

South Carolina

# VENDOR MANUAL



Women, Infants & Children  
SOUTH CAROLINA

South Carolina Department of Health and Environmental Control



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## About the Program

WIC is the Special Supplemental Nutrition Program for Women, Infants and Children. In South Carolina, the program is administered through the S.C. Department of Health and Environmental Control. WIC provides nutritious foods, nutrition counseling, and referrals to health care providers and social services agencies. WIC serves low-income pregnant, postpartum and breastfeeding women, infants and children up to age 5 who are at nutritional risk.

Application for WIC is made at local health departments. Applicants must provide proof of residency (they must live within the state), and documentation of their household income. Applicants' income must fall at or below 185 percent of the U.S. Poverty Guidelines. In addition, applicants must have a nutritional risk factor defined as abnormal weight gain during pregnancy, history of high-risk pregnancies, growth problems, inadequate diet, iron-deficiency anemia or other similar problems.

Eligible applicants are certified for a defined period of time; a) infants up to age 1, b) children for a period of one year per certification, c) pregnant women for the duration of their pregnancy and up to six weeks after date of delivery, d) postpartum women until six (6) months after delivery and e) breastfeeding women as long as they are breastfeeding, not to exceed one year after birth.

WIC participants receive checks to purchase specific foods each month that are designed to supplement their diets with specific nutrients. Participants obtain the foods by use of WIC checks in grocery stores that are authorized as WIC Vendors.

The WIC Program has been found to be very effective. The results of numerous federal, state and local studies conducted both by government and citizens groups point to the positive impact of the WIC Program. Specific findings include an increase in early (first trimester) prenatal care, increased length of gestation, decreased rate of pre-term delivery, significant increases in birth weight and reduced late fetal deaths. WIC participation was also associated with improved dietary intakes of protein and other nutrients that often are inadequate in the diets of low-income pregnant women and children.

Vendors play an important role in the WIC Program and are critical to its success. If WIC check redemption transactions occur according to procedures, participants are best able to realize the full benefit from the program.

## Competitive Pricing and Peer Groups

Federal regulations require state WIC Programs to establish competitive pricing and price limitations during the process of vendor authorization. Competitive pricing considers the prices a vendor charges for supplemental foods as compared to the prices charged by other authorized vendors within the same peer group and geographical area. Price limitations ensure that a vendor applicant has competitive prices and maintains competitive prices as an authorized vendor. Within six (6) months of participation on the program, the vendor must be reassessed to ensure that they have not reached above-50-percent status. After this assessment is completed, if the vendor WIC redemptions exceed their SNAP, additional legal or certified tax documents will be required. The competitive pricing structure for the South Carolina WIC Program establishes five peer groups within the four geographic regions of the state. Each vendor is assigned to one of the established peer groups and is informed of their peer group assignment and geographical region at the time of their authorization. The following table lists the definitions of each vendor peer group.

PEER GROUPS	STORE TYPE	DEFINITION
1	Chain	One of a group of stores owned by a single entity (individual or corporation)
2	Franchise	Owned by an individual but receives stock as part of a group of stores
3	Commissary	Government owned facilities
4	Independent/Convenience	Stores of varying sizes, which are owned by an individual (or small company) and do not have the buying power of a group, <b>stocking primarily “convenience” items.</b>
5	Pharmacy	<p>Primarily sells products such as medicine, health care items, etc. <b>Pharmacies must make available, upon request, exempt and/or infant formulas (Elecare, Neocate, Peptamen, Phenix, etc.)</b></p> <p>Pharmacies that are located within a retail establishment, such as a chain store, are not included in this category. Such pharmacies shall be authorized as part of the chain store and will not be authorized independently.</p>

## Definitions for WIC Vendors

**Above-50-percent vendors:** vendors that derive more than 50 percent of their annual food sales revenue from WIC food checks

**Authorized supplemental foods:** the supplemental foods authorized by the state or local agency to be obtained with the food check

**Cash Value Voucher (CVV):** a fixed-dollar-amount check used to buy eligible fruits and vegetables

**Home food delivery system:** systems in which authorized supplemental foods are delivered to the participant's home (*South Carolina does not allow*)

**Food sales:** sales of all Supplemental Nutrition Assistance Program (SNAP) eligible foods intended for home preparation and consumption

**Incentives:** anything made available as a complimentary gift that might be consumed or taken without charge allowable only to WIC participants

**Participants:** pregnant women, breastfeeding women, postpartum women, infants and children who are receiving food checks under the program

**Peer Group:** a group of WIC vendors who have common characteristics, including, but not limited to, type of business, type of ownership, total sales volume, pricing of approved foods, and located in the same geographic region (*See vendor agreement*)

**Proxy:** any person designated by a participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food checks on behalf of a participant

**Store Types:** Each vendor must comply with at least one of the established definitions for store types in order to be assigned to a peer group (*See vendor peer groups*)

**Supplemental Nutrition Assistance Program (SNAP):** refers to the Food Stamp Program

**Vendor:** a grocery store or pharmacy authorized to accept WIC checks and CVVs and provide the approved foods allowed for that store type

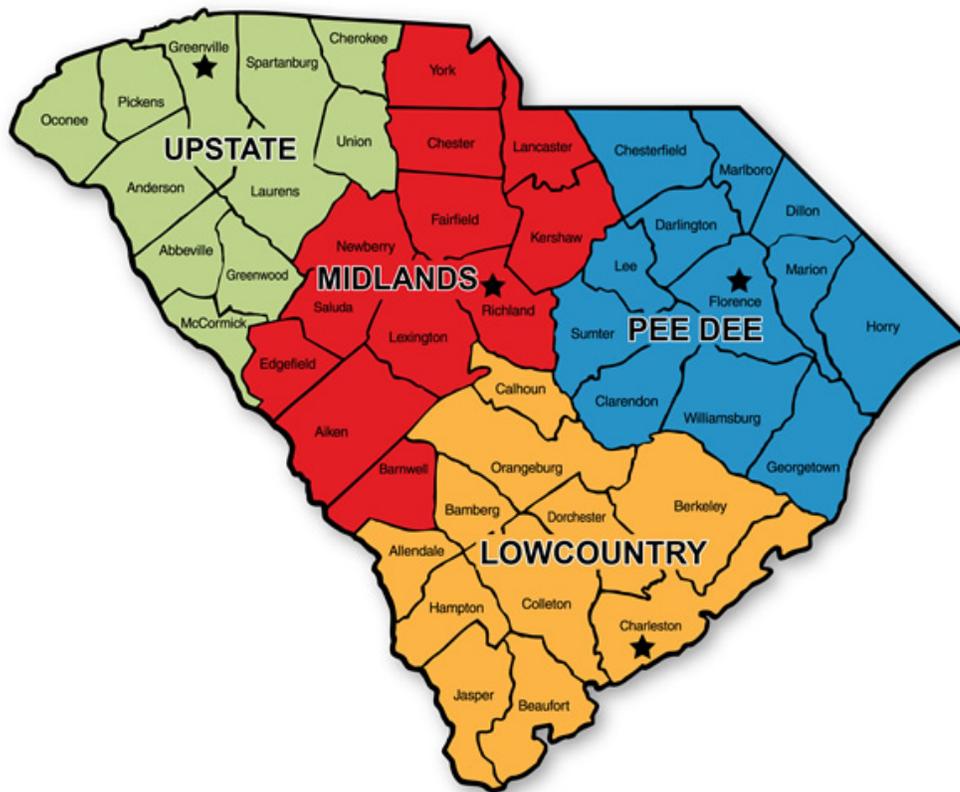
**Vendor Overcharge:** intentionally or unintentionally charging the state agency more for authorized WIC items than is permitted under the vendor agreement

**WIC Check:** a negotiable check used by a program to purchase foods

**WIC Vendor Agreement:** standard written agreement specifying the terms and conditions to be an authorized vendor

**DHEC Regions**

As a cost containment measure, vendor prices will be compared with vendors in the same peer group and geographical area. Below is a map of DHEC regions.



## SOUTH CAROLINA WIC PROGRAM STOCKING REQUIREMENTS

The vendor must stock the varieties and minimum quantities of WIC approved foods as listed in the current WIC approved food list. Only approved foods within the manufacturer's product eligibility date will be counted as part of minimum stock. **Vendors cannot use another store's brand items as part of the minimum stocking requirements.** Minimum stocking requirements are listed below:

### INFANT FORMULA

<b>ITEM:</b>	<b>Gerber Good Start Gentle</b>	<b><u>12.1 oz. concentrated liquid</u></b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary	24 containers
	(4) Independent	24 containers
<b>ITEM:</b>	<b>Gerber Good Start Gentle Supplementing</b>	<b><u>12.4 oz. powder</u></b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary	12 containers
	(4) Independent	6 containers
<b>ITEM:</b>	<b>Gerber Good Start Gentle</b>	<b><u>12.7 oz. powder</u></b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary	30 containers
	(4) Independent	18 containers
<b>ITEM:</b>	<b>Gerber Good Start Soy</b>	<b><u>12.9 oz. powder</u></b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary	12 containers
	(4) Independent	6 containers
<b>ITEM:</b>	<b>Gerber Good Start Soothe</b>	<b><u>12.4 oz. powder</u></b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary	12 containers
	(4) Independent	6 containers
<b>INFANT CEREAL</b> ( <i>Not allowed – added fruit or formula, organic, canister cereals with DHA</i> )		
<b>ITEM:</b>	<b>Beech Nut, Gerber, Comforts For Baby, or Tippy Toes (Single or mixed grain, no fruit added)</b>	<b><u>8 oz. box</u></b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary	3 varieties, 6 boxes of each
	(4) Independent	2 varieties, 6 boxes of each

