I. FOOD DELIVERY

(Please indicate) **State Agency:** North Carolina for **FY** 2025

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

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

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

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

I. GENERAL ADMINISTRATION

II. HOME FOOD DELIVERY SYSTEMS

7 CFR 246.4(a)(14), 7 CFR 246.4(a)(14)(viii), 7 CFR 246.12(m):
Describe how the home delivery system operates including the types of authorized home food delivery contractors, the frequency of deliveries, and the procedures for documenting deliveries. Include a description of specialty infant formula, if applicable.

III. DIRECT DISTRIBUTION FOOD DELIVERY SYSTEMS

7 CFR 246.4(a)(14), 7 CFR 246.12(n):
Describe the methodology and procedures used in the direct distribution of supplemental foods, including types of foods distributed, warehouse and distribution centers, the verification process, and assurance of safety. Include a description of specialty infant formula, if applicable.

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

A. Electronic Benefit Transfer (EBT) Management – 7 CFR 246.12(y)(4)(ii):

Describe updates on any active EBT projects.

B. Food Instrument Overview – 7 CFR 246.4(a)(11)(iii), (14)(i), (vi), (xii):

Describe the policies and procedures used by the State agency in producing, monitoring, and accounting for the use of food instruments.

C. Benefit Issuance – 7 CFR 246.4(a)(11)(iii), (14)(xx); 7 CFR 246.12(r)(4); 7 CFR 246.4(a)(14)(i), (x), (xi), (xv):

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

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

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

V. RETAIL FOOD DELIVERY SYSTEMS: VENDOR MANAGEMENT

A. Participant Access –7 CFR 246.4(a)(14)(xiv), 7 CFR 246.12(l)(1)(ix):

Provide information about the State agency's definition of participant access.

B. Vendor Selection and Authorization – 7 CFR 246.4(a)(14), (15), 246.12(g)(3), (8); 7 CFR 246.12(h)(1)(ii):

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

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

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

D. Vendor Agreements –7 CFR 246.4(a)(14)(iii):

Describe information regarding the vendor agreement.

E. Vendor Training – 7 CFR 246.4(a)(14), 7 CFR 246.12(i):

Describe State and local agency procedures for training WIC Program vendors.

F. Routine monitoring – 7 CFR 246.4(a)(14), 7 CFR 246.12(j)(2):

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

G. Administrative Review of State Agency Actions – 7 CFR 246.4(a)(14), (a)(18):

Describe the procedures for conducting both full and abbreviated administrative reviews.

VI. RETAIL FOOD DELIVERY SYSTEMS: FARMERS AND FARMERS' MARKETS

(**if applicable**) – 7 CFR 246.4(a)(14)(iii), (a)(14)(xii), (a)(14)(v); 7 CFR 246.12(v):
If the State agency allows farmers / farmers markets to transact cash value benefits, describe the farmer / farmers market agreement, monitoring, and training procedures.

I. FOOD DELIVERY CHECKLIST

I. GENERAL ADMINISTRATION

1. Which of the following food delivery systems does your State agency operate? Be sure to consider how the State agency provides specialty formula to participants.
   - ☐ Home Food Delivery (please fill out section II)
   - ☐ Direct Distribution Food Delivery (please fill out section III)
   - ■ Retail Food Delivery (please fill out sections IV, V, and VI)

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): NC WIC Program Manual Chapter 11: Vendor Management

II. HOME FOOD DELIVERY SYSTEMS

■ Does not apply (proceed to next section)

1. The State agency uses home food delivery systems to:
   - ☐ Provide all WIC program foods
   - ☐ Reach select remote / rural participants
   - ☐ Reach select participants with mobility or transportation concerns
   - ☐ Provide specialty infant formula and/or medical foods
   - ☐ Other (specify): _____

2. Home food deliveries take place:
   - ☐ Monthly
   - ☐ Bi-monthly
   - ☐ Every three month
   - ☐ Other (specify): _____

