2023
WIC State Plan
(Alabama)
July 19, 2022

Ms. Sandra Benton-Davis
Branch Chief
Supplemental Nutrition Programs
SERO Food and Nutrition Services
61 Forsyth Street, Suite 8T36
Atlanta, GA 30303

Dear Ms. Benton-Davis:

Subject: Alabama State Plan and Procedure Manual

The Alabama Department of Public Health (ADPH), Bureau of Family Health Services, is pleased to provide the Fiscal Year (FY) 2023 State Plan and Procedure Manual. During FY 2022, the Women, Infants, and Children (WIC) Program had many accomplishments that enabled the program to continue to provide benefits and nutrition education to participants during the COVID-19 pandemic and amid the nationwide formula shortage. The program will continue to focus on retaining WIC participants and improving benefit utilization by increasing food instrument redemption during FY 2023.

ADPH has provided WIC services for over 45 years. It is an honor to continue to serve the population in greatest need of nutrition counseling and nutritious foods. The program will continue to operate in accordance with the FY 2023 State Plan and the most current WIC federal regulations.

If you have questions regarding Alabama’s FY 2023 WIC State Plan and Procedure Manual, please call Allison Hatchett, Program Director, at 334-206-2927.

Sincerely,

[Signature]

Scott Harris, M.D., M.P.H.
State Health Officer

SH/ARH
Enclosures
### DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

<table>
<thead>
<tr>
<th>1. Type of Federal Action:</th>
<th>2. Status of Federal Action:</th>
<th>3. Report Type:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. contract</td>
<td>a. bid/offer/application</td>
<td>a. initial filing</td>
</tr>
<tr>
<td>b. grant</td>
<td>b. initial award</td>
<td>b. material change</td>
</tr>
<tr>
<td>c. cooperative agreement</td>
<td>c. post-award</td>
<td></td>
</tr>
<tr>
<td>d. loan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. loan guarantee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. loan insurance</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**For Material Change Only:**
- year ________ quarter ________
- date of last report ________

<table>
<thead>
<tr>
<th>4. Name and Address of Reporting Entity:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Prime</td>
</tr>
<tr>
<td>☐ Subawardee</td>
</tr>
<tr>
<td>Tier ________, if known:</td>
</tr>
</tbody>
</table>

**Congressional District, if known:** 4c

<table>
<thead>
<tr>
<th>6. Federal Department/Agency:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Federal Program Name/Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2023 WIC State Plan</td>
</tr>
<tr>
<td>CFDA Number, if applicable: 10.557</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Federal Action Number, if known:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. Award Amount, if known:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10. a. Name and Address of Lobbying Registrant</th>
</tr>
</thead>
<tbody>
<tr>
<td>(if individual, last name, first name, MI):</td>
</tr>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

| b. Individuals Performing Services (including address if different from No. 10a) |
| (last name, first name, MI): |
| N/A |

**Signature:**

**Print Name:** Scott Harris, M.D., M.P.H.

**Title:** State Health Officer

**Telephone No.:** 334-206-5200

**Date:** 7/26/1

---

**Federal Use Only:** Authorized for Local Reproduction

Standard Form LLL (Rev. 7-97)
INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.

2. Identify the status of the covered Federal action.

3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.

4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.

5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.

6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.

7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CPDA) number for grants, cooperative agreements, loans, and loan commitments.

8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-80-001."  

9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.

10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).

11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.
Section 319 of Public Law 101-121 (31 U.S.C.), signed into law on October 23, 1989, imposes new prohibitions and requirements for disclosure and certification related to lobbying on recipients of Federal contracts, grants, cooperative agreements, and loans. Certain provisions of the law also apply to Federal commitments for loan guarantees and insurance; however, it provides exemptions for Indian tribes and tribal organizations.