<b>INFANT FRUITS &amp; VEGETABLES (single or mixed ingredients)</b>		
<b>ITEM:</b>	<b>Beech Nut or Gerber</b>	<b>4 oz. jar</b>
	<b>STORE TYPE</b>	<b>MINIMUM QUANTITY</b>
	(1) Chain, (2) Franchise, (3) Commissary	2 varieties of fruits 2 varieties of vegetables Total 96 containers
	(4) Independent	1 variety of fruit 1 variety of vegetable Total 32 containers
<b>INFANT MEATS (single ingredient)</b>		
<b>ITEM:</b>	<b>Beech Nut or Gerber</b>	<b>2.5 oz. jar</b>
	<b>STORE TYPE</b>	<b>MINIMUM QUANTITY</b>
	(1) Chain, (2) Franchise, (3) Commissary	2 varieties, 31 containers
	(4) Independent	1 variety, 16 containers
<b>MILK (lowest cost)</b>		
<b>ITEM:</b>	<b>Reduced Fat (2%) and Whole</b>	
	<b>STORE TYPE</b>	<b>MINIMUM QUANTITY</b>
	(1) Chain, (2) Franchise, (3) Commissary	2 half-gallon containers (each type) 4 gallon containers (each type)
	(4) Independent	2 half-gallon containers (each type) 2 gallon containers (each type)
<b>ITEM:</b>	<b>Low Fat (1%) and Fat Free (Skim)</b>	
	<b>STORE TYPE</b>	<b>MINIMUM QUANTITY</b>
	(1) Chain, (2) Franchise, (3) Commissary	2 half-gallon containers (each type) 10 gallon containers total with a minimum of four gallons of Skim
	(4) Independent	2 half-gallon containers (each type) 2 gallon containers (each type)
<b>CHEESE (Not allowed: deli-specialty, cheese food, product, spread or cracker cuts)</b>		
<b>ITEM:</b>	<b>Store Brand</b>	<b>1-lb (16 oz.)</b>
	<b>STORE TYPE</b>	<b>MINIMUM QUANTITY</b>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	6 1-lb (16 oz.) sizes
<b>CEREAL</b>		
	(This includes 1 variety of whole grain cereal)	<b>12 oz., 18 oz., 36 oz. sizes ONLY</b> (Unless specified size in food guide)
	<b>STORE TYPE</b>	<b>MINIMUM QUANTITY</b>
	(1) Chain, (2) Franchise, (3) Commissary	6 varieties, 4 boxes each
	(4) Independent	4 varieties, 4 boxes each
<b>JUICE</b>		
<b>ITEM:</b>	<b>100% Unsweetened</b>	<b>64 oz. containers</b>

	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	2 varieties, 6 containers each <i>(This includes 1 variety of WIC approved apple juice in 64 oz. size)</i>
<b>ITEM:</b>	<b>Frozen Juice</b>	<b>11.5 - 12 oz. containers</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	1 variety, 6 containers each
<b>EGGS (Not allowed: specialty, brown, or organic)</b>		
<b>ITEM:</b>	<b>Large White Only</b>	<b>1 dozen</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary (4) Independent	8 dozens 6 dozens
<b>PEANUT BUTTER (Not allowed: added food items, spreads, organic)</b>		
<b>ITEM:</b>	<b>Smooth or Chunky</b>	<b>16 - 18 oz. container</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	8 jars
<b>DRIED PEAS / BEANS (Not allowed: organic, sweet peas)</b>		
<b>ITEM:</b>	<b>Unflavored single variety beans or peas</b>	<b>1-lb (16 oz.)</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary (4) Independent	2 varieties, 8 packages each 1 variety, 6 packages
<b>CANNED MATURE BEANS (Not allowed: organic, canned green beans, canned sweet peas)</b>		
<b>ITEM:</b>	<b>Unflavored single variety beans or peas</b>	<b>15 – 16 oz.</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	24 cans
<b>TUNA (Not allowed: albacore-white tuna)</b>		
<b>ITEM:</b>	<b>Any brand, water- or oil-packed</b>	<b>5 oz. container</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	15 cans
<b>BREAD</b>		
<b>ITEM:</b>	<b>Whole Grain or Whole Wheat</b>	<b>1-lb (16oz.)</b>
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary (4) Independent	8 loaves 4 loaves
<b>FRUITS AND VEGETABLES</b>		
<b>ITEM:</b>	<b>Fresh or Frozen</b>	
	<i>STORE TYPE</i>	<i>MINIMUM QUANTITY</i>
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	2 varieties of fruit (4 pounds total) 2 varieties of vegetables (4 pounds total)

## Vendor Price Surveys

Price Surveys are used to determine the maximum price vendors can charge for WIC-allowed food items. The prices from the vendor survey are used to compare vendor store type and peer group from the same geographical region. WIC authorized vendors are required to complete a shelf price survey at least twice a year - in March and September - to ensure compliance with cost containment regulations. South Carolina vendors can now complete and submit their Vendor Price Survey online. <https://scps.wicbanking.com>

**IT IS VERY IMPORTANT THAT VENDORS COMPLETE THIS SURVEY AS REQUESTED.**

## How to Become a South Carolina WIC Vendor

To become an authorized vendor, applicants must meet the selection criteria established by USDA and the South Carolina WIC Program. To meet the selection criteria, a vendor applicant must:

- 1) Complete the required WIC Vendor Application, WIC Price List, Vendor Agreement, Request for Taxpayer Identification and Certification form (IRS W-9) and register as a vendor through the South Carolina State Government Procurement System Vendor Registration.
- 2) Maintain current shelf prices that do not exceed the maximum price for each food within the vendor applicant's peer group.
- 3) Pass a monitoring review to determine whether the store has the minimum inventory of supplemental foods.
- 4) Ensure that the applicant's employees receive instruction in WIC Program policies, procedures and requirements.
- 5) Maintain all inventories within valid expiration dates.
- 6) Mark the current shelf prices of all WIC supplemental foods.
- 7) Operate the store at a permanent and fixed location.
- 8) Be open for business throughout the year at least six days a week, for at least 40 hours per week, between 8 a.m. and 10 p.m.

- 9) Purchase infant formula only from state-approved suppliers.
- 10) Have no convictions or civil judgments within the last six years that indicate a lack of business integrity on the part of the current owners, officers or managers. Such activities include, but are not limited to, fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification of records, making false statements, receiving stolen property, making false claims and obstruction of justice.
- 11) Be an authorized Supplemental Nutrition Assistance Program (SNAP) vendor (Pharmacies are exempt from this requirement).
- 12) Not be employed by or have a spouse, child or parent employed by the WIC Program serving the county in which the vendor applicant conducts business. An applicant also shall not have an employee who handles, transacts, deposits or stores WIC checks who is employed by — or has a spouse, child, or parent who is employed by — the WIC Program serving the county in which the vendor applicant conducts business.
- 13) Not provide transportation for participants to and from a vendor's premises, not deliver supplemental foods to participants, or offer promotional incentives directed solely to WIC participants.
- 14) Not apply to the WIC Program if the store has been disqualified from participation in the WIC Program and the disqualification period has not expired.

## **Application Process**

An applicant must be an authorized SNAP vendor prior to applying for WIC Program vendor authorization. To be eligible to accept WIC checks, food retailers and pharmacies must be authorized by the state WIC Program.

All applicants must complete the following forms: WIC Vendor Application, WIC Price List, Vendor Agreement and an IRS W-9, Request for Taxpayer Identification and Certification form. Applicants also must register as a vendor through the South Carolina State Government Procurement System Vendor Registration.

If a vendor applicant has prices above the maximum allowable price for its assigned peer group, the WIC Vendor Management Unit notifies the vendor applicant in writing. The vendor applicant is then given an opportunity to submit a revised WIC Vendor Price List within 30 days. If any of the vendor applicant's resubmitted prices exceed the maximum allowed or the vendor does not resubmit prices within 30 days, the application is denied in writing. If at any time the applicant's application is denied, the applicant must wait 180 days from the date of the written denial to reapply.

The WIC Vendor Management Unit conducts a preapproval visit to the store to determine if the applicant's store meets WIC vendor selection requirements. A key requirement is that the store carries the minimum inventory of WIC foods. **Vendors/applicant cannot use another store's brand items as part of the minimum stocking requirements.** If a vendor applicant fails the first visit, the WIC Program staff revisits within 30 days. Vendor applicants failing the second visit cannot reapply for a period of 180 days from the date of the second preapproval visit.

All applications will remain on file for six (6) months. After that period, applicants will be required to complete a new application.

During a pre-approval visit, Vendor Management Staff:

- Meets with the store manager/owner to discuss all items listed on the Pre-approval Visit Form.
- Reviews the stock to ensure that minimum stocking requirements are met.
- Reviews invoices to ensure that formula was purchased from an approved wholesaler, distributor and/or manufacturer.
- Checks prices to see if vendor prices are consistent with the vendor price survey that was approved.
- Verifies that WIC items are not the majority of the vendor's inventory.
- Allows the vendor to ask any questions concerning the program.
- Obtains vendor's signature on the Vendor Agreement, Pre-approval Visit Form and Price List.
- Give the vendor a vendor resource packet. (Vendor Manual, Step-By-Step, We Accept WIC Poster, Please Separate Grocery, WIC Approved Labels and Materials Order Form)

A vendor applicant cannot accept WIC checks prior to authorization. **The WIC Vendor Management Unit will mail a vendor stamp with a uniquely assigned five-digit number to the vendor within two (2) weeks of being authorized.**

## The WIC Vendor Stamp

The WIC stamp shows that the store is authorized to accept WIC checks. Each WIC check accepted must be stamped clearly prior to deposit. WIC checks deposited without a vendor stamp or with an illegible vendor stamp will be rejected. **If at any time the store ceases to be authorized, the State agency requires that the stamp be returned.** The WIC Vendor Stamp issued only by the WIC Program can be used. If a new stamp is needed, please notify the WIC Vendor Management Unit.

