



Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel. (207) 287-8016
Fax (207) 287-9058; TTY (800) 606-0215

Date: 7/9/2012
Re: WIC Check Payment Procedure Changes

We have provisions with the Food and Nutrition Services, (FNS) that states certain rules and regulations on WIC checks transaction procedures. The following changes are made to concur with the policies.

Vendor Payment: The Department will make payment to the Vendor upon receipt of validly transacted and redeemed WIC checks for food costs incurred in providing WIC approved foods to WIC customers.

The Department shall deny payment, either partially or fully, to a Vendor for improperly transacted or redeemed WIC checks; or may establish a claim for payments already made on improperly transacted WIC checks; or may offset future payments for the claim.

The Department has the right to demand refunds for charges of more than the Vendor's actual selling price and shall deny payment to the Vendor for more than the price limitations of the WIC check.

Timeframe: By signing the WIC Vendor Agreement, the Vendor agrees to submit WIC checks for payment within sixty (60) days from the "FIRST-DATE-TO-USE". The Department shall have no obligation to pay any WIC checks submitted outside of this timeframe.

Policy: Prior to deposit, Vendors must review ALL WIC checks for possible errors before submitting them for payment. Checks with errors will be rejected by the banking contractor. The Vendor may incur bank fees for these. The Department cannot reimburse the Vendors for such charges.

Review: WIC checks should be reviewed for completeness, legibility, dates, the total sale amount and the WIC customer signature. The register receipt should also be reviewed to ensure that the correct foods have been provided.

Unreadable Vendor Number: If a WIC check is returned to the store because the banking system could not read the Vendor's four (4) digit ID number, the Vendor can re-stamp their Vendor ID number on the check and redeposit the WIC check to your bank.

Follow-up: If check is rejected it is critical that immediate follow-up training be completed with store personnel. Follow-up training with the cashier and/or other store personnel involved in the transaction must be done to prevent future occurrences, thus saving the Vendor money and protecting the Vendor's record with the Department.

ME CDC, WIC Nutrition Program

286 Water Street, 6th Floor, # 11 State House Station Augusta, Maine 04333-0011
Phone: (207) 287-3991 Fax: (207) 287-3993 E-mail: WIC.Maine@Maine.Gov

Payment Inquiry and Reconsideration Requests: All payment inquiries regarding specific WIC checks must be submitted in writing by mail. Telephone inquiries of this type will not be researched. Telephone requests for general information are welcomed.

WIC Check Appeal: For Vendors who believe a payment denial has been made incorrectly, or believe there is a justifiable reason why payment should be made, the Department may consider payment approval with valid justification. A Vendor must submit a written payment reconsideration request to the Department within ninety (90) days of the "FIRST-DATE-TO-USE" printed on the check. Remember to always keep a photocopy of all items being mailed, including the front and back of the check (See enclosed **WIC check Appeal Request** form).

Reconsideration requests must include:

1. One completed WIC check appeal form must be prepared for each rejected check appeal requested. A brief explanation on the form describing the circumstances, the reason why payment should be reconsidered, and what steps have been taken to prevent problem(s) in the future.
2. Vendor stamp number, date mailed, check number, complete store name with address, contact name and a phone number.
3. The check image with the denial/rejection stamp and receipt copy of the original receipt or journal transaction.
4. A corrective action plan demonstrating to the Department how the problem(s) will be prevented in the future.

Approval/Denial Consideration will be given to the documentation submitted.

Incomplete appeal forms or appeals that do not include the check and the receipt will be denied.

- If the appeal is approved, the WIC program will process an ACH
- If the appeal is denied, the WIC program will inform vendor of denial and return it to the Vendor.

Checks reject for the following reasons:

- Missing/Unreadable Vendor Stamp - The WIC check was not stamped at all or not clearly stamped prior to deposit. Stamp the check clearly and redeposit to your bank within sixty (60) days from the "first date to use". Do not send this check to the State Agency WIC checks beyond the deposit period will not be paid. Missing Vendor Stamp, Stamp and Resubmit.
- Unauthorized Vendor Stamp - The store's vendor stamp is no longer active. The Maine WIC Nutrition Program will not authorize payment for checks by unauthorized vendors.
- Early Cashing/Void - "Deposited Early" This means that the WIC check was used before the "First Date to Use". The Maine WIC Nutrition Program will not authorize payment for checks taken early.
- Stale Date/Void - "Deposited Late" This means that the WIC check was used after the "Last Date to Use". The Maine WIC Nutrition Program will not authorize payment for checks taken late.