Effective December 23, 1989, current and prospective recipients (and their subtier contractors and/or subgrantees) will be prohibited from using Federal funds, other than profits from a Federal contract, for lobbying Congress or any Federal agency in connection with the award of a particular contract, grant, cooperative agreement or loan. In addition, for each award action in excess of $100,000 (or $150,000 for loans) on or after December 23, 1989, the law requires recipients and their subtier contractors and/or subgrantees to: (1) certify that they have neither used nor will use any appropriated funds for payment to lobbyists; (2) disclose the name, address, payment details, and purpose of any agreements with lobbyists whom recipients or their subtier contractors or subgrantees will pay with profits or nonappropriated funds on or after December 23, 1989; and (3) file quarterly updates about the use of lobbyists if materials changes occur in their use. The law establishes civil penalties for noncompliance.

If you are a current recipient of funding or have an application, proposal, or bid pending as of December 23, 1989, the law will have the following immediate consequences for you:

- You are prohibited from using appropriated funds (other than profits from Federal contracts) on or after December 23, 1989, for lobbying Congress or any Federal agency in connection with a particular contract, grant, cooperative agreement, or loan;

- you are required to execute the attached certification at the time of submission of an application or before any action in excess of $100,000 is awarded; and

- you will be required to complete the lobbying disclosure form if the disclosure requirements apply to you.

Regulations implementing Section 319 of Public Law 101-121 have been published as an Interim Final Rule by the Office of Management and Budget as Part III of the February 28, 1990, Federal Register (pages 6736-6746).
UNITED STATES DEPARTMENT OF AGRICULTURE

CERTIFICATION REGARDING LOBBYING - CONTRACTS, GRANTS, LOANS
AND COOPERATIVE AGREEMENTS

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan or cooperative agreement;

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Alabama Department of Public Health

Organization Name

Scott Harris, M.D., M.P.H., State Health Officer

Name and Title of Authorized Representative

Signature  7/16/22
U.S. DEPARTMENT OF AGRICULTURE
FOOD AND NUTRITION SERVICE
FEDERAL-STATE
SUPPLEMENTAL
NUTRITION PROGRAMS AGREEMENT

This information is being collected to assist the Food and Nutrition Service in entering into written agreements with State agencies desiring to administer the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), the WIC Farmers' Market Nutrition Program (FMNP), and/or the Senior Farmers' Market Nutrition Program (SFMNP). This is a mandatory collection and FNS uses the information to make funds available to State agencies for the administration of one or more programs. This collection does not request any personally identifiable information under the Privacy Act of 1974. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0332. The time required to complete this information collection is estimated to average 1.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22302 ATTN: PRA (0584-0332). Do not return the completed form to this address.

<table>
<thead>
<tr>
<th>1. NAME OF STATE AGENCY</th>
<th>2. STATE</th>
<th>3. EFFECTIVE DATE</th>
<th>4. PROGRAM(S) ADMINISTERED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama Department of Public Health</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bureau of Family Health Services</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women, Infants, and Children (WIC) Program</td>
<td>AL</td>
<td>10/01/2022</td>
<td>WIC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. UNIVERSAL IDENTIFIER NUMBER(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>613842061</td>
</tr>
</tbody>
</table>

No monies or other benefits may be paid out under this program unless this Agreement is completed and filed as required by existing regulations (7 CFR Parts 246, 248, and 249).
MEMBER DELEGATE CLAUSE

No Member of or Delegate to Congress, or Resident Commissioner shall be admitted to any share or part of this Agreement or to any benefit that may arise therefrom; but this provision shall not be construed to extend to this Agreement if made with a corporation for its general benefit.

CERTIFICATION REGARDING LOBBYING

The State agency, if applicable, has executed and attached to the agreement the required certification regarding lobbying and if applicable the Standard Form-LLL, "Disclosure of Lobbying Activities."