### SAMPLE WIC VENDOR STAMP



## Guidelines for Transacting WIC Checks

The South Carolina WIC Program issues two types of negotiable WIC checks; the computer generated check and the manual check. The vendor deposits the WIC check into their local retail bank. WIC checks accepted outside the valid period (“Not Valid Before” or “Void After” dates) cannot be approved for payment. **The WIC check will be accepted by the vendor using the transaction steps described under “Accepting the WIC Check.”**

A transaction is the process by which a WIC participant presents a WIC check along with the WIC ID card to a vendor to exchange for supplemental food allowed by the WIC Program.

The key to proper WIC transactions is to ensure that all store personnel strictly follow procedures when accepting WIC checks. If proper procedures are not followed, WIC checks will be rejected.

Authorized WIC vendors must offer WIC customers the same courtesies offered to other customers. Examples include accepting discount and manufacturer’s coupons and “valued customer” cards, and not creating separate checkout lines for WIC customers.

Listed below are the types of WIC checks:

- 1) The WIC Check (with prescribed foods). (See sample checks)  
These checks have the following information printed or handwritten on them:
  - 1) The check number and stub area
  - 2) The participant’s name
  - 3) The participant’s ID number
  - 4) The prescribed food items
  - 5) The “Not Valid Before” date
  - 6) The “Void After” date
  - 7) The “Signature of Recipient” line
  - 8) The “5-digit Vendor Stamp (#)” area
  - 9) The “Location of the county and clinic code”
  - 10) Magnetic Ink Character Recognition or MICR (often pronounced micker)



## Accepting the WIC Check

The following steps must be followed when redeeming all WIC checks.

- 1) Identify the WIC order.
- 2) Ask for the **WIC ID card and WIC check(s)**. Hold the ID card until the end of transaction to compare signatures. If the participant does not have a signed ID card, do not begin the transaction.
- 3) Make sure that the date redeemed is on or after the “**Not Valid Before**” date and on or before the “**Void After**” date. Also, for a manual check, ensure that the WIC Program stamp is present. The WIC Program stamp is placed on all manually written checks when issued to the participant.
- 4) Make sure that:
  - a) The foods or formula purchased **are the foods or formula authorized** on the WIC check. (Refer to the current WIC Food Guide)
  - b) The **quantity is correct** as indicated on the WIC check.
  - c) The foods or formula are in the **correct container size** (e.g., milk must be given in gallon, half gallon and quart containers as indicated on the WIC check). A participant may choose to purchase less food than prescribed on the WIC check.
- 5) Enter the price into the register for each item as any other purchase. **Do not charge sales tax**. If the register automatically adds sales tax, deduct the sales tax before entering the total purchase amount on the WIC check.
- 6) **Write the purchase amount and the purchase date** in black ink on the stub of the WIC check. Enter the same amount on the WIC check.
- 7) **Obtain the signature** of the person presenting the WIC check and compare the signature on the WIC ID card with the signature on the WIC check. If the signatures do not match, do not complete the transaction.
- 8) Attach the register receipt to the WIC check stub and maintained for records. Receipts and stubs should be kept in the store for at least six (6) months.
- 9) Authorized pharmacies can only accept WIC checks for exempt formula and WIC medical foods.

## The Cash Value Voucher

The WIC Program provides participants with a Cash Value Voucher (CVV) to purchase fresh or frozen fruits and vegetables at authorized grocery stores or authorized local farmers' markets. Vouchers are distributed to participants along with the other WIC checks. CVVs are issued monthly in increments of \$8.00 for children, \$11.00 for pregnant or partially breastfeeding women and \$11.00 for fully breastfeeding women. For special circumstances, CVVs may be issued for \$16 or \$17. No change can be given to the participant. The cash value voucher may be in the form of a blue computer voucher or a green manual voucher. **The WIC Cash Value Voucher will be accepted by the vendor using the transaction steps described under "Accepting the Cash Value Voucher."**

### FRUITS AND VEGETABLE FACTS

• Any variety of fresh whole or cut vegetables without added sugars, fats, or oils
• All potatoes are allowed (yams, sweet potatoes, and white potatoes)
• Any variety of frozen vegetables without added sugars, fats, sauces, seasonings, or oils
• Any variety of frozen fruits without added sugars
• Any variety of fresh whole or cut fruits without added sugars
• No <u>canned</u> or <u>dried</u> fruits or vegetables
• No jars, vegetables/fruit trays, or baskets
• No prepackaged salad kits with dressing, croutons, etc.
• Organic is allowed
• No Nuts or Peanuts

2) The Cash Value Voucher (fresh or frozen fruits and vegetables). (See sample vouchers)  
These vouchers have the following information printed or handwritten on them:

- 1) The check number
- 2) The participant's name
- 3) The participant's ID number
- 4) The "Not Valid Before" date
- 5) The "Void After" date
- 6) The denomination of \$8, \$16, or \$17 (\$4 for fresh fruit & vegetables **only**)
- 7) The "Signature of Recipient" line
- 8) The "5-digit Vendor (#) Stamp" area
- 9) The "Location of the county and clinic code"
- 10) Magnetic Ink Character Recognition or MICR (often pronounced micker)

**SAMPLE BLUE COMPUTER CASH VALUE VOUCHER**

**1** 04007656  
NOT VALID BEFORE

**3** CLINIC NUMBER: 0000004002 PATIENT NUMBER: 5550662960 PT NAME: JONES, SARA

**2** 04007656  
NATIONAL BANK OF SC  
COLUMBIA, SC  
PAPER FROM SOUTHERN NATIONAL  
MARKET, GEORGIA

**4** DESCRIPTION: CASH VALUE VOUCHER - \$11.00  
NO CHANGE IS TO BE ISSUED  
001 FRESH OR FROZEN FRUITS AND/OR VEGETABLES

**6** NOT VALID BEFORE: 03/01/2016  
DATE REDEEMED: / /  
VOID AFTER: 03/31/2016

**5** PURCHASE AMOUNT: DOLLARS CENTS

**7** MAX: \$11.00  
SIGNATURE OF RECIPIENT

**8** 00000004002

**9** 040076568# 061119684# 2502193#

**10**

**SAMPLE GREEN MANUAL CASH VALUE VOUCHER**

**1** 9349256

**3** CLINIC NUMBER: 025550665508 PATIENT NUMBER: Michael Spaulding

**2** 9349256  
NATIONAL BANK OF SC  
COLUMBIA, SC  
PAPER FROM SOUTHERN NATIONAL  
MARKET, GEORGIA

**4** DESCRIPTION: CASH VALUE VOUCHER  
NO CHANGE IS TO BE ISSUED  
\*FRESH\* FRUITS AND/OR VEGETABLES  
ONLY  
END OF FOOD PACKAGE

**6** NOT VALID BEFORE: 02/01/16  
DATE REDEEMED: / /  
VOID AFTER: 02/29/16

**5** PURCHASE AMOUNT: DOLLARS CENTS

**7** NOT VALID WITHOUT OFFICIAL WIC VENDOR STAMP HERE

**8** Midlands-Richland  
WIC PROGRAM  
CLIP 40-02

**9** 9349256# 061119684# 2502193#

**10**

## Accepting the Cash Value Voucher for Fruits and Vegetables

The following steps must be followed when redeeming a Cash Value Voucher.

1. Ask for the **WIC ID card and voucher(s)**. Hold the ID card until the end of transaction to compare signatures. If the participant does not have a signed ID card, do not begin the transaction.
2. Make sure that the date redeemed is on or after the “**Not Valid Before**” date and on or before the “**Void After**” date. Also for a manual voucher, ensure that the WIC Program Stamp is present.
3. Observe the maximum cash value amount printed on the CVV. The participant can purchase up to that cash value amount. Enter the exact purchase amount up to the maximum value printed on the check. No change is to be given.
4. Enter into the register the amount for each item. **Do not charge sales tax**. If the register automatically adds sales tax, deduct the sales tax amount before entering the total purchase amount on the voucher.
5. **Write the purchase amount up to the maximum value and the purchase date in black ink** on the stub of the cash value voucher. Enter the same on the Cash Value Voucher. If the purchase amount exceeds the maximum value, the participant must pay the difference. The participant cannot use two cash value vouchers for one purchase. Each cash value voucher must be a separate transaction.
6. **Obtain the signature** of the person presenting the cash value voucher and compare the signature on the WIC ID card with the signature on the voucher. If the signatures do not match, do not complete the transaction.
7. Attach the register receipt to the cash value voucher stub. Receipts and stubs should be kept in the store for at least six (6) months.

If the WIC participant wants to pay the difference (overage):

1. Complete the WIC transaction.
2. Ring up the overage.
3. Add sales tax to the overage amount, if applicable.
4. Collect the difference with any other form of payment.

NOTE: Participants can use cash, credit/debit card, SNAP or a personal check to complete the sales transaction.

## The WIC ID Card

The WIC ID Card is issued to participants at the health department. The card lists the individuals eligible to receive WIC foods and the designated individuals who are allowed to do the shopping. The signatures of the individuals authorized to redeem the WIC checks should be on the card.