3. Home food delivery vendors include:
   - ☐ Dairies
   - ☐ Private delivery service doing WIC business only
   - ☐ Private delivery service
   - ☐ Infant formula providers
   - ☐ Hospitals
   - ☐ Other (specify): _____

4. Participants who receive home food delivery:
   - ☐ Are notified in writing of the types and quantities of food they will receive
   - ☐ Indicate by authorized signature on FI, receipt, or signature device that supplemental foods were received
   - ☐ Are delivered only a one-month supply of supplemental foods per delivery
   - ☐ Other (specify): _____

5. Supplemental foods may be delivered:

I. FOOD DELIVERY CHECKLIST

☐ Only to the participant
☐ To the proxy
☐ To any adult at home during time of delivery
☐ To anyone at home during time of delivery
☐ Other (specify): _____

6. Documentation:

   a. The forms verifying delivery are reconciled against vendor invoices:
      ☐ Weekly
      ☐ Monthly
      ☐ Other (specify): _____

   b. Signatures of participants who sign the receipt are compared to signatures on file:
      ☐Yes ☐No

7. Please attach a list of the names of contractors/providers that the State agency works with to provide Home Delivery services: _____

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): _____

III. DIRECT DISTRIBUTION FOOD DELIVERY SYSTEMS

■ Does not apply (proceed to next section)

1. The State agency uses direct distribution food delivery systems to:
   ☐ Distribute all WIC program foods
   ☐ Distribute specialty infant formula and/or medical foods
   ☐ Distribute foods to accommodate the needs of select participants
   ☐ Other (specify): _____

2. The State agency uses:
   ☐ One central warehouse and delivers directly to local agencies
   ☐ One central warehouse from which foods are sent to one or more subsidiary warehouses before delivery to local agencies
   ☐ Other (specify): _____

3. Warehouses are operated by:
   ☐ State agency
   ☐ Local agencies
   ☐ Other public agency
   ☐ Under contract with private business
   ☐ Other (specify): _____

4. Warehouses used for WIC foods are also used to store other FNS program commodities (please

specify which):

☐ Yes, _____ ☐ No

5. Foods are distributed to participants:
   ☐ Grocery store fashion
   ☐ Pre-packaged
   ☐ Other (specify): _____

6. Upon receipt of foods, participants / caregivers / proxies are required to sign:
   ☐ A receipt for each food received
   ☐ A receipt for all foods received (as a whole package)
   ☐ Other (specify): _____

7. Foods are distributed to participants:
   ☐ Monthly
   ☐ Every three months
   ☐ Other (specify): _____

8. Participants with limited access to distribution sites can utilize:
   ☐ Home food delivery
   ☐ Cost-free transportation
   ☐ Other (specify): _____

9. Monitoring and Inventory Control: Describe the State agency's methods for ensuring WIC supplemental foods are adequately received, in stock, and issued. _____

   Please indicate the provisions the State agency includes in its inventory control policies for direct distribution contractors:
   ☐ Separation of duties for intake and inventory
   ☐ Stock rotation
   ☐ Performance of perpetual and physical inventory duties
   ☐ Reconciliation against issuance records
   ☐ Other (specify): Click or tap here to enter text

10. Please attach a list of the names of contractors that the State agency works with to provide Direct Distribution Delivery services: _____

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): _____

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

I. FOOD DELIVERY CHECKLIST

A. Electronic Benefit Transfer (EBT) Management

1. Does the State agency have any future EBT changes planned?
   ■ Yes ☐ No

   a. If yes, what type of changes:
      ☐ EBT contract re-procurement
      ■ Self-checkout installation at vendors
      ☐ Offline to Online EBT transition
      ☐ Other (specify): _____

   b. If yes, please provide a short description of the type of changes and when they are expected to be implemented. Some authorized vendors have

Additional information if applicable: _____

B. Food Instrument Overview

1. The State agency uses the following types of Food Instruments (check all that apply):
   ■ EBT card
   ☐ QR code
   ■ Other (e.g., paper voucher): An electronic benefit account(EBA) is