<table>
<thead>
<tr>
<th>STATE AGENCY</th>
<th>U.S. DEPARTMENT OF AGRICULTURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRINTED NAME</td>
<td>PRINTED NAME</td>
</tr>
<tr>
<td>Scott Harris, M.D., M.P.H.</td>
<td></td>
</tr>
<tr>
<td>BY (Signature)</td>
<td>BY (Signature)</td>
</tr>
<tr>
<td>TITLE</td>
<td>TITLE</td>
</tr>
<tr>
<td>State Health Officer</td>
<td></td>
</tr>
<tr>
<td>DATE</td>
<td>DATE</td>
</tr>
<tr>
<td>7/6/22</td>
<td></td>
</tr>
</tbody>
</table>
In order to effectuate the purpose of Section 17 of the Child Nutrition Act of 1966, as amended (42 U.S.C. 1786), and Section 4402 of the Farm Security and Rural Investment Act of 2002 as amended (7 U.S.C. 3007), the United States Department of Agriculture, hereinafter referred to as the "Department," and the State Agency (item 1 above) agree as follows:

The Department agrees to make funds available to the State Agency for the administration within the State (item 2 above) of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC Program), the WIC Farmers’ Market Nutrition Program (FMNP), and/or the Senior Farmers’ Market Nutrition Program (SFMNP) in accordance with applicable regulations (7 CFR Parts 246, 248, and 249) and any amendments thereto.

The State Agency agrees to accept Federal funds for expenditure in accordance with the applicable statutes and regulations, and any amendment thereto, and to comply with all the provisions of such statutes and regulations, and amendments thereto.

The State Agency further agrees to support full use of Federal funds provided to the State Agency for the administration of the WIC Program and/or the FMNP, and exclude such funds from State budget restrictions or limitations including, at a minimum, hiring freezes, work furloughs, and travel restrictions affecting the WIC Program or the FMNP.

Copies of the current regulations are attached hereto and made a part hereof. In the event of a proposed amendment of the regulations, if the State Agency gives to the Department, prior to the effective date of the amendment, written notice of its determination to discontinue the program or program activities for which administrative expenses are available, this Agreement shall be terminated as of the effective date of the amendment.

This Agreement shall be effective commencing on the date specified (item 3 above) and ending one year thereafter, unless terminated earlier as provided herein. The Department may renew this Agreement each year thereafter, by notice in writing given to the State Agency as soon as practicable after funds have been appropriated by Congress for carrying out the WIC Program, the WIC Farmers’ Market Nutrition Program, and/or the Senior Farmers’ Market Nutrition Program during each such year. In any event, however, either party hereto may terminate this Agreement, by giving at least thirty days written notice.

Upon termination or expiration of this Agreement, as provided herein, the State Agency shall make no further disbursement of funds paid to the State Agency in accordance with this Agreement except to meet State expenses incurred on or prior to the termination or expiration date, notwithstanding any termination or expiration of this Agreement, and the State Agency shall promptly return all remaining funds made available to it by the Department. The obligations of the State Agency under the above cited regulations shall continue until the requirements hereof have been fully performed.

Assurance of Civil Rights Compliance

The State Agency hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.), Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) as implemented by Department of Justice regulations at (28 CFR Parts 35 and 36); Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." (August 11, 2000), all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the Agency receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the State Agency agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant, or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with Federal financial assistance extended to the Program applicant by USDA. This includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

This assurance is binding on the State Agency, its successors, transferees, and assignees as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the State Agency.
Equal Employment Opportunity Clause

During the performance of this Agreement insofar as it relates to State administrative expenses, the State Agency agrees that:

(1) the State Agency will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, handicap, or national origin. The State Agency will take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to their race, color, religion, sex, age, handicap, or national origin.

Such action shall include, but not be limited to the following: employment, upgrading, demotion, or transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. The State Agency agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Department setting forth the provisions of this nondiscrimination clause.

