra rich.

Any **evaporated** milk in a **12 ounce** can.

Any **powdered** milk up to the quantities specified.

Recombined pasteurized milk may be substituted for fluid milk.

Must be domestic.
Cannot buy any goat, rice, soy, or flavored milk.

When Printed on WIC Checks
Acidophilus, Lactose-Free, or Lactose-Reduced: whole, 2%, 1%, or fat free in ½ gallon container only.

May be calcium fortified.

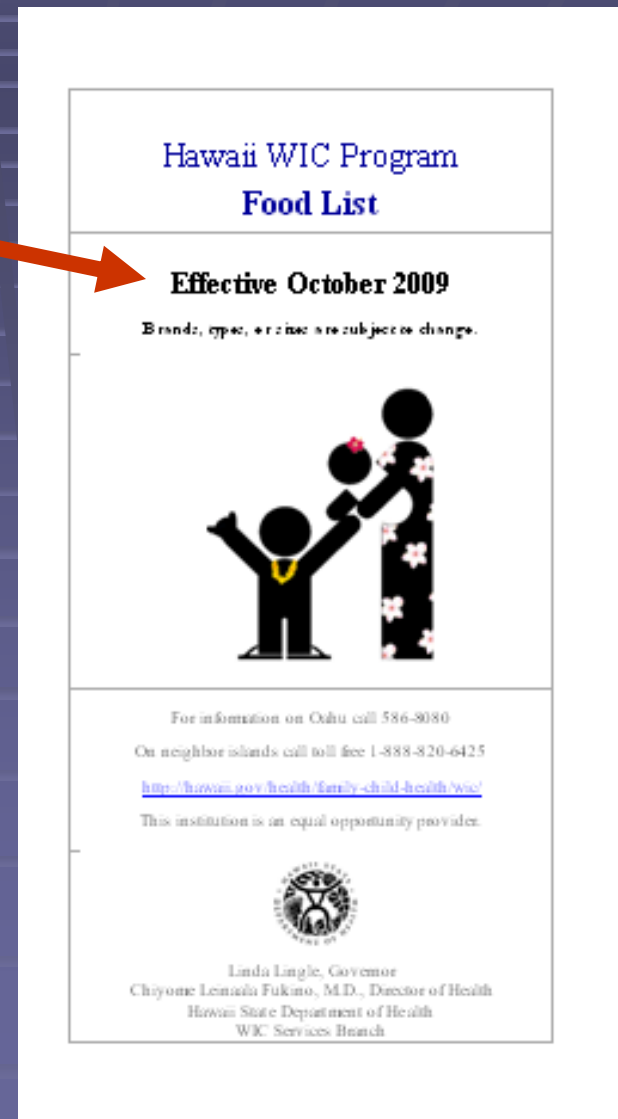
-Organic Foods Not Allowed-

Effective February 1, 2008

www.hawaiiwic.com
For Information on Oahu Call 586-8175
On Neighbor Islands Call Toll Free 1-888-820-6425

Hawaii WIC Allowed Foods List



- Effective October 1, 2009
- Changes to authorized foods
- No Organic
- Cash Value Voucher or **C V V**
Organic Allowed.



Cheese

- Domestic
- Regular, reduced or fat free allowed
- Block or ball
- 16 oz.
- Styles of: Cheddar (mild, medium, sharp, and extra sharp)
Colby, Monterey Jack, and Mozzarella
- Can combine styles

Cheese



1 pound (16 ounces) block or ball only, made in U.S.A.

- Any brand of Cheddar, Colby, Mozzarella, or Monterey Jack
- Regular, reduced or fat-free

Not allowed

- × No shredded, sliced, cube, string, or deli
- × No cheese with peppers, herbs, or flavors
- × No organic

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Cheese	<p>Any brand – Plain, domestic, pasteurized block, ball, regular, reduced or fat free</p> <p>Mild, medium, sharp, extra sharp</p> <p>Combination allowed</p> <p>Cheddar Colby Monterey Jack Mozzarella</p> <p>Not allowed:</p> <ul style="list-style-type: none"> • Cheese with peppers, herbs, flavors • Organic • Shredded, sliced, cube, string, or deli 	6 pounds	<p>Any combination of 4 types in</p> <p>1 LB BLOCK OR BALL ONLY</p>	4 types

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED)

- | | | |
|---|--------|--|
| 1 | 18 OZ | PEANUT BUTTER |
| 1 | DOZ | EGGS, MEDIUM OR LARGE WHITE ONLY |
| 1 | CHOICE | 2 CANS (7.5 OZ) PINK SALMON
OR 4 CANS (3.75 OZ) SARDINES
OR 1 CAN (15 OZ) MACKEREL |
| 1 | LB | CHEESE - 1 LB BLOCK OR BALL ONLY |

Soy Beverages

- Pacific Ultra Soy
 - Plain or vanilla
 - Quart
 - Shelf stable
- 8th Continent
 - Original
 - Half Gallon
 - Refrigerator storage

Soy Products	
(available as a milk substitute only/children needing these foods must have medical documentation)	
Soy Beverage	
Pacific Ultra Soy (plain or vanilla flavors in quarts only)	8 th Continent (original in half gallons only)
	
<u>Not allowed</u>	
* No other flavors	
* No DHA/ARA	
* No organic	

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Soy Milk	<p>Pacific Ultra Soy Plain UPC 0-52603-08200-6</p> <p>Vanilla UPC 0-52603-08225-9</p> <p>8th Continent brand Original only UPC 0-53859-07066-3</p> <p>Not allowed:</p> <ul style="list-style-type: none"> • Organic 	4 containers	<p>Quart</p> <p>or</p> <p>½ Gallon</p>	N/A

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU - WIC APPROVED BRANDS ONLY
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK - WIC APPROVED BRANDS ONLY
1	QT	MILK (QUART) - SKIM / 1% / 2%
1	1/2 GAL	MILK, 1/2 GALLON - SKIM / 1% / 2%

Tofu

- Brands:
Aloha, House,
Kanai or Mori-Nu

- 1 Pound (16 oz.)
or less

Tofu



1 pound (16 ounces) block or less in medium firm, firm, or extra firm

- Aloha, House, Kanai, or Mori-Nu

Not allowed

- × No soft
- × No flavored or with seasonings
- × No organic

can combine sizes to equal 16 oz.