2. Please provide a description of the State agency's system for ensuring the accountability and security of food instruments and electronic benefits. Attach and cite relevant policies and procedures. North Carolina WIC Program Manual

Additional information: Please provide a facsimile of the EBT card as an Appendix or cite the location in the State agency's Food Delivery Policy: North Carolina WIC Program Manual

C. Benefit Issuance

1. The State agency:
   ☐ Requires participants to pick up food instruments at the local agency when scheduled for an in-person nutrition education or a certification appointment
   ☐ Allows benefits to be issued remotely to participants except when the participant is scheduled for nutrition education or a certification appointment
   ☐ Mails food instruments to participants
   ■ Other (specify): Up to 3 months of food benefits are

2. The State agency requires the following proof of receipt when issuing Food Instruments:
   ■ Participant / caretaker / proxy signature confirming receipt
   ■ Local agency staff initials
   ■ Documented in MIS
   ☐ Other (specify): During the remote issuance, local

I. FOOD DELIVERY CHECKLIST

3. Mailing of Food Instruments:

   a. The State agency provides local agencies with guidelines / procedures for mailing Food Instruments to participants:

      ■ Yes ☐ No

   b. The State agency has implemented the following policy regarding mailing Food Instruments (FI) (check all that apply)

      ☐ FI are sent first class mail *(first class is considered *regular* mail)
      ☐ FI are sent registered mail
      ☐ FI are sent certified mail
      ☐ FI are sent restricted mail
      ☐ Return receipt is requested on FIs sent certified mail
      ☐ Envelope specifies, "do not forward, return to sender" or "do not forward, address correction requested"
      ■ Other (specify): North Carolina WIC Program Manual

   c. The State agency approves mailing Food Instruments under the following conditions:

      ☐ Participant resides in rural area
      ☐ Participant is unable to visit clinic during operating hours (e.g., due to employment or childcare)
      ☐ Clinic management (e.g., temporary clinic closure)
      ☐ Participant safety (e.g., circumstances where participant safety can't be guaranteed at the clinic location)
      ☐ Cost effectiveness (e.g., the clinic is temporarily understaffed)
      ☐ Public Health Emergency
      ■ Other (specify): North Carolina an EBT card may be

   d. When mailing Food Instruments, documentation of issuance is:

      ☐ Signed by participant at the next in-person appointment
      ☐ Documented in the MIS by local agency staff
      ■ Other (specify): North Carolina WIC Program Manual

   e. Please describe how the state agency ensures program integrity in the mailing of food instruments: North Carolina has fully implemented

4. The State agency requires local agency staff to educate each new participant / caretaker / proxy regarding:

      ■ Authorized vendors / farmers
      ■ Transaction procedures
      ■ Transacting WIC-approved foods
      ■ Use of a proxy
      ■ Reporting problems / requesting assistance
      ■ Participant violations (i.e., selling WIC benefits)
      ■ Food Instrument security tips (i.e., regularly changing PIN)

■ Other (specify): North Carolina WIC Program Manual

5. The State agency's proxy policy includes the following:
   ☐ Limits the number of participants a single proxy may sign for, except that a proxy may pick up Food Instruments for all homeless WIC participants in a facility
   ☐ Limits proxy to specified number of Food Instrument pick-ups
   ■ Limits proxy to a minimum age
   ■ Limits proxy assignment to local WIC staff
   ☐ Proxies are required to show identification card at Food Instrument pick up
   ■ Other (specify): North Carolina WIC Program Manual

6. What are the State agency procedures for providing customer service during non-business hours for participant / vendor / farmer inquiries?
   ■ EBT toll free number
   ■ Other (specify): A 24 hour voice activated customer