(2) The State Agency will, in all solicitations or advertisements for employees placed by or on behalf of the State Agency, state that all qualified applications will receive consideration for employment without regard to race, color, religion, sex, age, handicap, or national origin.

(3) The State Agency will send to each labor union or representative of workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the Department, advising the labor union or workers' representative of the State Agency's commitments under Section 202 of Executive Order No. 11246 of September 24, 1965, and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

(4) The State Agency will comply with all provisions of Executive Order No. 11246 of September 24, 1965, and of the rules, regulations, and relevant orders of the Secretary of Labor.

(5) The State Agency will furnish all information and reports required by Executive Order No. 11246 of September 24, 1965, and by the rules, regulations, and orders of the Secretary of Labor, or pursuant thereto, and will permit access to his books, records and accounts by the Department and the Secretary of Labor for purposes of investigation to ascertain compliance with the nondiscrimination clauses of this Agreement or with any such rules, regulations, and orders.

(6) In the event of the State Agency's noncompliance with such rules, regulations, or orders, this Agreement as it relates to State administrative expenses may be cancelled, terminated or suspended in whole or in part and the State Agency may be declared ineligible for further Government contracts in accordance with procedures authorized in Executive Order No. 11246 of September 24, 1965, and such other sanctions may be imposed and remedies invoked as provided in Executive Order No. 11246 of September 24, 1965, or by rules, regulations, or orders of the Secretary of Labor, or as otherwise provided by law.

(7) The State Agency will include the provisions of items (1) through (7) in every subcontract or purchase order unless exempted by rules, regulations, or orders of the Secretary of Labor issued pursuant to Section 204 of Executive Order No. 11246 of September 24, 1965, so that such provisions will be binding upon each subcontractor or vendor. The State Agency will take such action with respect to any sub-contract or purchase order as the Department may direct as a means of enforcing such provisions, including sanctions, for noncompliance provided, however, that in the event the State Agency becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the Department. The State Agency may request the United States to enter into such litigation to protect the interests of the United States.

Under applicable regulations the Equal Employment Opportunity clause is not applicable to any Agency of the State which does not participate in, work on, or under this Agreement insofar as it relates to State administrative expenses.

Assurance of Drug-Free Workplace

The State agency agrees to maintain a drug-free workplace in compliance with the Drug-Free Workplace Act of 1988, Public Law 100-690, Title V, Subtitle D, and 7 CFR part 3021.
Order of Contents

Goals and Objectives

Chapter I  Vendor and Farmer Management  I-1
Chapter II  Nutrition Services  II-1
Chapter III  Management Information Systems (MIS)  III-1
Chapter IV  Organization and Management  IV-1
Chapter V  Nutrition Services and Administration (NSA) Expenditures  V-1
Chapter VI  Food Funds Management  VI-1
Chapter VII  Caseload Management  VII-1
Chapter VIII  Certification, Eligibility and Coordination of Services  VIII-1
Chapter IX  Food Delivery and Food Instrument (FI) Accountability and Control  IX-1
Chapter X  Monitoring and Audits  X-1
Chapter XI  Civil Rights  XI-1
Goals and Objectives
Alabama Women, Infants and Children (WIC) Program
Goals and Objectives, FY 2023

CHAPTER I: VENDOR MANAGEMENT

Goal
Ensure authorized WIC vendors comply with program requirements and provide participants with a positive shopping experience.

Objectives
1. Identify key problem areas that impact the overall WIC shopping experience and develop effective solutions for the identified problems.
2. Develop innovative training materials for authorized WIC vendors to improve program compliance and the shopping experience.
3. Promote the use of the Vendor Information Publication (VIP) e-newsletter as a training tool for authorized WIC vendors.
4. Strengthen Program Integrity by using the routine monitoring visit as an opportunity to provide education and technical assistance to authorized WIC vendors.
5. Provide education and support to district/clinic staff regarding the eWIC shopping experience and Vendor Management.