- Medium firm, firm or
extra firm

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Tofu	Aloha, House, Kanai, and Mori-Nu brands only Must be: Medium Firm Firm or Extra Firm Not allowed: <ul style="list-style-type: none">• Soft• Flavored or with seasonings• Organic	2	1 pound (16 ounces) block or less	N/A

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU - WIC APPROVED BRANDS ONLY
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK - WIC APPROVED BRANDS ONLY
1	QT	MILK (QUART) - SKIM / 1% / 2%
1	1/2 GAL	MILK, 1/2 GALLON - SKIM / 1% / 2%

Milk

- Cow Milk
- Domestic
- Gallons, Half Gallons or quarts checks will specify container size

Must be Least Expensive Brand


- When specified on check:
whole, fat-free, 1%, 2%,
Acidophilus
Lactose-free / reduced
in whole, fat-free, 1% or
2%

Powdered milk

quart packages as
specified on check

- Evaporated milk in 12 oz. can
whole, fat-free, 1% or 2%

Milk



Buy the type and container size listed on the check

- Least expensive brand
- Fat-free (skim), low-fat (1%), or reduced-fat (2%)
- The following are allowed only when listed on the check
 - Whole milk
 - Acidophilus or lactose free milk
 - Any brand dry (powdered) milk
 - Any brand evaporated milk

Not allowed

- ✗ No rice milk, buttermilk, or flavored milk
- ✗ No organic



Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Milk (Fluid)	<p>LEAST EXPENSIVE BRAND ITEM</p> <p>Refrigerated pasteurized or recombined Whole</p> <p style="text-align: center;">and</p> <p>Fat-free (skim) 1% (lowfat) 2% (reduced fat)</p> <p>Not allowed:</p> <ul style="list-style-type: none"> • Organic • Rice milk, buttermilk, flavored milk 	<p>5 whole</p> <p style="text-align: center;">and</p> <p>18 reduced</p>	<p>Gallon containers</p> <p style="text-align: center;">and</p> <p>Gallon containers</p>	N/A
	Evaporated Milk	<p>LEAST EXPENSIVE BRAND ITEM</p> <p>Any brand - whole, 2% (reduced fat), 1% (lowfat), or fat-free (skim).</p>	6	

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU – WIC APPROVED BRANDS ONLY
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK – WIC APPROVED BRANDS ONLY
1	QT	MILK (QUART) – SKIM / 1% / 2%
1	1/2 GAL	MILK, 1/2 GALLON – SKIM / 1% / 2%
2	GALLON	MILK – SKIM / 1% / 2%

Peanut Butter

- Any brand
- Plain, smooth, chunky, crunchy, extra crunchy, natural.
- 16 – 18 ounces only

Not Allowed

- Peanut butter spread
- Added jam, jelly, honey, chocolate or flavors
- Organic

Peanut Butter



16 to 18 ounces only

- Any brand, plain, smooth, chunky, crunchy, extra crunchy, natural

Not allowed

- × No spreads or reduced-fat
- × No added jam, jelly, honey, chocolate, or flavors
- × No organic

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Peanut Butter	Any brand – Plain Smooth Chunky Crunchy Extra Crunchy Natural Not allowed <ul style="list-style-type: none"> • Peanut Butter spread • Reduced fat • Squeeze tube • Added jam, honey, chocolate or flavors • Added flavor • Organic 	4	16 to 18 ounces	2 types

FOR PURCHASE OF THESE FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	18 OZ	PEANUT BUTTER
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	CHOICE	2 CANS (7.5 OZ) PINK SALMON OR 4 CANS (3.75 OZ) SARDINES OR 1 CAN (15 OZ) MACKEREL
1	LB	CHEESE - 1 LB BLOCK OR BALL ONLY

Beans, Peas, or Lentils

- Any dried peas, beans or lentils
- 8 oz. – 16 oz. packages
can combine types
- Weight & product information must be printed in English

Beans, Peas, and Lentils



- Any brand and type, dry only
- Mix or single type
- 8 ounce or larger to equal up to 16 ounces

Not allowed

- ✗ No added grains, spices, flavors, or seasoning packets
- ✗ No organic

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Beans, Peas or Lentils	Any brand and type dry only – dried beans, peas, or lentils Mix allowed Not allowed: <ul style="list-style-type: none">• Organic• Added grains, spices, flavors, seasoning packets	4 pounds	Any combination 8 - 16 ounce package to equal up to 16 ounces	2 types

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU - WIC APPROVED BRANDS ONLY
1	LB	BEANS, PEAS, LENTILS - DRIED
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	1 / 2 GAL	LACTOSE FREE MILK (HALF GALLON) WHOLE, 1% , 2%
1	QT	LACTOSE FREE MILK (QUART) WHOLE, SKIM / 1% / 2%

Eggs

Medium or large
White, grade A, Chicken

Eggs



Packages of one dozen medium or large only

- White, grade A chicken eggs only

Not allowed

- ✗ No brown, fertilized, free range, pasteurized, or omega
- ✗ No organic

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Eggs	Any brand – white, grade A Chicken, medium or large Not Allowed: <ul style="list-style-type: none">• Organic• Brown• Fertilized• Free range• Pasteurized• Omega	6	1 dozen cartons	N/A

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU - WIC APPROVED BRANDS ONLY
1	LB	BEANS, PEAS, LENTILS - DRIED
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	1 / 2 GAL	LACTOSE FREE MILK (HALF GALLON) WHOLE, 1% , 2%
1	QT	LACTOSE FREE MILK (QUART) WHOLE, SKIM / 1% / 2%

Whole Grains

- Whole Grains
1 - 16 oz.

Choice of:
100% Whole wheat
Bread

Brown Rice

Corn Tortillas (up to
16 oz)

Whole Grains	
100% Whole Wheat Bread	
1 pound (16 ounces) loaf <ul style="list-style-type: none">▪ Love's brand only <p><u>Not allowed</u></p> <p>✘ No organic</p>	
Brown Rice	
 <p>Brown Rice</p>	1 pound (16 ounces) bag <ul style="list-style-type: none">▪ Short or long grain, instant, quick, or regular cooking time▪ Best Yet, Safeway, Springfield, or Western Family brands only <p><u>Not allowed</u></p> <p>✘ No ready to serve or boil-in-a bag</p> <p>✘ No organic</p>
Corn Tortillas	
16 ounces or less <ul style="list-style-type: none">▪ Yellow or white corn▪ Arturos, Big Island, Don Pancho, La Burrita, Mission, Resers, or Sinaloa brands only <p><u>Not allowed</u></p> <p>✘ No fried, flavored, or seasoned</p> <p>✘ No organic</p>	

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPER	Minimum Quantity	Size	# of Varieties
Bread	Love's brand 100% Whole Wheat type only UPC 076990002614	5	1 pound loaf (16 ounce)	N/A
Brown Rice	Best Yet, Safeway, Springfield, and Western Family brands only Short or long grain, Instant, quick or regular cooking time Not allowed: <ul style="list-style-type: none"> • Ready to serve • Boil-in-a-bag • Organic 	4	1 pound (16 ounces) bag	N/A
Tortillas	Yellow or White Corn Arturos, Big Island, Don Pancho, La Burrita, Mission, Resers, and Sinaloa brands only Not allowed: <ul style="list-style-type: none"> • Organic • Flavored • Seasoned • Fried 	4	16 ounces or less	N/A

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU – WIC APPROVED BRANDS ONLY
1	LB	BEANS, PEAS, LENTILS - DRIED
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	1/2 GAL	LACTOSE FREE MILK (HALF GALLON) WHOLE, 1% , 2%
1	QT	LACTOSE FREE MILK (QUART) WHOLE, SKIM / 1% / 2%
1	16 OZ	100% WHOLE WHEAT BREAD (16 OZ) -OR- CORN TORTILLAS (UP TO 16 OZ) -OR- BROWN RICE (16 OZ)

Fruits and Vegetables

Fresh



- Whole, pre-cut, shredded, or packaged
- Yams and sweet potatoes
- Salad and greens in a bag

Not allowed

- × No salad bar items
- × No party trays
- × No decorative or ornamental
- × Not in baked goods
- × No roll-ups or fruit leather
- × No added flavor, dressing, or dip
- × No added nuts, dried fruit, croutons, etc.
- × No dried or powdered fruits or vegetables
- × No canned or jarred fruits or vegetables
- × No herbs or spices (like basil, chinese parsley)
- × No other potatoes (like white, red, russet, or gold)