It is required that this card be given to the cashier prior to the beginning of any WIC transaction. If the participant does not have a WIC ID card, the cashier should not begin the transaction. No other form of identification may be shown or requested at the store.

### SAMPLE WIC SIGNATURE ID CARD

South Carolina

Women, Infants & Children

# PROGRAM ID CARD

Remember to bring or send this ID card/voucher holder when picking up vouchers. The following person(s) is eligible to receive WIC foods.

Name:	ID#
Monica Spaulding	5550665509
Michael Spaulding	5550665509
Michelle Spaulding	5550665509

Signature of participant or parent/caretaker  
*Monica Spaulding*

In their absence:  
Proxy Signature: *James Spaulding*  
Print name of proxy: James Spaulding

Proxy Signature: *Sara Johnson*  
Print name of proxy: Sara Johnson

Only the persons with signatures on this ID card can cash vouchers at the grocery store.



[www.scdhec.gov/wic](http://www.scdhec.gov/wic)

## Important Points to Remember When Accepting WIC Checks

1. The person redeeming the WIC check must get only what is listed on the WIC check. If the WIC customer insists that changes or substitutions are made, please tell them to go to the Health Department to correct the problem.
2. The WIC customer may purchase all the items listed on the WIC check or choose to get less. **DO NOT ISSUE RAIN CHECKS** (i.e., slips stating that you owe the WIC customer additional food or formula). The vendor cannot issue rain checks for food items not available at the time of purchase.
3. If promotional specials are available (i.e. buy one, get one free), these specials must be given to WIC customers. Cents-off store coupons and/or customer loyalty cards must be accepted to reduce the cost of WIC items. **Remember to show WIC customers the same courtesies as other customers.**
4. Complete all information on the WIC check **prior** to obtaining the signature. The participant should sign the WIC check **after** the date and amount have been entered on the WIC check. The participant is a witness to the date and purchase amount entered onto the check. Do not leave the purchase amount or the date redeemed blank, to be filled out by office staff or personnel at a later time.
5. For the store's records, staple the register receipt to the WIC check stub and keep on file for at least six (6) months. **(DO NOT STAPLE ANYTHING TO THE WIC CHECK.)**
6. Do not knowingly give exchanges for foods or formula purchased with WIC checks, (except for items that are defective, spoiled or exceed their sell/use date and only for the same brand and size of item).
7. Do not accept WIC check(s) that have been altered, damaged or pre-signed.
8. Do not require a special lane or area of the store for WIC purchases. **Do not request additional identification other than the WIC ID card.**
9. WIC checks accepted outside the valid period "Not Valid Before" or "Void After" date will not be approved for payment.
10. All WIC checks or cash value vouchers issued in South Carolina can be transacted at any WIC-authorized vendor within the state. WIC checks accepted from others states will not be paid.

## Preparing WIC Checks for Deposit

Follow the steps below to avoid having WIC checks rejected.

1. Review each WIC check to make sure that each section is completed.
2. Correct any errors prior to depositing. Do not staple anything to the WIC checks or use correction fluid on the WIC checks.
3. Stamp the WIC check with the state issued WIC vendor stamp.
4. Make sure that the WIC Program stamp is present on the manual check.
5. Tear off the stubs (with receipts) and retain for six (6) months.
6. Deposit WIC checks into your local retail bank in accordance with your banking procedures. WIC checks must be deposited into the vendor's bank within sixty (60) days from the "Not Valid Before" date to be considered for payment.

### Completed check ready for deposit

<p>04007497</p> <p>NOT VALID BEFORE 02/01/2016</p> <p>DATE REDEEMED 2/28/16</p> <p>VOID AFTER 02/29/2016</p> <p>PURCHASE AMOUNT DOLLARS   CENTS 28.62</p> <p><small>MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE</small></p> <p><small>DHEC 1864 REV 98</small></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><small>CLINIC NUMBER</small> 0000004002</td> <td style="width: 25%;"><small>PATIENT NUMBER</small> 5550665508</td> <td style="width: 50%;"><small>PATIENT NAME</small> SPAULDING, MONICA</td> </tr> <tr> <td style="width: 10%;"><small>QTY</small></td> <td colspan="2" style="width: 90%;"><small>DESCRIPTION</small></td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;"><small>VALID ONLY FOR QUANTITIES AND SIZES OF ITEMS LISTED BELOW</small></td> </tr> <tr> <td>018</td> <td colspan="2">OUNCES WIC APPROVED CEREAL</td> </tr> <tr> <td>001</td> <td colspan="2">DOZEN EGGS LARGE (WHITE ONLY)</td> </tr> <tr> <td>001</td> <td colspan="2">GALLONS FAT FREE OR 1% LOW FAT MILK</td> </tr> <tr> <td>001</td> <td colspan="2">16 - 18oz PEANUT BUTTER</td> </tr> <tr> <td>001</td> <td colspan="2">1 LB BAG OF BEANS/PEAS</td> </tr> <tr> <td>002</td> <td colspan="2">11.5-12 OZ FROZEN JUICE OR 48 OZ JUICE</td> </tr> </table> <p style="font-size: small; margin-top: 5px;"> <small>NOT TO BE SIGNED UNTIL DATE REDEEMED AND PURCHASE AMOUNT HAVE BEEN ENTERED BY VENDOR.</small> <span style="float: right;"><small>*WARNING* THE BACKGROUND ON THE "PURCHASE AMOUNT BOX" AND "PATIENT NAME BOX" HAVE BEEN PRINTED IN THIS THERMOCHROMIC INK. THE PINK BACKGROUND SHOULD DISAPPEAR WHEN HEAT IS APPLIED AND THE BACKGROUND SHOULD REMAIN PINK.</small></span> </p> <p style="text-align: center; margin-top: 10px;">          SIGNATURE OF RECIPIENT     </p>	<small>CLINIC NUMBER</small> 0000004002	<small>PATIENT NUMBER</small> 5550665508	<small>PATIENT NAME</small> SPAULDING, MONICA	<small>QTY</small>	<small>DESCRIPTION</small>			<small>VALID ONLY FOR QUANTITIES AND SIZES OF ITEMS LISTED BELOW</small>		018	OUNCES WIC APPROVED CEREAL		001	DOZEN EGGS LARGE (WHITE ONLY)		001	GALLONS FAT FREE OR 1% LOW FAT MILK		001	16 - 18oz PEANUT BUTTER		001	1 LB BAG OF BEANS/PEAS		002	11.5-12 OZ FROZEN JUICE OR 48 OZ JUICE		<p style="text-align: center; font-weight: bold; font-size: 1.2em;">04007497</p> <p style="font-size: x-small; text-align: center;">             NATIONAL BANK of SC              COLUMBIA, SC              Payable Through SOUTHERN NATIONAL              MARIETTA, GEORGIA         </p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 50%;"><small>NOT VALID BEFORE</small></td> <td style="width: 50%;">02/01/2016</td> </tr> <tr> <td><small>DATE REDEEMED</small></td> <td>2/28/16</td> </tr> <tr> <td><small>VOID AFTER</small></td> <td>02/29/2016</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 70%;"><small>PURCHASE AMOUNT</small></td> <td style="width: 15%;"><small>DOLLARS</small></td> <td style="width: 15%;"><small>CENTS</small></td> </tr> <tr> <td>28.62</td> <td></td> <td></td> </tr> </table> <p style="font-size: x-small; margin-top: 5px;"><small>MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE.</small></p> <p style="text-align: center; margin-top: 10px;"> </p> <p style="text-align: center; margin-top: 5px;"> <b>SC VENDOR</b>  <span style="font-size: 1.5em; font-weight: bold;">40734</span> </p> <p style="text-align: center; margin-top: 5px;"> <span style="font-size: 1.5em; font-weight: bold;">0000004002</span> </p>	<small>NOT VALID BEFORE</small>	02/01/2016	<small>DATE REDEEMED</small>	2/28/16	<small>VOID AFTER</small>	02/29/2016	<small>PURCHASE AMOUNT</small>	<small>DOLLARS</small>	<small>CENTS</small>	28.62		
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## Correcting Errors

If an error is made when **completing the WIC check**, follow these steps:

1. Draw a **single line** through the incorrect purchase amount or incorrect dates (do not **write over**, erase, scratch through or use correction fluid).
2. Write the correct amount in the area below the purchase amount and the correct date above the date.
3. Correct the stub in the same manner.
4. WIC checks taken outside the valid period “Not Valid Before” or “Void After” date will not be approved for payment.