CHAPTER II: NUTRITION SERVICES

Goal
Improve participant health by developing innovative approaches to nutrition education and breastfeeding promotion and support.

Objectives
1. Continue to implement a biennial district nutrition education plan with additional state level support to educate WIC enrolled women and children of the health benefits of WIC foods and how WIC foods can help improve oral health.
2. Continue to develop/revise WIC nutrition education publications for clinic use to ensure current nutrition and breastfeeding recommendations are included and make resources available in Spanish, as applicable.
3. Continue to address the problem of overweight/obesity in the WIC population and participate in the Alabama Obesity Task Force (AOTF) to implement the AOTF State Plan.
4. Encourage a statewide increase in the number of secondary nutrition education (SNE) contacts offered by promoting the use of WICHealth.org, which documents topic completion in Crossroads, and/or allowing SNE contacts via telephone for participants between required face to face visits.
5. Continue to provide training for staff working in the WIC program to include Value Enhanced Nutrition Assessment (VENA), nutrition counseling strategies and other needs identified by District Nutrition directors and/or State Office staff.
6. Continue efforts to develop and implement an interactive website and WIC mobile
application (AL WIC app) for WIC promotion, information distribution, nutrition education, breastfeeding support, program referral, staff development, and other applications.

7. Continue efforts to increase the number of breastfed infants. Data from the FY 2022 Alabama WIC Financial Management and Participation Report (798), 3rd quarter 2022, indicated an average of 1,751 infants were fully breastfed, representing 6.0% (percent) of participating infants. The average number of partially breastfed infants during the 3rd quarter 2022 was 977 or 3.4% (percent) of participating infants. During the same period, the number of fully breastfed infants increased by 8.4% (percent), and the number of partially breastfed infants increased by 4.5% (percent). The goal for FY 2023 is to increase the numbers of fully breastfed and partially breastfed infants by 8.0% (percent) over FY 2022 numbers.

8. Establish access to 24-hour breastfeeding virtual support for Alabama WIC participants via contract with a commercial provider.

9. Facilitate completion of WIC Breastfeeding Curriculum training for all Alabama WIC staff, as indicated by role, through live virtual training sessions and/or session recordings.

10. Ensure that at least one WIC provider in each Alabama WIC district is an International Board Certified Lactation Consultant (IBCLC) by reimbursing tuition costs associated with completing and passing required lactation specific education and reimbursing the IBCLC exam fee for staff who successfully pass the exam.

11. Continue expanding the Breastfeeding Peer Counselor Program by increasing the number of Breastfeeding Peer Counselors by 25% (percent) and having at least 1 Peer Counselor in each district. As of August 2022, there are 12 peer counselors employed by Alabama’s WIC Program who cover 6 of the 8 districts.

CHAPTER III: MANAGEMENT INFORMATION SYSTEMS (MIS)

Goal
Ensure the Crossroads Computer System is kept up to date to effectively provide quality services in a timely manner and meet federal regulations and policies.

Objectives
1. Continue to update Crossroads as needed to reflect United States Department of Agriculture (USDA) policies.
2. Continue to participate in the Crossroads User Group with Rhode Island, Virginia and West Virginia.
3. Continue to market and demonstrate Crossroads to other state WIC agencies.
4. Test and implement system design changes identified by the User Group.
5. Maintain and add system interfaces that improve clinic efficiency.

CHAPTER IV: ORGANIZATION AND MANAGEMENT

Goal
Increase efficiency while facing increasing Program requirements.
Objectives

1. Continue to pursue filling critical vacancies to ensure adequate staffing infrastructure in the State WIC Office.
2. Continue to provide on-going support and assistance to county and district staff for improving clinic efficiency, staffing, and productivity.
3. Continue to develop spreadsheets and reports to assist district staff with budget and priority issues.
4. Continue to monitor clinical staffing and productivity standards.
5. Evaluate staffing and tasks to reflect new business operations with eWIC issuance and modify as needed.