Frozen



Any brand and variety of frozen fruits and vegetables

- Whole, cut, or mixed

Not allowed

- × No fruit with added sugar
- × No added sauce or creamed vegetables
- × No added rice, pasta, meat, white potatoes, or noodles
- × No french fries, hash browns, or tater tots
- × No breaded or battered vegetables

Fruits and Vegetables Fresh and Frozen

Allowed only on

Cash Value Vouchers - C V V

Not Allowed

Potatoes – white, red, yellow

Spices / Herbs / Sauces / Dressings

Dried Fruits & Vegetables

Breaded / Nuts / Flavor packets

Organic Allowed

Fruits and Vegetables Fresh and Frozen

Any fruit or vegetable - excluding the items listed on the Not Allowed list

May mix fruits and vegetables, fresh and frozen

Organic fruit and vegetables allowed

Poi in plastic bags and container allowed –
not allowed powdered poi

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
<p>Fruit</p> <p><i>Can only be purchased with WIC checks which state the Maximum Dollar amount</i></p> <p>Please refer to the WIC Food List brochure for more information including items NOT ALLOWED.</p>	<p>Fresh Fruit Any variety Whole, pre-cut, packaged or bagged</p> <p style="text-align: center;">and</p>	⇒	<p>Must maintain \$18 worth in stock and price must be clearly marked</p>	2
	<p>Frozen Fruit Any variety Whole, cut, bagged, packaged or mixed Salads and greens in bag allowed</p> <p>Not allowed:</p> <ul style="list-style-type: none"> • White potatoes • Added sugar 	⇒	<p>Must maintain \$18 worth in stock and price must be clearly marked</p>	2

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
<p>Vegetables</p> <p><i>Can only be purchased with WIC checks which state the Maximum Dollar amount</i></p> <p>Please refer to the WIC Food List brochure for more information including items NOT ALLOWED.</p>	<p>Fresh vegetables Any variety Whole, pre-cut, packaged or bagged Salad and greens in a bag</p> <p>Not allowed:</p> <ul style="list-style-type: none"> White potatoes <i>including:</i> Russet Potatoes Red Potatoes Gold Potatoes Yellow Potatoes <i>(orange yams & sweet potatoes are allowed)</i> <p>and</p>	⇒	Must maintain \$18 worth in stock and price must be clearly marked	2
	<p>Frozen vegetables Any variety Whole, cut, or mixed</p> <p>Not allowed:</p> <ul style="list-style-type: none"> Added sugar Added sauce Creamed vegetables Rice, pasta, meat, white potatoes or noodles French fries, hash browns or tater tots Breaded or battered vegetables White potatoes 	⇒	Must maintain \$18 worth in stock and price must be clearly marked	2

Cereal		
Cold Cereal		
*Whole grain cereals		
Quaker Life 	General Mills Kix 	General Mills Total* 
Best Yet Crispy Rice 	Malt-O-Meal Crispy Rice 	Safeway Crispy Rice 
Best Yet Toasted Oats* 	Malt-O-Meal Scooters* 	Safeway Toasted Oats* 
Best Yet Corn Flakes 		Safeway Corn Flakes 
Malt-O-Meal Honey & Oat Blenders 		Malt-O-Meal Frosted Mini Spooners* 
Hot Cereals		
Best Yet Instant Oatmeal* (plain) 	Quaker Instant Oatmeal* (original) 	Malt-O-Meal Hot Wheat Cereal* (original) 

Cereals

- Cereal
11- 36 ounce

Mix and match to equal 36 ounces or less

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Cereals	Brand Specific Required to stock at least 1 of these whole grain cereals:	15	11 to 36 ounce size box, bag, or package	5 types
	Best Yet Toasted Oats Instant Oatmeal plain General Mills Total Malt-O-Meal Frosted Mini-Spooners • (Regular only) Scooters HotWheat Cereal Original Quaker Instant Oatmeal - Original *(Regular flavor-Individual packets) Safeway Toasted Oats			
	Additionally allowed cereals:			
	Best Yet Corn Flakes Crispy Rice General Mills Kix Malt-O-Meal Crispy Rice Honey & Oat Blenders • (Regular only) Quaker Life • (Regular only) Safeway Crispy Rice Corn Flakes			

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

1	16 OZ	TOFU – WIC APPROVED BRANDS ONLY
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK - WIC APPROVED BRANDS ONLY
1	QT	MILK (QUART) – SKIM / 1% / 2%
1	1/2 GAL	MILK, 1/2 GALLON – SKIM / 1% / 2%
2	GALLON	MILK – SKIM / 1% / 2%
1	36 OZ	WIC APPROVED CEREAL

Juice

- 100% Fruit Juice
- No Sugar Added
- At Least 120% DV for Vitamin C
- 10 - 16 ounce frozen concentrate
and/or
- 11.5 ounce non-frozen concentrate -shelf stable

Juice

100% juice, with no sugar added, with at least 120% Daily Value (DV) for vitamin C

- Flavors allowed shown below
- Brands allowed shown below
- Frozen and non-frozen juice concentrate types shown below
- The following are allowed only when listed on the check:
 - 16 ounce frozen juice concentrate

Not allowed

- ✗ No blends, juice beverage, drinks, cocktail punch, or nectars
- ✗ No added zinc or other nutrients
- ✗ No organic

Frozen Concentrate in 10 to 16 ounces:

Apple

Best Yet



Seneca (red label)



Treetop (green label)



Grape

Welch's White
(yellow pull-strip)

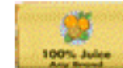


Welch's Purple
(yellow pull-strip)



Orange

Any brand



Pineapple

Dole



Non-frozen concentrate in 11.5 ounces:

(Juicy Juice brand only in the flavors below)

Berry



Punch



Apple



Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Juice	Orange Frozen Concentrate – Any brand	6	16 ounce cans	N/A
	and			
	Frozen Concentrate These varieties and brands only Apple – Treetop (green label) Seneca (red label) Best Yet Grape – Welch's (yellow pull strip) White Purple Orange – Any brand Pineapple – Dole and Non-frozen concentrate, 11.5 ounce cans Apple – Juicy Juice Berry – Juicy Juice Punch – Juicy Juice	26	10 to 12 ounce cans <i>(Can be all frozen, all non-frozen concentrate or combination)</i>	2 types

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED)

1	18 OZ	PEANUT BUTTER
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY
1	CHOICE	2 CANS (7.5 OZ) PINK SALMON OR 4 CANS (3.75 OZ) SARDINES OR 1 CAN (15 OZ) MACKEREL
1	LB	CHEESE - 1 LB BLOCK OR BALL ONLY
2	ITEMS	JUICE - WIC APPROVED (10 OZ TO 16 OZ)

Canned Fish

- Pink Salmon 7.5 oz can
- Mackerel in any sauce
15 oz. can
- Sardines in any sauce
3.75 oz can
- Tuna - Water packed,
dolphin safe, chunk light
5 oz cans

Canned Fish

- Any brand of the types of canned fish listed below
- Sizes for each type of fish as listed below

Pink salmon in its own juice

- 7.5 ounce can only

Not allowed

- × No flavored
- × No red, sockeye, or blueback
- × No boneless or skinless
- × No pouches or snack packs
- × No organic