### Correcting errors on a WIC check

<p>04007497</p> <p>NOT VALID BEFORE 02/01/2016</p> <p>DATE REDEEMED <i>2/26/16</i></p> <p>VOID AFTER 02/29/2016</p> <p>PURCHASE AMOUNT DOLLARS   CENTS <i>28.62</i></p> <p><i>26.12</i></p> <p><small>MUST BE DEPOSITED WITHIN 60 DAYS OF THE DATE OF PURCHASE</small></p> <p><small>DIHEC 1864 REV '08</small></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><small>CHECK NUMBER</small> 0000004002</td> <td style="width: 33%;"><small>PURCHASE NUMBER</small> 5550665508</td> <td style="width: 33%;"><small>RECIPIENT NAME</small> SPAULDING, MONICA</td> </tr> <tr> <td style="width: 10%;"><small>QTY</small></td> <td colspan="2"><small>DESCRIPTION</small></td> </tr> <tr> <td colspan="3" style="text-align: center;"><small>VALID ONLY FOR QUANTITIES AND SIZES OF ITEMS LISTED BELOW</small></td> </tr> <tr> <td>018</td> <td colspan="2">OUNCES WIC APPROVED CEREAL</td> </tr> <tr> <td>001</td> <td colspan="2">DOZEN EGGS LARGE (WHITE ONLY)</td> </tr> <tr> <td>001</td> <td colspan="2">GALLONS FAT FREE OR 1% LOW FAT MILK</td> </tr> <tr> <td>001</td> <td colspan="2">16 - 18oz PEANUT BUTTER</td> </tr> <tr> <td>001</td> <td colspan="2">1 LB BAG OF BEANS/PEAS</td> </tr> <tr> <td>002</td> <td colspan="2">11.5-12 OZ FROZEN JUICE OR 48 OZ JUICE</td> </tr> </table> <p style="font-size: small; text-align: center;">NOT TO BE SIGNED UNTIL DATE REDEEMED AND PURCHASE AMOUNT HAVE BEEN ENTERED BY VENDOR.</p> <p style="text-align: center;"><i>Monica Spaulding</i> SIGNATURE OF RECIPIENT</p> <p style="text-align: center;">SC VENDOR <b>40734</b></p>	<small>CHECK NUMBER</small> 0000004002	<small>PURCHASE NUMBER</small> 5550665508	<small>RECIPIENT NAME</small> SPAULDING, MONICA	<small>QTY</small>	<small>DESCRIPTION</small>		<small>VALID ONLY FOR QUANTITIES AND SIZES OF ITEMS LISTED BELOW</small>			018	OUNCES WIC APPROVED CEREAL		001	DOZEN EGGS LARGE (WHITE ONLY)		001	GALLONS FAT FREE OR 1% LOW FAT MILK		001	16 - 18oz PEANUT BUTTER		001	1 LB BAG OF BEANS/PEAS		002	11.5-12 OZ FROZEN JUICE OR 48 OZ JUICE		<p style="text-align: center; font-weight: bold; font-size: 1.2em;">04007497</p> <p style="font-size: x-small; text-align: center;">NATIONAL BANK of SC COLUMBIA, SC Flagship through SOUTHERN NATIONAL MARIETTA, GEORGIA</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"><small>NOT VALID BEFORE</small></td> <td>02/01/2016</td> </tr> <tr> <td><small>DATE REDEEMED</small></td> <td><i>2/26/16</i></td> </tr> <tr> <td><small>DATE REDEEMED</small></td> <td><i>2/28/16</i></td> </tr> <tr> <td><small>VOID AFTER</small></td> <td>02/29/2016</td> </tr> <tr> <td><small>PURCHASE AMOUNT</small></td> <td>DOLLARS   CENTS <i>28.62</i></td> </tr> <tr> <td colspan="2" style="text-align: center;"><small>MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE</small></td> </tr> <tr> <td colspan="2" style="text-align: center;"><i>26.12</i></td> </tr> </table> <p style="text-align: center; font-weight: bold; font-size: 1.5em;">0000004002</p>	<small>NOT VALID BEFORE</small>	02/01/2016	<small>DATE REDEEMED</small>	<i>2/26/16</i>	<small>DATE REDEEMED</small>	<i>2/28/16</i>	<small>VOID AFTER</small>	02/29/2016	<small>PURCHASE AMOUNT</small>	DOLLARS   CENTS <i>28.62</i>	<small>MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE</small>		<i>26.12</i>	
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## Reasons WIC Checks are Rejected

If WIC checks are **returned from the bank** for the following reasons, follow the procedures below:

### **1. Missing or Illegible Vendor Stamp**

- a. Stamp with state authorized WIC Vendor Stamp.
- b. Redeposit into your bank within sixty (60) days from the “Not Valid Before” date.

### **2. Local Agency Stamp Missing (Manual checks only)**

- a. The check should be taken to the local health department. The health department staff will verify that it is a valid check and stamp the check with the agency stamp.
- b. Send check and the register receipt to WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.

### **3. Altered Date or Amount**

- a. Draw a single line through the entire date or amount (do not **write over**, erase, scratch through or use correction fluid).
- b. Write the correct date directly above the “Not Valid Before” date or the correct amount below the “Purchase Amount” area on the WIC check.
- c. Send the corrected check and the register receipt to the WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.
- d. Once the check is returned from the WIC Vendor Management Unit with a WIC approved stamp, redeposit it into your bank within ten (10) business days from receipt of the letter.

### **4. Missing Date or Missing Amount**

- a. Enter missing date or missing amount.
- b. Send the corrected check and the register receipt to the WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.
  - b. Once the check is returned from the WIC Vendor Management Unit with a

WIC-approved stamp, redeposit it into your bank within ten (10) business days from receipt of the letter.

## 5. Over Maximum Dollar Amount

- a. Draw a single line through the purchase amount (do not **write over**, erase, scratch through or use correction fluid).
- b. Write the correct purchase amount directly below the “Purchase Amount” area on the WIC check.
- c. Send the corrected check and the register receipt to the WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.
- d. Once the check is returned from the WIC Vendor Management Unit with a WIC-approved stamp, redeposit into your bank within ten (10) business days from receipt of the letter.

## 6. Missing Signature

- a. Deposit the check into your local bank within thirty (30) days from the “Void After” date.
- b. After receiving the rejected check back from the bank for a missing signature, call the health department to contact the participant to come in and sign the check (note name of the person you spoke with). (See list of SC WIC clinic codes)
- c. Once the WIC check is signed by the participant, send the check, along with the register receipt, to the WIC Vendor Management Unit within ninety (90) days from the “Void After” date for approval of payment.
- d. Once the check is returned from the WIC Vendor Management Unit with a WIC-approved stamp, redeposit it into your bank within ten (10) business days from receipt of the letter.
- e. If the participant does not sign the check prior to ninety (90) days from the “Void After” date, the check will not be paid. **It is the cashier’s responsibility to ensure that the signature is obtained at the time of purchase.**

## 7. Encoding Error

- a. Checks that are encoded incorrectly on the MICR line by the Bank of First Deposit.
- b. The checks should be returned to the Bank of First Deposit and they will correct the

- error. The check should then be re-deposited into your account.
- c. These checks should not be sent to the WIC Vendor Management Unit for approval.

## **8. Deposited Late or Stale Dated**

- a. WIC Check(s) deposited more than sixty (60) days after the “Not Valid Before” date. These checks will not be paid and are considered as **Stale Dated**.

If a check is rejected for these reasons, (alter of date/amount, missing date/amount, missing signature) make the necessary corrections (see correcting errors) and send the check, along with receipts, to the WIC Vendor Management Unit for processing.

**Checks received into the Vendor Management Unit more than forty five (45) days after the “Void After” date will not be paid. All rejected WIC checks, along with register receipts, should be submitted for approval to:**

**S.C. Department of Health and Environmental Control  
WIC Vendor Management Unit  
Box 101106  
Columbia, SC 29211  
  
(1-800-922-4406)**

### **WIC Clinic Sites**

The WIC Program is federally funded through the United States Department of Agriculture (USDA) to assist states in safeguarding the health and nutritional well-being of our low-income women, infants and children during critical growth periods. The Department of Health and Environmental Control (DHEC) has been designated to administer the WIC Program in South Carolina.

WIC Checks are distributed to participants by local WIC staff at the local health department. Each health department is assigned a four-digit county and clinic number. This number is the last four digits of the number printed on the upper left hand corner and lower right hand corner of the WIC check.

The following is a listing of WIC clinic sites, addresses and telephone numbers. Please contact the appropriate WIC clinic to obtain the signature of participants who failed to sign their WIC checks.

<b>COUNTY</b>	<b>CLINIC</b>	<b>WIC SITE/ADDRESS</b>	<b>TELEPHONE</b>
<b>01</b>	<b>01</b>	Abbeville County Health Department PO Box 189 905 W. Greenwood St., Hwy 72 Abbeville, SC 29620	(864) 366-2131
<b>02</b>	<b>01</b>	Aiken County Health Department 222 Beaufort Street Aiken, SC 29801	(803) 642-1686
<b>03</b>	<b>01</b>	Allendale County Health Department 571 N. Memorial Avenue Allendale, SC 29810	(803) 584-3818
<b>04</b>	<b>11</b>	Anderson County Health Department 220 McGee Rd. Anderson, SC 29625	(864) 260-5637
<b>04</b>	<b>33</b>	Westside Community Center 1100 West Franklin Street Anderson, SC 29624	(864) 231-1791
<b>05</b>	<b>01</b>	Bamberg County Health Department 370 Long Branch Rd. Bamberg, SC 29003	(803) 245-5176
<b>06</b>	<b>01</b>	Barnwell County Health Department 11015 Ellenton St., Hwy 278 Barnwell, SC 29812	(803) 541-1061
<b>07</b>	<b>01</b>	Beaufort County Health Department 601 Wilmington St. Beaufort, SC 29902	(803) 525-7625 Auto Voice System
<b>07</b>	<b>02</b>	Bluffton Health Center 4819 Bluffton Parkway PO Box 235 Bluffton, SC 29910	(843) 757-2251 Auto Voice System
<b>08</b>	<b>01</b>	Berkeley County Health Clinic 109 W. Main St. Moncks Corner, SC 29461	(843) 719-4600
<b>08</b>	<b>05</b>	Goose Creek Health Department 106 Westview Blvd Goose Creek, SC 29445	(843) 572-3313
<b>09</b>	<b>01</b>	Calhoun County Health Department 2837 Old Belleville Rd. St. Matthews, SC 29135	(803) 874-2037
<b>10</b>	<b>12</b>	North Area Health Clinic 3963 Whipper Barony Lane Charleston Heights, SC 29405	(843) 740-1580