7. Special Food Instrument Issuance Accommodations

   a. The State agency has established food delivery procedures in cases of natural disaster and emergencies including:
      ☐ Mailing food instruments
      ■ Remote benefit issuance
      ☐ Direct distribution
      ☐ Home food delivery
      ☐ Other (specify): North Carolina WIC Program Manual

   b. Does the State agency adapt its food delivery system to accommodate the needs of homeless individuals?
      ■ Yes ☐ No
      If yes, please cite and attach policy: Alternate Food Package issuance

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): _____

D. Food Instrument Redemption and Disposition

1. The State agency system assures 100% disposition of all Food Instruments:
   ■ Yes ☐ No
   If no, specify the circumstances that prevent 100% disposition: _____

2. For EBT systems disposition, does the State agency link the Primary Account Number (PAN) associated with the electronic transaction to valid issuance records? (This can be done by matching the electronic benefit record for the household to redemptions by the EBT card number (PAN) at the aggregate household benefit level.)
   ■ Yes ☐ No
   If no, specify how the State agency ensures disposition for EBT: _____

3. Does the disposition happen within 120 days of the first date of use for the participant?
   ■ Yes ☐ No
   If no, specify when disposition occurs: _____

4. Customer Service Standards

   a. The State agency's customer service procedures enable participant or proxies to do the following during non-business hours:
      - ■ Report a lost/stolen/damaged card
      - ■ Report other card or benefit issues
      - ■ Receive information on the EBT food balance
      - ■ Receive the current benefit end date
      - ■ Other (specify): A 24-hour voice activated customer

   b. Describe how the State agency responds to reports of lost/stolen/damaged cards within one business day of the date of the report. Lost/Stolen EBT cards are

5. Lost / Stolen / Damaged Food Instruments - Please attach and cite the policies and procedures for replacing lost, stolen, or damaged Food Instrument, including how the associated benefits are transferred within seven business days. North Carolina WIC Program Manual

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): NC WIC Program Manual Chapter 11: Vendor Management

V. RETAIL FOOD DELIVERY SYSTEMS: VENDOR MANAGEMENT

A. Participant Access

1. Please provide the State agency definition for participant access. Include full criteria, including geography, density, and any other parameters in your response: Participant access refers to the ability

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): NC WIC Program Manual Chapter 11: Vendor Management

B. Vendor Selection and Authorization

1. Number and Distribution of Authorized Vendors

   a. Does the State agency use limiting criteria to limit the number of vendors it authorizes?
      ☐ Yes ■ No

   b. If yes, check and specify the type(s) of criteria used (e.g., vendor / participant ratio of 1:100 per county):
      ☐ Vendor / participant ratio
      ☐ Vendors / local agency ratio
      ☐ Vendors / local service area or county ratio

☐ Vendors / geographic area
☐ Vendor / State agency staff ratio
☐ Statewide cap on the number of vendors
☐ Other (specify): _____

2. Vendor Application periods:

a. The State agency considers applications:
■ On an ongoing basis
☐ Annually in January a new agreement that begins in January
☐ Every two years (specify month): January
☐ Every three years (specify month): January
☐ Any time there is a participant access need
The State agency is currently under a:
☐ Federal Moratorium
☐ State agency – imposed deferral of application processing
☐ Other (specify): _____

b. If the State agency does not accept applications on an ongoing basis, please explain how the State agency processes applications if it is determined there will otherwise be inadequate participant access: N/A

3. Vendor Selection and Authorization

a. The vendor selection criteria used to select vendors for program authorization includes:

Required criteria:
■ EBT capable as defined in 7 CFR 246.12(aa)(4)(ii)
■ Competitive price criteria based on:
■ Market basket prices
■ Vendor applicant prices
■ WIC redemption data
☐ A State agency standard drawn from a price survey
■ Other (specify): Vendor redemption data
■ Minimum stocking requirements (MSR) that include the federal minimum. MSR are:
■ Statewide
☐ Peer group specific
Please attach a copy and cite: I_Food Delivery_FY2025_Appendix
■ A requirement to obtain infant formula only from sources included in the State agency's list of State licensed infant formula wholesalers, distributors, and retailers and manufacturers registered with the U.S. Food and Drug Administration
■ A business integrity criteria that includes:
■ No history during the past six years, among the vendor's owners, officers, or managers of criminal convictions or civil judgments for activities listed in 7 CFR 246.12(g)(3)(ii)