Mackerel in any sauce

- 15 ounce can only

Not allowed

- × No organic



Sardines in any sauce
3.75 ounce can only

Not allowed

- × No organic

Chunk light tuna in water

- 5 ounce can only

Not allowed

- × No albacore or fancy white tuna
- × No pouches or snack packs
- × No organic



Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Pink Salmon	Any brand – pink Not allowed: <ul style="list-style-type: none"> • Flavored • Red, sockeye or blueback • Boneless or skinless • Pouches • Snack packs • Organic 	12	7.5 ounce cans	N/A
Mackerel	May be packed in any sauce. Not allowed: <ul style="list-style-type: none"> • Organic 	6	15 ounce	N/A
Sardines	May be packed in any sauce. Not allowed: <ul style="list-style-type: none"> • Organic 	24	3.75 ounce	N/A
Tuna	Any brand – chunk light, water packed Not allowed: <ul style="list-style-type: none"> • Albacore • Fancy White • Pouches • Snack packs • Organic 	9	5 ounce cans	N/A

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

- | | | |
|---|--------|--|
| 1 | 18 OZ | PEANUT BUTTER |
| 1 | DOZ | EGGS, MEDIUM OR LARGE WHITE ONLY |
| 1 | CHOICE | 2 CANS (7.5OZ) PINK SALMON
OR 4 CANS (3.75 OZ) SARDINES
OR 1 CAN (15OZ) MACKEREL |
| 1 | LB | CHEESE – 1 LB BLOCK OR BALL ONLY |
| 2 | ITEMS | JUICE – WIC APPROVED (10 OZ TO 16 OZ) |
| 2 | ITEMS | PINK SALMON, 7.5 OZ. CANNED |

OR

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

- | | | |
|---|--------|--|
| 1 | 18 OZ | PEANUT BUTTER |
| 1 | DOZ | EGGS, MEDIUM OR LARGE WHITE ONLY |
| 1 | CHOICE | 2 CANS (7.5OZ) PINK SALMON
OR 4 CANS (3.75 OZ) SARDINES
OR 1 CAN (15OZ) MACKEREL |
| 1 | LB | CHEESE – 1 LB BLOCK OR BALL ONLY |
| 2 | ITEMS | JUICE – WIC APPROVED (10 OZ TO 16 OZ) |
| 2 | ITEMS | PINK SALMON, 7.5 OZ. CANNED |




Infant Cereal

Beechnut, Gerber &
Nature's Goodness

8 oz. box

(May substitute one
16 oz. box for two 8
oz.)

May mix styles, box
sizes & brands

For Infants 6 months old and older		
Infant Cereal		
Beech-Nut	Gerber	Nature's Goodness
		
<ul style="list-style-type: none">▪ 8 ounce size container		
<p><u>Not allowed</u></p> <ul style="list-style-type: none">× No DHA/ARA, prebiotic, or probiotic× No added formula, milk, fruit, or yogurt× No jars, cans, or single serving packets× No organic		

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Infant Cereal	Beech-Nut, Gerber, and Nature's Goodness only Not allowed: <ul style="list-style-type: none">• DHA/ARA, prebiotic, probiotic• Added formula, fruit, yogurt• Organic• Jars, cans, or single serving packets	6	8 ounce container	N/A

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

3	8 OZ	INFANT CEREAL - WIC APPROVED BRANDS ONLY
22	4 OZ	INFANT FOOD VEGETABLES & FRUITS 4 OZ. JARS ONLY
11	2.5 OZ	INFANT FOOD MEATS 2.5 OZ. JARS

Baby Fruit / Vegetables / Meats

Beech-Nut, Gerber and Nature's Goodness

Fruits & Vegetables







4 ounce jars only

May mix fruits & vegetables

Meats

2.5 oz glass jars

May mix types of meats

Baby Fruits and Vegetables		
Beech-Nut	Gerber	Nature's Goodness
		
<ul style="list-style-type: none">▪ 4 ounce jars only for fruits and vegetables		
<p><u>Not allowed</u></p> <ul style="list-style-type: none">× No DHA/ARA, prebiotic, or probiotic× No "dinners," desserts, yogurts, soups, stews, or pastas× No added sugars, cereal or starches (like whole wheat flour, oat flour)× No organic		
<p>For Exclusively Breastfed Infants 6 months old and older</p>		
Baby Meats		
Beech-Nut	Gerber	Nature's Goodness
		
<ul style="list-style-type: none">▪ 2.5 ounce jar only for meat▪ May contain broth or gravy		
<p><u>Not allowed</u></p> <ul style="list-style-type: none">× No DHA/ARA× No "dinners," soups or stews× No added rice, noodles, or other pastas× No organic		

Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Baby Fruits & Vegetables	Beech-Nut, Gerber, and Nature's Goodness only			
	Fruits and Vegetables	128 jars and 128 jars	4 ounce jars 4 ounce jars	2 2
	Not allowed: <ul style="list-style-type: none"> • DHA/ARA • Organic • "Dinners," desserts, yogurts, soups, stews, or pastas • Added sugars, cereal or starches (like whole wheat flour, oat flour) 			
Baby Meats	Beech-Nut, Gerber, and Nature's Goodness only			
	Meat May contain broth or gravy	62 jars	2.5 ounce jars	2
	Not allowed <ul style="list-style-type: none"> • No "dinners," soups or stews • No added rice, noodles, or other pastas • DHA/ARA • Organic 			

FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):

3	8 OZ	INFANT CEREAL - WIC APPROVED BRANDS ONLY
22	4 OZ	INFANT FOOD VEGETABLES & FRUITS 4 OZ. JARS ONLY
11	2.5 OZ	INFANT FOOD MEATS 2.5 OZ. JARS

Infant Formula

Checks will list:

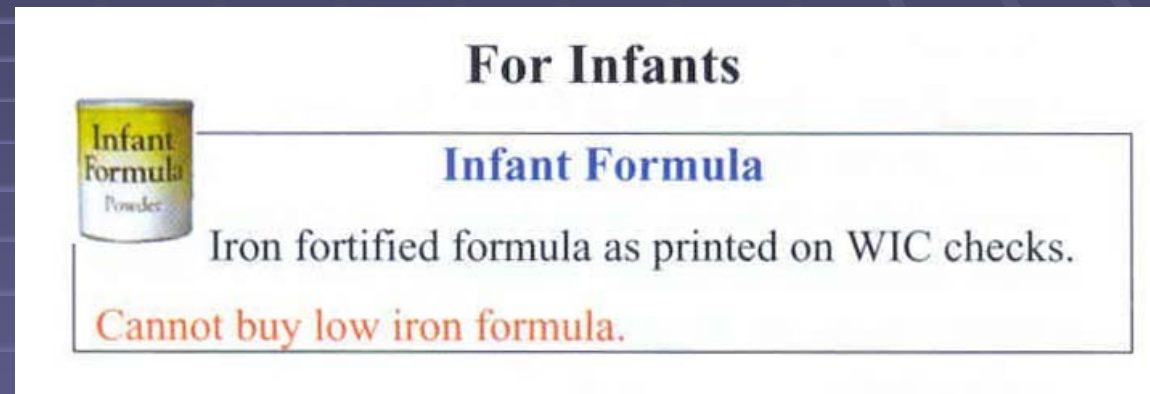
- Name of formula
- Style

concentrate

powdered

Ready To Use (RTU)

- Can size
- Quantity



Minimum Stocking Requirements

WIC FOOD	BRAND/TYPE	Minimum Quantity	Size	# of Varieties
Infant Formula	Similac Advance EarlyShield Powder UPC 070074-56958-2	27	12.9 ounce cans	N/A
	Concentrate UPC 070074-56974-1	31	13 ounce cans	
	Isomil Advance Powder UPC 070074-55964-3	9	12.9 ounce cans	N/A
	Concentrate UPC 070074-56976-5	N/A ¹	13 ounce cans	

¹ Vendors are not required to stock the formula. However, Vendors must procure the formula within seven (7) calendar days of request from the WIC

WIC Shelf Marker



- Used to assist WIC customers in identifying WIC foods.
- Should be posted on shelves where WIC allowed foods are displayed.
- **Not Allowed: Shelf markers which endorse a specific food or brand.**

WIC Shelf Marker

- All Milks
- LEB
- Gallon, half gallon, quart,
- Fresh, evaporated, and powdered.