<b>10</b>	<b>15</b>	Mt. Pleasant Health Clinic 1189 Sweetgrass Basket Parkway # 100 Mt. Pleasant, SC 29464	(843) 856-1212
<b>10</b>	<b>27</b>	Northwoods Health Clinic 2070 Northbrook Blvd. A-20 N. Charleston, SC 29406	(843) 953-4300 Auto Voice System
<b>11</b>	<b>01</b>	Cherokee County Health Department 400 S. Logan St. / PO Box 338 Gaffney, SC 29341	(843) 487-2701
<b>12</b>	<b>01</b>	Chester County Health Department 129 Wylie St. PO Box 724 Chester, SC 29706	(803) 385-6152 Auto Voice System
<b>13</b>	<b>01</b>	Chesterfield County Health Department 203 N. Page Street PO Box 112, Chesterfield, SC 29709	(843) 623-2117 (843) 623-2425
<b>14</b>	<b>01</b>	Clarendon County Health Department 110 E. Boyce Street PO Box 729 Manning, SC 29102	(803) 435-8168 (803) 435-8178
<b>15</b>	<b>01</b>	Colleton County Health Department PO Box 229 219 S. Lemacks St. Walterboro, SC 29488	(843) 542-2584
<b>16</b>	<b>05</b>	Darlington County Health Department 305 Russell St. Darlington, SC 29532	(843) 398-4409 (843) 389-4400
<b>16</b>	<b>06</b>	Hartsville Health Department 130 E. Camden Ave PO Box 68 Hartsville, SC 29550	(843) 332-7303
<b>17</b>	<b>08</b>	Dillon County Health Department 201 W. Hampton Street PO Box 1064 Dillon, SC 29536	(843) 774-5613 (843) 774-5611
<b>18</b>	<b>32</b>	Dorchester County Health Department 500 N. Main Street, Box 9 Summerville, SC 29824	(843) 832-0041
<b>19</b>	<b>01</b>	Edgefield County Health Department 21 Star Rd. Edgefield, SC 29824	(803) 637-4035
<b>20</b>	<b>11</b>	Fairfield County Health Department 1136 Kincaid Bridge Rd. Winnsboro, SC 29180	(803) 635-6481

<b>21</b>	<b>11</b>	Florence County Health Department 145 E. Cheves St. Florence, SC 29506	(843) 661-4828 (843) 661-4835
<b>21</b>	<b>13</b>	Lake City Health Department 137 North Acline St. Lake City, SC 29560	(843) 394-8822
<b>22</b>	<b>01</b>	Georgetown County Health Department 531 Lafayette St. Georgetown, SC 29440	(843) 527-1013 (843) 546-5593
<b>23</b>	<b>01</b>	Greenville Health Department 200 University Ridge Greenville, SC 29601	(864) 282-4100
<b>23</b>	<b>11</b>	Greer Health Department 200 Victoria St. Greer, SC 29651	(864) 848-5360
<b>23</b>	<b>15</b>	Greenville Memorial Hospital 701 Grove Rd. Greenville, SC 29605	(864) 455-8835
<b>23</b>	<b>17</b>	Slater/Marietta Health Department Foothill Family Resources 3 Main St. Slater, SC 29683	(864) 836-6364
<b>23</b>	<b>18</b>	Simpsonville Center for Community Svcs 1102 Howard Dr Simpsonville, SC 29681	(864) 688-2221 (864) 688-2213
<b>24</b>	<b>01</b>	Greenwood County Health Department 1736 South Main St. Greenwood, SC 29646	(864) 942-3600
<b>25</b>	<b>01</b>	Hampton Health Department PO Box 37 531 Carolina Ave. Hampton, SC 29924	(843) 943-3878 Ext: 202
<b>26</b>	<b>03</b>	Conway Health Department 1931 Industrial Park Road Conway, SC 29569	(843) 915-8800
<b>26</b>	<b>07</b>	Myrtle Beach Health Department 700 21 <sup>st</sup> Ave. North Myrtle Beach, SC 29577	(843) 448-8407
<b>26</b>	<b>08</b>	Stephen's Crossroad Health Department Ralph H. Ellis Bldg. 107 Hwy 57 North Little River, SC 29566	(843) 915-5654
<b>28</b>	<b>02</b>	Kershaw County Health Department PO Box 340 Camden, SC 29020	(803) 425-6012

<b>29</b>	<b>01</b>	Lancaster County Health Department 1833 Pageland Hwy. PO Box 817 Lancaster, SC 29721	(803) 286-9948 (803) 286-8118
<b>29</b>	<b>02</b>	Kershaw Health Center PO Box 817 Lancaster, SC 29721	(803) 475-3365
<b>30</b>	<b>01</b>	Laurens County Health Department PO Box 447 93 Human Services Rd. Clinton, SC 29325	(864) 833-0000
<b>31</b>	<b>03</b>	Lee County Health Department 810 Brown St. Bishopville, SC 29010	(803) 484-6612
<b>32</b>	<b>06</b>	Batesburg-Leesville Clinic 229 West Church St. Batesburg, SC 29006	(803) 332-6326 Auto Voice System
<b>32</b>	<b>08</b>	Lexington County Health Department 1070-B S Lake Drive Lexington, SC 29073	(803) 785-6550
<b>33</b>	<b>14</b>	Marion County Health Department 206 Airport Court Suite B Mullins, SC 29574	(843) 423-8295
<b>34</b>	<b>17</b>	Marlboro County Health Department 711 Parsonage St. Ext. Bennettsville, SC 29512	(843) 479-6801 (843) 479-6803
<b>35</b>	<b>01</b>	McCormick County Health Department PO Box 27 204 Hwy 28 McCormick, SC 29835	(864) 852-2511
<b>36</b>	<b>10</b>	Newberry County Health Department 2111 Wilson Rd. Newberry, SC 29108	(803) 321-2170
<b>37</b>	<b>23</b>	Seneca Health Department 609 North Townville Street Seneca, SC 29678	(864) 882-2245
<b>38</b>	<b>01</b>	Orangeburg County Health Department PO Box 1126 / 1550 Carolina Avenue Orangeburg, SC 29116	(803) 268-5716
<b>38</b>	<b>05</b>	Holly Hill Health Center PO Box 1250-932 Holly St. Holly Hill, SC 29059	(803) 496-3324
<b>39</b>	<b>01</b>	Pickens County Health Department 200 McDaniel Ave. Pickens, SC 29671	(864) 898-5965
<b>40</b>	<b>01</b>	Richland Community Public Health Center 120 Clarkson St. Eastover, SC	(803) 353-0177

<b>40</b>	<b>02</b>	Richland County Health Department 2000 Hampton St. Columbia, SC 29204	(803) 576-1350 (803) 576-2940
<b>40</b>	<b>04</b>	Fort Jackson Clinic 4556 Scales Ave. FT. Jackson, SC 29206	(803) 751-5281
<b>41</b>	<b>01</b>	Saluda County Health Department 613 Newberry Hwy. Saluda, SC 29138	(864) 445-7779
<b>42</b>	<b>01</b>	Spartanburg County Health Department 151 E. Wood St. PO Box 4217 Spartanburg, SC 29305	(864) 596-2227
<b>42</b>	<b>03</b>	Cowpens Public Health Department 112 Foster Street Cowpens, SC 29330	(864) 463-3940
<b>42</b>	<b>04</b>	Inman Health Department 6 S. Howard Street Inman, SC 29349	(864) 472-3393
<b>42</b>	<b>06</b>	Chesnee Health Department 210 Hampton St. Chesnee, SC 29323	(864) 461-2808
<b>42</b>	<b>08</b>	Woodruff Health Department 240 Gregory St. Woodruff, SC 29388	(864) 476-3817
<b>43</b>	<b>04</b>	Sumter County Health Department 105 N. Magnolia Street PO Box 1628 Sumter, SC 2915	(803) 773-5511
<b>43</b>	<b>06</b>	Shaw AFB WIC Office 524 Stuart St. Shaw AFB, SC 29152	(803) 895-4913
<b>44</b>	<b>01</b>	Union County Health Department 115 Thomas St. Union, SC 29379	(864) 429-1695
<b>45</b>	<b>09</b>	Williamsburg County Health Department 520 Thurgood Marshall Blvd. Suite A Kingstree, SC 29556	(843) 355-6012
<b>46</b>	<b>01</b>	York County Health Department 1070-B Heckle Blvd. PO Box 3057 CRS Rock Hill, SC 29732	(803) 909-7350
<b>46</b>	<b>02</b>	York Health Center 116 North Congress St. PO Box 149 York, SC 29745	(803) 684-7004

49	01	Port Royal Medical Center 1320 Ribault Rd. Port Royal, SC 29935	(843) 986-0900 (843) 322-1846
49	02	US Naval Hospital 5648 N. Okatie Hwy. 170 PO Box 357 Ridgeland, SC 29936	(843) 228-5561 (843) 228-5118
49	05	Chelsea Medical Center 5648 N. Okatie Hwy.170 PO Box 357 Ridgeland, SC 29936	(843) 987-7401 (843) 987-7471
55	02	Little River Medical Center-South Strand 3236 Holmestown Road Myrtle Beach, SC 29588	(843) 716-6477
55	03	Little River Medical Center-Loris 3817 Main Street St. Loris, SC 29569	(843) 716-6477

### List of Infant Formula Manufacturers, Wholesalers, Distributors and Retailers

Each State WIC Program is required to maintain a list of infant formula wholesalers, distributors or retailers licensed in the State in accordance with State law and infant formula manufacturers registered with FDA that provide infant formula.