I. FOOD DELIVERY CHECKLIST

☐ No history of other business-related criminal convictions or civil judgments
☐ Other (specify): _____

II. ■ Lack of current SNAP disqualification or civil money penalty for hardship per 7 CFR 246.12(g)(3)(iii)

III. Incentive items management (if the State agency is certified to authorize A50 vendors) (specify): _____

Optional criteria

☐ A requirement to stock a full range of foods in addition to WIC supplemental foods
■ Redemption of a minimum value/volume of food instruments and CVBs
☐ Satisfactory compliance with previous vendor agreement
■ Certification by an approved State or local health department
■ Proof of authorization as a SNAP retailer, including SNAP authorization number
☐ Lack of previous WIC sanctions
■ Hours of operation which meet State agency criteria (specify): Open 6 days per week for a
■ Other (specify): A location necessary to ensure

b. Infant formula: Please attach or briefly explain the policies and procedures for compiling and distributing to authorized WIC vendors, on an annual or more frequent basis, a list of authorized infant formula wholesalers, distributors, and retailors: I_Food

c. Does the State agency assess all vendor applications not meeting selection criteria for participant access?

■ Yes ☐ No

Describe or attach and as an appendix the procedures used for assessing vendor applications for participant access: I_Food Delivery_FY2025_Appendix

d. Does the State agency authorize mobile stores?

☐ Yes ■ No

If yes, please explain the special need: _____

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation): _____

C. Vendor Cost Containment

1. Assessing for above-50-percent (A50) status:

a. Does the State agency authorize any vendors that derive more than 50 percent of their annual food sales from WIC transactions (i.e. A50 vendors)?

◯ Yes, please attach a copy of the latest FNS-approved certification and cite as an Appendix _____

◉ No

b. When does the State agency assess vendors for above-50-percent status?

- ■ At authorization
- ■ 6 months after authorization
- ■ Annually
- ☐ Other (specify): _____

c. How does the State agency assess vendors for above-50-percent status?

- ■ Use the Potential A50 Vendors report in FDP (previously WIC-6 in TIP)
- ■ Collect food sales documentation from vendor
- ■ Collect food sales documentation from another agency (specify): We obtain documentation from
- ☐ Other (specify): _____

d. If the State agency authorizes above-50-percent vendors, please provide a copy of the State agency's policies and procedures on incentive items in accordance with 7 CFR 246.12(g)(3)(iv). N/A

2. **Vendor Peer Groups** (If the State agency has an exemption to use an alternative cost containment system instead of a vendor peer group system, proceed to question 3)

a. Does the State agency establish distinct competitive price criteria and maximum allowable reimbursement levels for each vendor peer group?

■ Yes ☐ No

b. Briefly describe how the State agency considers participant access by geographic area when establishing competitive price criteria and maximum allowable reimbursement levels. To establish competitive price criteria

c. Are vendors assigned to peer groups for selection / authorization?

■ Yes ☐ No

d. Are vendors assigned to peer groups for reimbursement purposes?

■ Yes ☐ No

e. Peer groups are based on the following:

- ☐ WIC sales volume
- ☐ Gross food sales
- ☐ Number of cash registers
- ☐ Square footage
- ■ Type of Store
- ■ Location of store
- ☐ Local agency service area
- ☐ City, county, or regional divisions
- ☐ Urban, suburban, rural, island