Should your store run out of the least expensive brand as reported on the price survey the next higher cost brand is allowed.

Minimum Stocking Requirements

EFFECTIVE OCTOBER 1, 2009

WIC MINIMUM STOCKING REQUIREMENTS

These stock requirements must be maintained at all times. Failure to maintain the required minimum inventory of WIC Allowed foods may result in the disqualification of the vendor from the WIC Program.

Describes the minimum, variety and quantity of WIC foods that the vendor must stock at all times.

Contact WIC if you are temporarily out of a product.

Failure to maintain the required minimum inventory of WIC Allowed foods may result in the termination of the vendor's agreement, and disqualification from the WIC Program

WIC Vendor Price/Stock Report

Instructions



WIC VENDOR PRICE/STOCK REPORT INSTRUCTIONS

Complete all sections of pages 1 through 5, documenting the price and quantity of each WIC food item currently on the shelf or in inventory housed at your store location. If a space is left blank, the WIC Program will assume that your store does not have that particular food item in stock. Do not estimate or project prices or stock. The WIC Vendor Price/Stock Report must reflect actual shelf prices and actual stock on hand at the time of completion.

1. Carefully review the WIC Minimum Inventory Requirements on pages 6 through 8.
2. On pages 2, 3 4 and 5, indicate if your store meets the minimum inventory requirement for each food item by checking "Yes" or "No". If you answer "No", indicate the amount of the food item in stock by filling in the corresponding blank.
3. List the shelf price for each food item in stock. Fill in the price for the exact size listed.
4. When more than one brand is available, include your lowest (including sale price) and highest price.
5. Fax pages 1 through 5 of the WIC Vendor Price/Stock Report to (808) 586-8189, or mail to: WIC Vendor Management, 235 South Beretania Street, Suite 701, Honolulu, HI 96813.

CERTIFICATION

I certify that:

1. I am authorized to act on behalf of the Vendor;
2. I have verified that the quantities of WIC inventory listed on pages 2, 3, 4 and 5 are either on the shelves or in inventory housed at the Vendor's store location;
3. I have verified that the prices listed on pages 2, 3, 4 and 5 are true and correct.

Signature: _____ Date: _____

Name (Print): _____ Phone: _____

Title: _____ Fax: _____

Store Name/Number: _____

Store Address: _____

WIC FORM V-003 (03/03)

Certification



(contact information &
signature)

WIC TACKS

Informational bulletins
faxed or mailed to
vendors.

FAX TRANSMISSION



FROM: Vendor Management Unit
WIC Services Branch
State of Hawaii
Department of Health
235 S. Beretania Street, Suite 701
Honolulu, Hawaii 96813-2419

Phone: (808) 586-4776
FAX: (808) 586-8189
Neighbor Islands 1-888-820-6425

TO: HAWAII WIC STORES, DISTRIBUTORS, & MANUFACTURERS

DATE: July 2, 2009

TOTAL PAGES INCLUDING COVER: **10**

ATT: **Store Buyers and Store Managers**

The following 9 pages are the **MINIMUM STOCKING REQUIREMENTS** that begin on October 1, 2009.

The new WIC foods, which you have been hearing about and will be receiving training on, are included in the *new* **MINIMUM STOCKING REQUIREMENTS**. ALL Stores need to stock the listed items in the listed quantities beginning October 1 in order to both serve the WIC participants and to maximize the items you sell to WIC.

The new foods are a significant enhancement to the WIC program and have been met with positive excitement by WIC participants. We appreciate the WIC stores, distributors, and manufacturers for making this major change happen as scheduled on October 1st.

If you have questions regarding the items or the required stocking quantity, please contact me for further information. A copy of the new **Food List** brochure is available on-line at: http://hawaii.gov/health/family-child-health/wic/vendor/Food%20Packages/Food%20Packages/Proposed_DRAFT_WIC_Food_List
The distribution of copies of the new **Food List** will be coordinated with the upcoming training.


Tim Freeman, Vendor Management Unit
Phone: (808) 586-8392 Fax: (808) 586-8189
tim.freeman@doh.hawaii.gov

CONFIDENTIALITY NOTICE: This faxed message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender and destroy all copies of the original message.

Identification Folders

The WIC (Pink) Identification Folder

1. Family I.D. Number
2. Participant Name(s)
3. Authorized Representative(s) Signature(s)
4. Authorized Representative(s) Printed Name(s)
5. "INVALID WITHOUT SIGNATURE(S)"
6. Local Agency Address and Telephone Number


State of Hawaii
Special Supplemental Nutrition Program for
Women, Infants and Children (WIC)
WIC IDENTIFICATION FOLDER

Family ID Number: _____

Do Not Shop Without This Folder

Participant Name	Client ID Number
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____


Authorized Representative Signature(s) & Printed Name(s)

1. _____
Printed Name: _____

2. _____
Printed Name: _____

INVALID WITHOUT SIGNATURE(S)

Local Agency Address & Telephone Number: _____



WIC Form 920 (Revised 07/2001)

WIC Identification

- Note: Vendor is **NOT** allowed to ask a client for personal information (phone number, address, etc.).
- Vendor is **NOT** allowed to ask for other forms of identification.
- Folder must be signed prior to making WIC purchase.
- Directions for using WIC checks is located on the ID folder.

Checks Standard Redemption Procedures

The WIC Check

HAWAII WIC PROGRAM 235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)					3	
NAME OF CLIENT				FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER
1 WIC, CHECKS 6				2 10/01/2009	10/31/2009	4 235000011
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.	VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE
5 987654331	100	05	SS 7986	002424SS		11
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED)						
1	16 OZ	7 TOFU - WIC APPROVED BRANDS ONLY				
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY				
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK - WIC APPROVED BRANDS ONLY				
1	QT	MILK (QUART) - SKIM / 1% / 2%				
1	1/2 GAL	MILK, 1/2 GALLON - SKIM / 1% / 2%				
2	GALLON	MILK - SKIM / 1% / 2%				
1	36 OZ	WIC APPROVED CEREAL				
					NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP	
					X	
					10 WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE	
						8
						9
						AMOUNT
						\$


1. Name of Client
2. First Day to Use
3. Last Day to Use
4. Check Number
5. Client I.D. Number
6. Agency
7. Foods to be Purchased
8. Date of Use
9. Amount (\$)
10. Signature of WIC Customer
11. Vendor Stamp

The WIC Check – Cash Value Voucher C V V


HAWAII WIC PROGRAM 235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)					3	
1 NAME OF CLIENT 6			2		FIRST DAY TO USE	CHECK NUMBER
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	4	
5 FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED)					11	
1 CVV \$6**\$6**\$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** SIX DOLLARS (\$6) CASH VALUE VOUCHER REDEEM FOR UP TO \$6 WORTH OF FRESH / FROZEN VEGETABLES / FRUIT NO CASH BACK \$6**\$6**\$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** XXX XXXXX XXXXXXX XXX					7	
PAY TO THE ORDER OF WIC VENDOR NO.					8	
VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE					9	
					DATE OF USE	
					AMOUNT	
					\$	
NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP					10	
X					WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE	

C V V check fields remain the same as WIC Checks.
C V V is used to purchase fruits and Vegetables, fresh and or frozen.