<b>INFANT MANUFACTURERS</b>		
<u><b>Abbott Laboratories</b></u> Abbott Nutrition 3300 Stelzer Road Columbus, Ohio 43219-7677	<u><b>Mead Johnson</b></u> Mead Johnson Nutritional 2400 West Lloyd Expressway Evansville, IN 47721-0001	<u><b>Nestle USA</b></u> Nestle Infant Nutrition 12 Vreeland Road, Box 697 Florham Park, NJ 07932-0697
<u><b>Nutricia North America</b></u> Nutricia North America 9900 Belward Campud Drive Suite 100 Rockville, MD 20850	<u><b>PBM Nutritionals</b></u> PBM Nutritionals, LLC 652 Peter Jefferson Pkwy Suite 300 Charlottesville, VA 22911	<u><b>Prolacta Bioscience*</b></u> 757 Baldwin Park Blvd City of Industry, CA 91746
<b>WHOLESALE AND DISTRIBUTORS</b>		
<u><b>W. Lee Flowers (Floco)</b></u> P.O. Box 1629 Lake City, SC 29560  127 East W. Lee Flowers Road Scranton, SC 29591	<u><b>Cash &amp; Carry Wholesale</b></u>  1421 Five Chop Road Orangeburg, SC 29115  2440 Broad Street Sumter, SC 29150	<u><b>H.T. Hackney Company</b></u> <b>502 S. Gay Street</b> <b>Knoxville, TN 37902</b>  209 Flintlake Road Columbia, SC 29223

<p><b><u>Costco Wholesale</u></b> <b><u>(Corporate office)</u></b> P.O. Box 34331 Seattle, WA 98124</p>	<p>3236 Augusta Road St 40B West Columbia, SC 29170</p> <p>1620 South DeKalb Street Shelby, NC 28150</p>	<p>333 Dreher Road Columbia, SC 29169</p> <p>109 Sulphur Springs Road Greenville, SC 29617</p> <p>368 Millennium Drive Orangeburg, SC 29115</p>
<p><b><u>J.T. Davenport &amp; Sons, Inc.</u></b> 1144 Broadway Road Sanford, NC 27332</p> <p>P.O. Box 1105 Sanford, NC 27331</p>	<p><b><u>Nash Finch Company</u></b> 121 Cold Storage Road P.O. Box 1709 Lumberton, NC 28358</p> <p>12319 Hwy 301 South Statesboro, GA 30458</p> <p>P.O. Box 490 Statesboro, GA 30459</p>	<p>2112 West Jody Road Florence, SC 29501</p> <p>148 Industrial Drive Greenwood, SC 29646</p> <p>2071 Wilson Road Newberry, SC 29108</p>
<p><b><u>Supervalu, Inc.</u></b> 605 Selig Drive Anniston, AL 36201</p> <p>PO Box 430 Anniston, AL 36202</p>	<p><b><u>Atlantic Dominion</u></b> <b><u>Distributors</u></b> 3641 Legion Road P.O. Box 406 Hope Mills, NC 28348</p>	<p>1299 Flint Sheet Ext. Rock Hill, SC 29730</p> <p><b><u>Sams's Club (Corporate Office)</u></b> 2101 S.E. Simple Savings Drive Bentonville, AR 72716-0745</p>
<p><b><u>C &amp; S Wholesale Services,</u></b> <b><u>Inc.</u></b> 208 Bi-Lo Blvd Greenville, SC 29607</p>	<p><b><u>Cardinal Health, LLC</u></b> 4 Girbaud Court Greensboro, NC 27407</p>	<p><b><u>Merchants Distributor (MDI)</u></b> 5005 Alex Lee Blvd PO Box 2148 Hickory, NC 28603</p>

***\*Pet USDA, Prolacta human milk products are not WIC-eligible formulas, and therefore should not be purchased by vendors for sale to WIC participants.***

## Vendor Monitoring

Under Federal WIC Regulations, State WIC Programs are required to conduct monitoring of all vendors approved for participation in the WIC Program. The monitoring includes routine visits, follow-up visits, compliance buys and inventory audits.

**All WIC Vendor responsibilities are administered at the State WIC office.**

**ROUTINE VISITS** - Each year the WIC Program monitors WIC vendors every eighteen (18) to twenty-four (24) months to ensure compliance with program requirements.

The following information explains the process for vendor monitoring. During a routine visit, a WIC staff member will:

1. Enter the store and identify himself/herself to a member of management at the time of the visit.
2. Review all WIC checks available in the store and check stock of WIC foods and formula for quantity, quality and price.
3. Review invoices to ensure that formula was purchased from an approved wholesaler, distributor and or manufacturer.
4. Observe a WIC participant redeeming a WIC check, if possible, or ask a cashier to explain the procedures for accepting WIC checks.
5. Determine if violations have occurred. If violations are found, the WIC staff member will:
  - a. Discuss the violations with the person in charge;
  - b. Apply the appropriate number of violation points;
  - c. Explain what needs to be done to correct problem areas/violations;
  - d. Explain how long the store has to correct problems;
  - e. Explain what actions will be taken against the store if the needed corrective actions are not taken within the required time period.
6. Send a letter following the review restating the results of the monitoring visit. The letter should be accompanied by a copy of the Vendor Summary Review that lists the violation, corrective action and the timeframe for the follow-up visit, if needed.

**FOLLOW-UP VISITS** - If problems are identified during the routine visit, a follow-up visit will be scheduled within two (2) weeks. This visit allows the program to:

1. Determine if problems cited have been corrected;
2. Assist the vendor with more information or training;
3. Review the vendor requirements according to the WIC Agreement.

**COMPLIANCE BUY VISITS** - Each year a random sample of all active vendors are selected for routine compliance buys. If there is a strong indication that a store is in violation of program regulations, a compliance buy may be conducted. During these visits, a WIC staff member visits the store posing as a WIC participant, redeems one or more WIC check(s) and documents what actions employees took during the transaction. The WIC Vendor Management Unit will notify the vendor in writing of the results of the initial compliance buy violation. A pattern must be

established prior to documenting subsequent violations, unless the WIC Vendor Management Unit determines that notifying the vendor would compromise an investigation.

**INVENTORY AUDITS** - If it is determined that notifying the vendor would compromise an investigation, our office will conduct an inventory audit. During these visits, two (2) WIC staff members will visit your store to review inventory of specific WIC-approved foods over a selected period of time—*three months*. A member of management and both WIC staff members will verify and sign the initial inventory count. The vendor will be required to submit invoices for specific WIC-approved items when requested. At the end of the selected time period, WIC staff members will revisit the store to get a count of the inventory items. All WIC sales receipts and invoices for stock that has been ordered and received during the audit time period will be requested, including WIC checks redeemed on that day.

## Vendor Training

A series of vendor training sessions are conducted annually by the Vendor staff and held in multiple locations across the state (including two centralized sessions). These training sessions cover all policies and procedures and provide an opportunity for questions/answers and discussion of problems. Each authorized vendor must have at least one representative attend the annual training. It is the vendor's responsibility to ensure cashiers and other staff are trained on WIC program policies and guidelines.

## Program Violations

Each violation of a program regulation has a set point value and a specific time period during which the points will remain on a vendor's record. If a vendor accumulates fifteen (15) or more violation points, the store will be disqualified from the program. The period of disqualification is determined by the nature of the violation(s), the number of violations and past disqualifications. Disqualification periods range from a minimum of one (1) year to permanent.

When a store accumulates fifteen (15) or more violation points, the vendor receives a disqualification letter giving a minimum of fifteen (15) days advance notice of the beginning date of the disqualification. With this notice, the vendor also receives information concerning the procedures for requesting a fair hearing. During the disqualification period, the vendor is not to redeem WIC checks. Disqualification from the WIC Program may result in disqualification as a retailer in SNAP. Such disqualifications may not be subject to administrative or judicial review under SNAP.

**The chart on the following page lists possible WIC Program violations, including their point values and retention periods.**

<b>VIOLATIONS</b>	<b>POINT VALUE</b>	<b>POINTS RETAINED FOR</b>
Failure to properly redeem WIC checks, including, but not limited to, not asking for ID cards and not properly completing date and purchase amount on WIC checks prior to obtaining the participant's signature.	<b>5.0</b>	<b>1 year</b>
Not marking WIC items with price labels or shelf tags.	<b>5.0</b>	<b>1 year</b>
Stocking WIC-approved foods outside of the manufactures' expiration date. <ul style="list-style-type: none"> <li>• More than 3 containers of a particular food item (Ex: 3 cans formula, 3 boxes of same cereal, etc.)</li> </ul>	<b>5.0</b>	<b>1 year</b>
Allowing substitutions for items listed on WIC checks.	<b>5.0</b>	<b>1 year</b>
Failure to submit WIC Vendor Price Survey as requested.	<b>5.0</b>	<b>1 year</b>
Failure to stock required quantity and/or variety of foods as listed in Agreement. <ul style="list-style-type: none"> <li>• 1-3 items</li> <li>• 4-8 items</li> <li>• More than 8 items</li> </ul>	<b>5.0</b> <b>8.0</b> <b>10.0</b>	<b>1 year</b> <b>18 months</b>
Where no specific brand is prescribed, requiring a participant to purchase a specific brand of WIC approved foods when more than one brand is available.	<b>5.0</b>	<b>1 year</b>
Using a WIC stamp other than the one issued by the agency (DHEC).	<b>5.0</b>	<b>1 year</b>
Collecting sales tax on WIC purchases.	<b>5.0</b>	<b>1 year</b>
Providing (sell/give) incentive items to participants.	<b>5.0</b>	<b>1 year</b>
Not providing infant formula invoices from an approved wholesaler, distributor or retailer.	<b>5.0</b>	<b>1 year</b>
Threatening or abusing, either verbally or physically, a WIC participant or WIC personnel in the conduct of official WIC business.	<b>8.0</b>	<b>18 months</b>
Not providing promotional specials or not accepting cents-off coupons or store discount cards to reduce WIC price.	<b>8.0</b>	<b>18 months</b>
Issuing Rain Checks.	<b>8.0</b>	<b>18 months</b>
Requiring WIC participants to use special check-out lanes. Not showing WIC participants the same courtesies as other customers. Committing acts of discrimination.	<b>8.0</b>	<b>18 months</b>
Knowingly entering false information on WIC check(s).	<b>8.0</b>	<b>18 months</b>
Requiring cash purchase to redeem WIC checks.	<b>8.0</b>	<b>18 months</b>
Contacting WIC participants in an attempt to recoup funds for WIC checks not paid by the Agency.	<b>8.0</b>	<b>18 months</b>

## **Mandatory Vendor Sanctions**

### **Permanent Disqualification**

The State agency must permanently disqualify a vendor for the following:

- (1) A conviction of trafficking WIC checks or selling firearms, ammunition, explosives or controlled substances in exchange for WIC checks. A vendor is not entitled to receive any compensation for revenues lost as a result of such violation.