■ ZIP codes
■ Other (specify): Urban/Non-Urban areas determined

f. Has the State agency received approval for an exemption from the requirement to use geography as one of the criteria for developing the peer groups?
○ Yes - date of most recent FNS approval: _____
● No

g. The State agency assesses the effectiveness of its peer group system and competitive price criteria to enhance system performance:
☐ Annually
☐ Biennially
■ Every three years
☐ Other (specify): _____

h. How does the State agency assess the effectiveness of its peer group system and competitive price criteria? The State agency uses geography,

i. Provide date of most recent FNS peer group assessment of effectiveness per 7 CFR 246.12(g)(4)(ii)(C): 5/20/24

ii. Using the Vendor Peer Groups Chart (see Attachment 1), describe the peer groupings that the State agency plans to use during the upcoming fiscal year (e.g., supermarkets, medium and small grocery stores, convenience stores).

3. Vendor Exemptions

a. If the State agency has no peer group system, and instead uses an alternative cost containment system:

i. Has the State agency received approval for an exemption from the vendor peer group system requirement (7 CFR 246.12(g)(4)(v))?
○ Yes, date of most recent approved exemption _____

● No

ii. Describe the State agency's alternative system for comparing the prices of new vendor applicants and currently authorized vendors and selecting for authorization or reauthorization vendors that offer the program the most competitive prices: N/A

b. Does the State agency exempt from competitive price criteria pharmacies that provide only exempt infant formula or WIC-eligible medical foods to participants?
■ Yes ☐ No
If yes, please provide the notification sent to FNS explaining the exemption.
8/14/2023 - FFY 2024 State Plan

c. Did the State agency exempt non-profit WIC vendors (other than health or human services agencies that provide food under contract with the State agency) from competitive price criteria?

☐ Yes ■ No

D. Vendor Agreements

1. Please provide a copy of the State agency's current standard vendor agreement as an appendix and cite: I_Food Delivery_FY2025_Appendix

2. Describe how the State agency transmits to vendors the sanction schedule and the process for notification of violations. Authorized vendors receive

3. Does the State agency use a nonstandard vendor agreement to meet any unique circumstances (e.g. commissaries, etc.)?

   ◉ Yes, if yes, please attach a copy of the agreement as an appendix and cite: A nonstandard

   ○ No

4. Does the State agency delegate the signing of vendor agreements to its local agencies?

   ◉ Yes, provide a description of the supervision and instruction provided to local agencies to ensure the uniformity and quality of this activity: Local agencies receive interactive

   ○ No

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation):

_____

E. Vendor Training

1. Does annual vendor training cover the required content in 7 CFR 246.12(i)(2)?

   ◉ Yes ○ No (please explain why): _____

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

   ■ On-site (in-store) meetings/conferences
   ■ Off-site meetings/conferences
   ■ During routine monitoring visits (e.g., educational buys)
   ■ When specialized technical assistance is requested
   ■ Written materials (e.g., newsletters)
   ■ Audio or video recordings
   ■ Teleconference, video conference, or webinars
   ☐ Vendor hotline
   ■ Other (specify): State or local agency website and

3. Vendors or vendor representatives receive interactive training as follows:

   ■ At or before initial authorization
   ■ At least once every three years

■ Annually or more frequently than once every three years

4. Delegation of Vendor training

   a. The State agency delegates its vendor training to:
      ☐ None (State agency conducts all vendor training)
      ■ Local agencies
      ☐ A contractor (specify): _____
      ☐ A vendor association / representative (specify): _____
      ■ Other (specify): State agency staff, as necessary.

   b. If not conducted by the State agency, please provide a description of the supervision and instruction provided to the training party to ensure the uniformity and quality of training: Local agencies receive interactive

5. Documentation of Vendor Training

   a. Please describe how the State agency documents the content of and vendor participation in vendor training. Vendors or vendor representatives

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation):
NC WIC Program Manual Chapter 11: Vendor Management