WIC Check Redemption Procedures

 HAWAII WIC PROGRAM <small>235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)</small>					FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER
NAME OF CLIENT					10/01/2009	10/31/2009	235000011
WIC, CHECKS							
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.	VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE	
987654331	100	05	SS 7986	002424SS		DATE OF USE	AMOUNT
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):						\$	
1	16 OZ	TOFU - WIC APPROVED BRANDS ONLY					
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY					
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK - WIC APPROVED BRANDS ONLY					
1	QT	MILK (QUART) - SKIM / 1% / 2%					
1	1/2 GAL	MILK, 1/2 GALLON - SKIM / 1% / 2%					
2	GALLON	MILK - SKIM / 1% / 2%					
1	36 OZ	WIC APPROVED CEREAL					
					NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP		
					X		
					WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE		

- Look for any altered fields on the check
- Verify the checks or C V V dates are valid to use
Check the “First Day to Use” and the “Last Day to Use”.

 HAWAII WIC PROGRAM 235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)					FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER
NAME OF CLIENT					10/01/2009	10/31/2009	235000011
WIC, KEIKI							
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.	VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE	
102009031	777	01	SS 779977	002424SS		DATE OF USE	
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):						10/02/09	
1	16 OZ	TOFU – WIC APPROVED BRANDS ONLY				AMOUNT	
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY					
1	CHOICE	4 HALF GALLONS OR 8 QUARTS SOYMILK - WIC APPROVED BRANDS ONLY				\$	24.20
1	QT	MILK (QUART) – SKIM / 1% / 2%					
1	1/2 GAL	MILK, 1/2 GALLON – SKIM / 1% / 2%					
2	GALLON	MILK – SKIM / 1% / 2%					
1	36 OZ	WIC APPROVED CEREAL					
					NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP		
					X		
					WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE		

- Verify selected food items
- Ring up the sale.
- Enter the “DATE OF USE” in permanent ink.
- Enter the “AMOUNT” in permanent ink

 HAWAII WIC PROGRAM 235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)						
NAME OF CLIENT				FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER
WIC, KEIKI				10/01/2009	10/31/2009	70089901
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.	
102009031	777	01	SS 779977	002424SS		
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):						VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE
1 18 OZ PEANUT BUTTER 1 DOZ EGGS, MEDIUM OR LARGE WHITE ONLY 1 CHOICE 2 CANS (7.5OZ) PINK SALMON OR 4 CANS (3.75 OZ) SARDINES OR 1 CAN (15OZ) MACKEREL 1 LB CHEESE – 1 LB BLOCK OR BALL ONLY 2 ITEMS JUICE – WIC APPROVED (10 OZ TO 16 OZ)						DATE OF USE
						10/02/09
						AMOUNT
						\$ 24.20
NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP						
<input checked="" type="checkbox"/> <i>Parent Wic</i>						
WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE						

- Witness the signature (signature must be in ink) and compare against signature #1 or #2 on ID folder.
- Ask the WIC customer to sign the register receipt.
- Retain the receipt with customer's signature for your records.

Correcting the “Date” and “Amount”

HAWAII WIC PROGRAM					FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER
WIC, KEIKI					10/01/2009	10/31/2009	70089901
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.		
102009031	777	01	SS 779977	002424SS	<small>VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE</small> DATE OF USE 09/25/2009 10/01/09 <i>WIC</i>		
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):					AMOUNT \$ 24.20		
1	18 OZ	PEANUT BUTTER			NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP X <i>Parent Wic</i> WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE		
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY					
2	GALLON	MILK – SKIM / 1% / 2%					
2	ITEMS	JUICE – WIC APPROVED (10 OZ TO 16 OZ)					
1	16 OZ	100% WHOLE WHEAT BREAD (16 OZ) -OR- CORN TORTILLAS (UP TO 16 OZ) -OR- BROWN RICE (16 OZ)					

1. Draw a single straight line (in ink) through the incorrect date or amount;
2. Enter the correct date or amount clearly and legibly (in ink) in the space next to or above the corrected information
3. Initial next to each correction.

DO NOT write over the incorrect date or amount;

DO NOT scratch out the error so that it cannot be read;

DO NOT use correction fluid or tape (white-out) to cover over the error.

WIC Check Deposit

HAWAII WIC PROGRAM					FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER	
 235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)					10/01/2009	10/31/2009	70089901	
NAME OF CLIENT								
WIC, KEIKI								
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.		VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE	
102009031	777	01	SS 779977	002424SS	900		DATE OF USE	
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):							09/25/2009 10/01/09 <i>WIC</i>	
1	18 OZ	PEANUT BUTTER					AMOUNT	
1	DOZ	EGGS, MEDIUM OR LARGE WHITE ONLY						
2	GALLON	MILK - SKIM / 1% / 2%					\$	24.20
2	ITEMS	JUICE - WIC APPROVED (10 OZ TO 16 OZ)						
1	16 OZ	100% WHOLE WHEAT BREAD (16 OZ)						
		-OR- CORN TORTILLAS (UP TO 16 OZ)						
		-OR- BROWN RICE (16 OZ)						
					NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP			
					<input checked="" type="checkbox"/> <i>Parent Wic</i>			
					WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE			


- Validate the WIC check with the Hawaii WIC Vendor number assigned to your store
- Deposit the WIC check within sixty (60) days of the "FIRST DAY TO USE"

Cash Value Vouchers

C V V

Cash Value Voucher

“C V V Check”

 HAWAII WIC PROGRAM 235 S. Beretania Street, Suite 701, Honolulu, HI 96813 586-8175 (Oahu), 1-888-820-6425 (Toll Free for Neighbor Islands)					FIRST DAY TO USE	LAST DAY TO USE	CHECK NUMBER	
NAME OF CLIENT					10/01/2009	10/31/2009	235000011	
WIC, KEIKI								
CLIENT I.D.	AGENCY	CLINIC	FOOD PATTERN	FI TYPE	PAY TO THE ORDER OF WIC VENDOR NO.	VENDOR MUST DEPOSIT WITHIN SIXTY (60) DAYS OF FIRST DAY TO USE		
600700899	700	01	SS002424	002456SS		DATE OF USE	AMOUNT	
FOR PURCHASE OF APPROVED WIC FOODS ONLY (NO SUBSTITUTIONS ALLOWED):								
1	CVV	\$6**\$6**\$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** SIX DOLLARS (\$6) CASH VALUE VOUCHER REDEEM FOR UP TO \$6 WORTH OF FRESH / FROZEN VEGETABLES / FRUIT NO CASH BACK \$6**\$6**\$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6** \$6**						
XXX	XXXXXX	XXXXXXX	XX			NOT VALID WITHOUT WIC VENDOR AUTHORIZATION STAMP		
					X	WIC CUSTOMER SIGNATURE AT TIME OF PURCHASE		