### **Six-year Disqualification**

The WIC Program must disqualify a vendor for six (6) years for:

- (1) One incidence of buying or selling WIC checks for cash (trafficking);
- (2) One incidence of selling firearms, ammunition, explosives or controlled substances as defined in 21 U.S.C. 802, in exchange for WIC checks.

### **Three-year Disqualification**

The WIC Program must disqualify a vendor for three (3) years for:

- (1) One incidence of the sale of alcohol or alcoholic beverages or tobacco products in exchange for WIC checks;
- (2) A pattern of claiming reimbursement for the sale of an amount of a specific supplemental food item that exceeds the store's documented inventory of that supplemental food item for a specific period of time;
- (3) A pattern of vendor overcharges;
- (4) A pattern of receiving, transacting and/or redeeming WIC checks outside of authorized channels, including the use of an unauthorized vendor and/or an unauthorized person;
- (5) A pattern of charging for supplemental food not received by the participant;
- (6) A pattern of providing credit or non-food items, other than alcohol, alcoholic beverages, tobacco products, cash, firearms, ammunition, explosives or controlled substances as defined in 21 U.S.C. 802, in exchange for WIC checks.

### **One-year Disqualification**

The WIC Program must disqualify a vendor for one (1) year for:

- (1) A pattern of providing unauthorized food items in exchange for WIC checks, including charging for supplemental foods provided in excess of those listed on the WIC check;

- (2) A pattern of charging prices for WIC items above the maximum allowable price for the same type store within the same geographical area;
- (3) Intentionally providing incorrect quantity or type of infant formula specified on a WIC check;
- (4) Intentionally providing false information on the WIC Vendor Application;
- (5) Intentionally providing false information on the Vendor Price Survey;
- (6) Non-payment of a claim for overcharges to WIC Program;
- (7) Failure to allow monitoring of the store by a WIC Investigator; failure to provide WIC checks for review when requested;
- (8) Forging signatures on WIC checks;
- (9) Failure to submit a WIC Vendor Price Survey after the second request;
- (10) Failure to attend WIC Annual Vendor Training.

### **Effective Date of Disqualification of Vendors**

The WIC Program must make permanent disqualifications effective on the date of receipt of the notice of the adverse action. The WIC Program must make all other disqualifications effective no earlier than 15 days after the date of the notice of the adverse action and no later than 90 days after the date of the notice of adverse action.

### **Second Mandatory Sanction**

When a vendor, who previously has been assessed a sanction for any of the violations listed in this section, receives another sanction for any of these violations, the WIC Program must double the second sanction.

### **Third or Subsequent Mandatory Sanction**

When a vendor who previously has been assessed two or more sanctions for any of the violations listed in this section receives another such sanction, the WIC Program must double the third and all subsequent sanctions.

## **SNAP Disqualification**

Disqualification from the WIC Program may result in disqualification as a retailer in SNAP. Such disqualification may not be subject to administrative or judicial review under SNAP.

The WIC Program must disqualify a vendor who has been disqualified from SNAP. The disqualification must be for the same length of time as the SNAP disqualification, may begin at a later date than the SNAP disqualification, and is not subject to administrative or judicial review under the WIC Program.

### **Vendor Claims**

When the State agency determines the vendor has committed a vendor violation that affects the payment to the vendor (overcharge), the WIC Program will establish a claim. The claim amount will exceed the maximum allowable price of each WIC check that contained the vendor overcharge or other error. The vendor must pay any claim assessed by the WIC Program.

A vendor overcharge means intentionally or unintentionally charging the WIC Program more for authorized supplemental foods than is permitted.

### **WIC Logo Usage**

WIC vendors are not permitted to use either the acronym “WIC” or the WIC logo, including close facsimiles, in total or part, either in the official name in which the business is registered or in the name under which it does business, if different. WIC vendors are also not permitted to use either the acronym “WIC” or the WIC logo in advertising or promotional literature; nor are vendors allowed to apply stickers, tags or labels having the WIC acronym or logo on WIC-approved foods. Both the acronym and logo are registered with the U.S. Patent and Trademark Office.

The State office will allow shelf-stickers and shelf-talkers if proper approval is granted by the State office. If a vendor would like to request state-issued shelf-stickers, contact the Vendor Management Unit.

### **Vendor Appeals**

Vendors or vendor applicants can appeal certain actions taken by the State agency. For those actions that may be appealed, the State agency will notify the vendor or vendor applicant of the appropriate procedures and requirements to file an appeal.

## Fair Hearing Information

**If the State agency has taken an adverse action against your store, you may request a fair hearing.**

### **IT IS YOUR RIGHT TO APPEAL A DECISION OF THE STATE AGENCY WHEN:**

1. Your application for participation as a WIC vendor has been denied;
2. You are disqualified from participation as a WIC vendor;
3. Your agreement with the WIC Program is not renewed;
4. Adverse action is taken that affects your participation in the WIC Program.

Below are the steps to take to request an appeal:

#### **(Step 1)**

- The vendor must provide the State agency (WIC Vendor Management Unit) with a written request for a fair hearing within fifteen (15) days of the receipt of the notice of the adverse action.
- The written request must list the actions with which the vendor disagrees as well as reasons the vendor disagrees with these actions.
- If the vendor does not request a hearing within the 15-day notification period, the State agency's decision becomes final.

#### **(Step 2)**

- The State agency will contact the vendor within fourteen (14) days of receipt of the fair hearing request to conduct a preliminary conference.
- The conference will be used in an attempt to resolve the complaint and to explain WIC policies and procedures.
- If resolved, the matter is documented by a follow-up letter to the vendor.
- If the matter cannot be resolved and the vendor wishes to continue with the request for a hearing, the State agency will continue with the fair hearing process.
- Appealing an action does not relieve the vendor from the responsibility of continued compliance with the terms of any written agreement with the State agency.

### (Step 3)

- If the vendor is not satisfied with the outcome of the preliminary conference, the vendor may submit a request for final review to the S.C. Department of Health and Environmental Control's Clerk of the Board within 15 days after the conference.
- The WIC Program will provide additional information regarding the Board review process following the preliminary conference.

## Complaint Process

The S.C. Department of Health and Environmental Control and USDA take all complaints seriously and encourage the immediate reporting of any alleged WIC Program abuse, violation or fraud.

All complaints made against a vendor must be documented using a WIC Complaint/Follow-up Form "DHEC 1898" or reported verbally to the WIC Vendor Unit at (1-800-922-4406). If WIC Program violations are noted, at a minimum, the WIC vendor will be contacted and notified of the details of the complaints, regulations or policies violated and the sanction (if applicable) that could be assessed. Individuals making complaints may choose not to give their names. All documentation concerning complaints against vendors will be retained in the South Carolina WIC Vendor Unit for three (3) years.

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

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

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

(1) Mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410

(2) Fax: (202) 690-7442; or

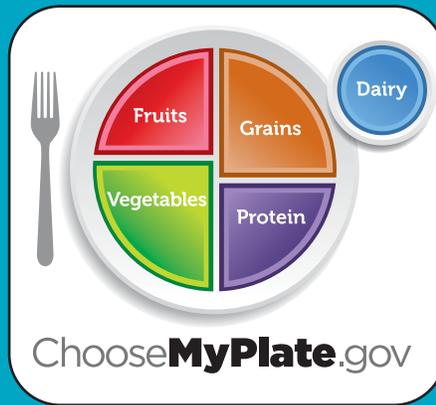
(3) E-mail: [program.intake@usda.gov](mailto:program.intake@usda.gov).

This institution is an equal opportunity provider.

This “South Carolina WIC Vendor Manual” is considered part of the current SC WIC Vendor Agreement.

If you have any questions concerning this manual, the vendor agreement or any other part of the WIC Program, please write to:

**WIC-Vendor Management Unit**  
**SC Dept. of Health and Environmental Control**  
**Box 101106**  
**Columbia, SC 29211**  
**Or call, toll-free: 1-800-922-4406**  
[www.scdhec.gov/wic](http://www.scdhec.gov/wic)



[www.scdhec.gov/wic](http://www.scdhec.gov/wic)

Division of WIC Services • Bureau of Maternal and Child Health Services  
PO Box 101106, Columbia, SC 29211, 800.922.4406