F. Routine Monitoring

1. Routine monitoring visits

   a. Visits are conducted by:
      ☐ State agency staff
      ■ Local agency staff
      ☐ Contractor
      ☐ Other (specify): _____

   b. If not conducted by the State agency, please provide a description of the supervision and instruction provided to the monitoring party to ensure the uniformity and quality of monitoring: Local agencies receive interactive ven

   c. The following procedures are used in determining whether a vendor is selected for a routine monitoring visit:
      ☐ Random selection
      ☐ Periodic / scheduled training
      ■ Periodic / scheduled review
      ☐ Complaints
      ☐ Other (specify): _____

2. Vendor monitoring improvement plan - Please briefly describe the State agency's plan to follow

up on last year's monitoring results in the coming fiscal year: The State agency ensures that

3. Vendor Sanctions

a. Attach the State agency's sanction schedule and the process for vendor notification. Cite attachments: I_Food Delivery_FY2025_Appendix

b. Does the State agency's sanction schedule contain the required vendor sanctions as described under regulation 7 CFR 246.12(l)?
■ Yes ☐ No
If no, please explain why: _____

c. Does the State agency impose civil money penalties in lieu of permanent disqualifications?
■ Yes ☐ No
If yes, please describe the instances in which this occurs: The State Agency may impose civil

d. Pursuant to § 246.12(l)(1)(i) - In lieu of disqualifying a vendor for trafficking convictions, does the State agency choose to impose a civil monetary penalty when it determines and documents that:
■ (A) Disqualification of the vendor would result in inadequate participant access; or
☐ (B) The vendor had, at the time of the violation, an effective policy in place to prevent trafficking; and the ownership of the vendor was not aware of, did not approve of, and was not involved in the conduct of the violation.

If yes, how many times has the State agency used this option in the previous two fiscal years? 0

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation):
_____

G. Administrative Review of State Agency Actions

1. Please attach a copy of the administrative appeals process for vendors, farmers, and farmers' markets (citation): I_Food Delivery_FY2025_Appendix

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation):
_____

VI. RETAIL FOOD DELIVERY SYSTEMS: FARMERS / FARMER'S MARKETS

■ Does not apply

1. **Food instrument:**

a. Please describe the type of food instrument used for CVB at farmers markets:
☐ QR code sticker

☐ QR code on mobile app
☐ Printed QR code
☐ Mobile wallet
☐ EBT card
☐ Other (specify): _____

2. **General Management**

a. Is CVB at farmers markets state-wide?
Yes No, selected areas (specify): _____

b. Does the State agency delegate any tasks related to the management of the Farmers or Farmers' Markets to another entity?
Yes, to whom? _____ No

If yes, which tasks?
☐ Authorization / agreements
☐ Monitoring
☐ Training
☐ Administrative reviews
☐ Other (specify): _____

c. Does the State agency authorize farmers / farmers markets to accept CVB based on authorization by the WIC Farmers Market Nutrition Program (FMNP)?
☐ Yes ☐ No
If no, please describe the selection criteria: _____

3. **Agreements:** Please provide a copy of the State agency's current farmer / farmers market agreement as an appendix and cite: _____

4. **Training:**

a. How often is training conducted for farmer / farmers markets?
☐ At or before initial authorization
☐ Annually
☐ At least every three years following initial authorization
☐ Other (specify): _____

b. How is training conducted?
☐ Newsletter
☐ Web-Based Training
☐ Video Conference
☐ In person

☐ Other (specify): _____

c. Training is conducted by:
☐ State agency
☐ Local agency
☐ Contractor
☐ Other (specify): _____

d. If training is conducted by an entity other than the State agency, please provide a description of the supervision and instruction provided to the entity responsible for training to ensure the uniformity and quality of this Training: _____

5. **Monitoring:**

a. Farmers/farmers' markets are included in the:
☐ FMNP sample of farmers / farmers markets for monitoring
☐ WIC sample of vendors for monitoring
☐ Other (specify): _____

b. Monitoring includes:
☐ Covert methods, such as compliance buys
☐ Overt methods, such as routine monitoring
☐ Other (specify): _____

ADDITIONAL DETAIL – Food Delivery Appendix and/or Procedure Manual (citation):
_____