Cash Value Vouchers

C V V

- The same procedures would be followed as processing a WIC check
 - Verify check is used within valid dates
 - Enter the date of use and amount of transaction in permanent ink before having authorized purchaser sign the C V V
 - Witness the signature and compare against ID folder

C V V Transaction

- Participants select fresh and/or frozen produce.
- Cashier weighs fresh produce and charge according to cost per pound.
- Cost for frozen produce pre-set
- Participant have three (3) options
 - Stay under the maximum value of the C V V
 - Purchase exact amount of the C V V
 - Purchase over the maximum amount of the C V V
- Total entered on the CVV cannot exceed the maximum value – check will be rejected as “Exceeds Maximum Value”

Under The Maximum Value Of The C V V

- Cashier will enter the cost of the produce purchased using a pen with permanent ink
- Cost will be less than the maximum value of the C V V
- Have the authorized purchaser sign the CVV after the date and amount are filled in
- Have the authorized purchaser sign the receipt and retain for your records.
- Entering vendor number and deposit check.
- Participant does not receive the balance in cash or credit.

Purchase Equals the Exact Amount Of The C V V

- Fresh and/or frozen produce are selected and total cost is calculated to equal CVV value.
- WIC customer may request removing an item from selection to reduce cost to equal CVV maximum value
- Remember total entered on the CVV cannot exceed the maximum value the or it will be rejected for payment
- Follow the standard redemption process and deposit procedures.

Purchase Over The Maximum Amount Of The C V V

- Cashier processes produce sale
- Total cost exceeds maximum value of the CVV
- Participant has three (3) options
 - Pay the difference with Food Stamp – No tax charged
 - Pay the difference with cash – charge tax
 - Pay by credit card / check – charge tax
- Process the CVV using standard procedures
- Remember the total cannot exceed the maximum value of the C V V – check will be rejected for payment.

Coupons, Discounts, and Specials

- **Cents off coupons**
- **Free additional ounces**
- **Buy one get one free**
- **Store membership discount cards**

Rejected Checks Appeal For Payment

Rejected Checks

When a check is rejected a reject/return reason will be stamped on the face of the check. A table of the different reject/return reasons can be found in Section 8 of the Vendor Manual.

REJECT/ RETURN STAMP

REIMBURSEMENT CRITERIA

MISSING VENDOR STAMP
Stamp and redeposit (60 day)

Payment will be made

MISSING SIGNATURE
Deposited check
Void - Do Not Redeposit

Payment will NOT be made

USED BEFORE VALID DATES
Void - Do Not Redeposit

Payment will NOT be made

ILLEGIBLE/MISSING AMOUNT
Void - Do Not Redeposit

Payment may be made

Second Level Review of Rejected Checks Appealed Checks

Vendors may request a second level review of checks rejected by the bank and return non-payment

Requests must be on letterhead & include:

- Check number(s)
- Dollar amount(s)
- Reject reason(s)

Enclose with your request:

- Rejected check(s) or Check 21 copy
- Copies of register receipts

Vendor are reimbursed through ACH

(accounts are credited, reports sent by WIC's contracted Bank and WIC office)

ACH REIMBURSEMENT STATEMENT REPORT

ACH REIMBURSEMENT STATEMENT REPORT

SECURITY STATE BANK OF HOWARD LAKE
 INSTITUTION NR. 3 STATE:
 ACCOUNT: 12345678

HI CLOSEOUT - VENDOR ACH REIMBURSEMENT STATEMENT AS REPORT DATE
 OF REPORT DATE W.I.C. ITEMS RUN DATE TIME
 PREPARED

6/26/09 PAG
 6/29/09 WICRPT28
 15:12:45:50

CHECK NUMBER	CORP VENDOR CODE NUMBER	REQUEST AMOUNT	ACH PAYMENT	ORIGINAL REJECT REASON	REASON FOR PAYMENT DECISION
52677188	151 777	15.15	15.15		OTHER - PAID IN FULL

VENDOR RECAP

ALL HAWAII STORE
 235 SOUTH BERETANIA STREET
 HONOLULU, HI 96813

TRANSACTION RECAP

PAID IN FULL: 1
 PARTIAL PAYMENT:
 NON-PAYMENT:
 TOTAL CHECKS: 1

ACH DEPOSIT RECAP

15.15 BANK: WIC BANK OF HAWAII
 0 R/T: 12345678910
 0 ACCOUNT: 12345678
 15.15 ACH CREDIT 15.15 EFFECTIVE C

ANY QUESTIONS REGARDING THIS STATEMENT SHOULD BE DIRECTED TO THE HI WIC PROGRAM AT (808) 586-4776. NEIGHBOR ISLAND 1-888-820-6425

Please Note: Your ACH payment should already be received by your bank. If not, please verify the bank information above, and notify the State Agency if any changes need to be made. The ACH payment will be reissued upon receipt of updated bank information.

Penalty Points
&
Sanctions

Penalty Points

The WIC Program shall assess penalty points based on the following values:

- A. Category I Violations = 1 points per violation
- B. Category II Violations = 5 points per violation
- C. Category III Violations = 15 points per violation
- D. Category IV Violations = 150 points per violation

The WIC Program shall assign notices, warnings, and mandatory training on the following penalty point schedule:

- A. 1 pt = Written Notice of Sanction
- B. 15 pts = Written Warning of Mandatory Training
- C. 30 pts = Mandatory Training
- D. 40 pts = Written Warning of Suspension

Penalty Points (cont.)

The WIC Program shall assign suspensions on the following penalty point schedule:

- A. 45 pts = 30 day Suspension
- B. 60 pts = 90 day Suspension
- C. 75 pts = 180 day Suspension
- D. 90 pts = 270 day Suspension

The WIC Program shall assign disqualifications on the following penalty point schedule:

150 pts = Disqualification for one (1) calendar year

Category I Violations

(One (1) sanction point assessed per infraction):

- A. Failure to visibly post the WIC Vendor Sign;
- B. Accepting pre-signed, altered, or lost or stolen checks;
- C. Failure to check a WIC I.D. Folder at time of purchase;
- D. Obtaining a customer's signature before entering the date and amount;
- E. Failure to use permanent ink when filling in the date and amount;

Category I Violations (cont.)

(One (1) sanction point assessed per infraction):

- F. Failure to clearly display prices or clearly mark prices for all WIC Allowed foods on the shelf , product, or nearby area.
- G. Failure to remove or allow the purchase of expired foods;
- H. Failure to allow a Vendor Site Review or to provide WIC food instruments for review;
- I. Failure to provide requested inventory records.

Category II Violations

(Five (5) sanction points assessed per infraction):

- A. Failure to maintain minimum variety and quantity of WIC foods;
- B. Failure to submit a Price/Stock Report;
- C. Failure to remit payment for refunds requested by WIC;
- D. Require additional purchases to redeem WIC checks;
- E. Require the purchase of all items listed on the WIC check, or prevent the purchase of all items listed on the WIC check;

Category II Violations (cont.)