- Missing Signature/Void - No authorized representative's/ proxy signature in the lower right hand corner of the check. This means the WIC participant/authorized representative/proxy did not sign the check. The check must be signed at the store during the transaction procedure, after the purchase price has been entered on the check. The cashier is required to verify that the signature on the check matches the signature on the WIC ID Folder. The Maine WIC Nutrition Program will NOT reimburse the store for a check taken without a valid signature.
- Altered/Void - Obvious Alterations. the Maine WIC Nutrition Program will not authorize payment for checks that display obvious alterations. Tears, puncture, written over to the food prescription, amount, "First-Date-To-Use" or "Last-Date-To-Use" etc.
- Unreasonable Dollar amount/Void - WIC checks redeemed for more than the "MAXIMUM PURCHASE PRICE-MUST NOT EXCEED". The WIC Program will reduce payment on WIC checks submitted in excess of the maximum redemption price for WIC products. In such cases, the Maine WIC Program shall pay no more than the maximum dollar amount. The maximum dollar value that WIC will pay is based on an average of the reported prices from each authorized vendor of the same sized stores. Payment of the reduced amount will be made by direct deposit credit to the vendor's bank account. The check will be returned to the vendor and bank fees may apply.
- Encoding Error - The vendor bank has scanned WIC check and coded check for different amount than written on WIC check. Do not send this check to the WIC Program; verify your bank statement; your bank may have encoded your check wrong.
- 2 Present/ Void Do Not Redeposit - the WIC check has already been paid.

Before requesting an appeal, the vendor must

Review the following:

- Depository bank statement reflecting WIC direct deposit credits
- WIC ACH statement detailing the direct deposit credit transaction under consideration
- Copy of the receipt verifying that the correct items in the correct amounts were sold

WIC Check Appeal Procedures

A vendor may appeal the State Agency's decision to pay a WIC check in instances in which the original WIC check was rejected due to:

- WIC Bank Error
- WIC program error
- Circumstances beyond the vendor's control

Send the following to the State Agency:

- WIC check Appeal Request** form
- WIC check** Legal WIC check copy
- Receipt** Copy of the original receipt or journal transaction report verifying the correct WIC transaction procedures

Banking Fees Many financial institutions charge their customers for items that are returned and charged back to the accounts. If your bank assesses a charge for this, it is between you and your bank. The WIC Vendor Agreement states that you will assure that each WIC check:

1. Is signed.
2. Is redeemed in the proper timeframe.
3. Does not exceed the "MAXIMUM PURCHASE PRICE" printed on the check.

The Maine CDC, WIC Nutrition Program is not responsible for any bank charges, returned checks or other fees charged to the vendor that result from the non-payment or partial payment of WIC checks. Vendors may not recover any bank charges from the WIC program, or from WIC participants or their proxies.

Additional Vendor Information Vendors may not seek reimbursement of money or return of food from WIC participants for any rejected check. The Vendor may not appeal disputes regarding WIC check payments and vendor claims.

The Maine CDC, WIC Nutrition Program cannot pay for WIC checks from other states. The Maine CDC, WIC Nutrition Program has the right to modify payment, to assess a claim, or to charge a fine for WIC checks transacted for unauthorized foods, other items, or with sales tax charged.

The Maine CDC, WIC Nutrition Program may deny payment to the Vendor for improperly redeemed checks or may require refunds for payments already made on improperly redeemed checks.

It is the responsibility of each vendor to regularly clean and ink the vendor stamps to ensure they are imprinting a clear and easily readable vendor number.

We are available, toll-free, at (800) 437-9300 to answer any questions you might have. For resources visit us at www.WICforME.com . We appreciate your dedication to the WIC Program.

Sincerely,

Maine CDC, WIC Nutrition Program Management



WIC check Appeal Request

All fields must be completed or check appeal will be denied. Mail completed form, check, and matching register receipt. **Remember to always keep a photocopy of all items being mailed, including the check.**

To: **WIC Nutrition Program, Vendor**
11 State House Station, 6th FL
Augusta, Maine 04333-0011

Send the following to the Maine CDC, WIC Nutrition Program:

- WIC check Appeal Request** form
- WIC check** Legal WIC check copy
- Receipt** Copy of the original receipt or journal transaction report verifying the correct WIC transaction procedures

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**Vendor Stamp
Number Below**

WIC Vendor Information

Business Name: _____ Phone: _____
Mailing Address: _____
City: _____ State: _____ ZIP Code: _____
Store Manager/WIC Contact _____ E-mail address: _____
Name of person filing this form: _____ Date: ____ / ____ / ____

WIC check Information

WIC Check Number: _____ Bank Rejection Reason: _____

Justification

Attach Receipt Here

WIC USE ONLY

Approved ACH Record#: _____ Letter Sent Denied

Payment Justification: _____

Processor: _____ Date: ____ / ____ / ____

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