(Five (5) sanction points assessed per infraction):

- F. Require the purchase of specific brands;
- G. Collecting tax on WIC items;
- H. Treat a WIC customer discourteously;
- I. Failure to attend mandatory training;
- J. Failure to ensure WIC Program compliance;
- K. Failure to inform and train cashier and other employees on WIC Program requirements.

Category III Violations

(Fifteen (15) sanction points assessed per infraction):

- A. Seek restitution from WIC customer;
- B. Hinder or prevent authorized WIC personnel from entering the store or impeding on-site education, monitoring, or investigation.

Category IV Violations

(One hundred fifty (150) sanction points assessed per infraction):

- A. Discriminate on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital or family status.
- B. Submission of false information in connection with the vendor application.
- C. Obtaining infant formula from a source not listed on the “Hawaii WIC Authorized Infant Formula Source List.”
- D. Failure to maintain or provide purchase records for infant formula and other WIC Allowed foods.

Federally Mandated Sanctions

Sanction: One (1) year to permanent disqualification

1. Vendors convicted of trafficking or illegal sale of WIC checks;
2. Administrative finding of trafficking or illegal sale of WIC checks;
3. Selling alcoholic beverages or tobacco products in exchange for checks
4. Claiming reimbursement in excess of documented inventory;
5. Charging WIC participants more for food items than non-WIC customers or charging more than the current shelf or contract price.

Federally Mandated Sanctions

Sanction: One (1) year to permanent disqualification

6. Receiving, transacting, or redeeming WIC checks outside of authorized channels;
7. Charging for supplemental food items not received by the participant;
8. Providing credit or non-food items in exchange for WIC checks;
9. Providing unauthorized food items in exchange for WIC checks, including charging for supplemental food items provided in excess of those listed on the WIC check.

Federally Mandated Sanctions

Sanction: Three (3) year disqualification.

Violation:

- A. One (1) incidence of the sale of alcohol, alcoholic beverages or tobacco products in exchange for WIC checks;
- B. A pattern of Claim reimbursement for the sale of an amount of a specific WIC food item which exceeds the store's documented inventory of that WIC food item for a specific period of time;

cont.

Federally Mandated Sanctions

Sanction: Three (3) year disqualification.

Violation:

- C. A pattern of charging WIC customers more for WIC food than non-WIC customers or charging WIC customers more than the current shelf or contract price;
- D. A pattern of receiving, transacting and/ or redeeming WIC checks outside of authorized channels, including the use of an unauthorized vendor and/or unauthorized person;

cont.

Federally Mandated Sanctions

Sanction: Three (3) year disqualification.

Violation:

- E. A pattern of charging for WIC food not received by the WIC customer;
- F. A pattern of providing credit or non-food items, other than alcohol, alcoholic beverages, tobacco products, cash, firearms, ammunition, explosives, or controlled substances in exchange for WIC checks.

Federally Mandated Sanctions

Sanction: Six (6) year disqualification upon first offense.

Violation:

- A. One (1) incidence of buying or selling WIC checks or cash (trafficking);
- B. One (1) incidence of selling firearms, ammunitions, explosives, or controlled substances in exchange for WIC checks.

Federally Mandated Sanctions

Sanction: Permanent disqualification upon first offense.

Violation:

- A. Conviction of trafficking or illegal sale of WIC checks;
- B. Conviction of selling firearms, ammunitions, explosives, or controlled substances in exchange for WIC checks

Civil Money Penalties

- Civil money penalties shall only be used if disqualification of the Vendor would cause hardship to WIC participants.
- Civil money penalties imposed shall not exceed \$11,000 per violation and \$44,000 per investigation.
- See section 9 of your manual for more information.

Vendor Complaint Form

- Date & Time of incident
- Customer's Name
- Check numbers
- Indicate problems by checking boxes
- Describe details in "Comment" section
- Attach copy of check(s)
- Attach additional comments or statements
- Fax to WIC (808) 586-8189

**Hawaii WIC Program
VENDOR COMPLAINT FORM**

On _____ at _____ am/pm
Date (Month, Day, Year) Time (Hour : Minutes)

Customer's Name and/or Description _____

Using WIC Check(s) _____ tried to:
(Black) Check Number(s)

Purchase unauthorized food with a WIC check (please describe food below)
 Purchase more food than allowed (please describe food below)
 Use a WIC check before/after valid date (circle "before" or "after")
 Purchase WIC foods with an invalid WIC Identification Folder (missing or mis-matched signatures)
 Return WIC food for cash, credit, or non-WIC items
 Purchase non-food items with WIC check (please describe items below)
 Exchange WIC check for cash, credit (includes rain checks), or non-WIC items
 Use an altered WIC check (please describe alteration below)
 Use a pre-signed WIC check
 Other (please describe below)
 Customer was abusive toward store personnel (please describe below)

Vendor comments/statement:

Did transaction go through? Yes No After corrections
Copy of WIC check attached? Yes No
Additional comments attached? Yes No

Vendor Name and WIC Vendor # _____ Address/City _____
Vendor Employee Name _____ Phone Number _____

Fax to: (808) 586-8189
Mail to: WIC Vendor Management, 225 S. Beretania Street, Suite 701, Honolulu, HI 96813
Phone: (808) 586-4776 or 1-888-520-6425

WIC FORM V-001 (09/05) WIC Distribution - License #1001
C/1001-001

Vendor Complaint Form (top half)

Hawaii WIC Program VENDOR COMPLAINT FORM

On _____ at _____ : _____ am/pm
Date (Month, Day, Year) Time (Hour : Minutes)

Customer's Name and/or Description _____

Using WIC Check(s) _____ tried to:
(Black) Check Number(s)

- Purchase unauthorized food with a WIC check *(please describe food below)*
- Purchase more food than allowed *(please describe food below)*
- Use a WIC check before/after valid date *(circle "before" or "after")*
- Purchase WIC foods with an invalid WIC Identification Folder *(missing or mis-matched signatures)*
- Return WIC food for cash, credit, or non-WIC items
- Purchase non-food items with WIC check *(please describe items below)*
- Exchange WIC check for cash, credit (includes rain checks), or non-WIC items
- Use an altered WIC check *(please describe alteration below)*
- Use a pre-signed WIC check
- Other *(please describe below)*
- Customer was abusive toward store personnel *(please describe below)*

Store has prohibited customer from store; will be refused if returns to store 3/2005

Vendor Complaint Form (bottom half)

Vendor comments/statement: _____

- Did transaction go through? Yes No After corrections
Copy of WIC check attached? Yes No
Additional comments attached? Yes No

Vendor Name and WIC Vendor # Address/City

Vendor Employee Name Phone Number

Fax to: (808) 586-8189
Mail to: WIC Vendor Management, 235 S. Beretania Street, Suite 701, Honolulu, HI 96813
Phone: (808) 586-4776 or 1-888-820-6425

Problem Solving

Section 7 of the Vendor Manual contains answers and suggested solutions to commonly asked questions.

***Please remember to sign and turn in your
Acknowledgment of Training form***

Toll Free 1-888-820-6425

586-4776 or 586-4756



Mahalo

for attending WIC's Vendor Training

http://hawaii.gov/health/family-child-health/wic/index_html