CHAPTER V: NUTRITION SERVICES AND ADMINISTRATION (NSA) EXPENDITURES

Goal
Monitor expenditures and staffing to ensure efficient use of funds.

Objectives
1. Continue to work with District management to ensure clinic costs are within budget and quality services are maintained.
2. Continue to monitor cost accounting quarterly and make staffing adjustments as needed to stay within budget and caseload needs.
3. Focus clinic efforts on maintaining caseload and conducting outreach efforts.
4. Pursue new funding opportunities to improve efforts and maximize USDA funding.

CHAPTER VI: FOOD FUNDS MANAGEMENT

Goal
Monitor food costs, availability, and purchases in order to efficiently spend food dollars.

Objectives
1. Continue to work with formula manufacturers and vendors to streamline the ordering/billing process, and to reduce formula costs.
2. Continue to analyze and monitor food costs through food package review, formula purchase reports, and vendor monitoring.

CHAPTER VII: CASELOAD MANAGEMENT

Goal
Improve methods to maintain and/or increase caseload.

Objectives
1. Monitor reports to ensure adequate participation and show rates for maintaining caseload and productivity of staff.
2. Continue to utilize reports, phone calls, reminders, letters, etc. in order to increase participation rates.
3. Support district/clinic plans for maintaining caseload or increasing caseload as funds allow.
4. Continue to monitor caseload reports to make sure participants/applicants are being seen without wait lists and to update clinic appointment schedules as needed.
5. Support alternative clinic locations and times in order to accommodate current participants and potential eligible participants.
6. Monitor enrollment and improve in reach efforts for participants enrolled but not actively participating in WIC.

CHAPTER VIII: CERTIFICATION, ELIGIBILITY AND COORDINATION OF SERVICES

Goal
Improve quality in delivery of services to WIC participants in Alabama by enhancing nutrition assessment.

Objectives
1. Continue to explore methods and resources for increasing clinic efficiency to better enable clinic staff in providing quality nutrition services.
2. Continue to evaluate the nutrition assessment protocols to ensure that VENA guidelines are being met.
3. Continue to strengthen provider competencies per VENA Plan.

CHAPTER IX: FOOD DELIVERY/FOOD INSTRUMENT ACCOUNTABILITY AND CONTROL

Goal
Continue to monitor food benefit issuance and redemption to ensure accountability according to regulations.

Objectives
1. Continue to enhance the accountability of food benefit issuance through quality assurance measures.
2. Continue to monitor the Crossroads MIS programming for state food prescription changes as well as formula name/package size changes and make enhancements as needed.

CHAPTER X: MONITORING AND AUDITS

Goal
Evaluate the quality of care and services provided to participants through an effective and comprehensive monitoring system.
Objectives
1. Continue to maintain an ongoing management and evaluation system to evaluate the quality of participant care, evaluate compliance with federal guidelines and agency policies, and to assist in policy development and training needs.
2. Every two years, local agencies shall conduct a self-audit that encompasses participant care and clinic operations as outlined in the written quality assurance tool.

CHAPTER XI: CIVIL RIGHTS

Goal
Ensure that all staff receives comprehensive Civil Rights training to include customer service to prevent Civil Rights problems or complaints.

Objectives
1. Continue to require completion of Civil Rights training module online.
2. Continue to monitor through Quality Assurance (QA) that staff Civil Rights training and Program policies are being followed.
Chapter I

Vendor and Farmer Management
I. Vendor and Farmer Management

(Please indicate) State Agency: Alabama for FY: 2023

Vendor and farmer/farmers’ market management includes all those activities associated with selecting, authorizing, training, monitoring, and investigating the State agency’s vendor and farmer/farmers’ market population for the purpose of reducing fraud and abuse in the WIC Program food delivery system.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

A. Vendor Selection and Authorization – 7 CFR 246.4(a)(14)(i), (ii), and (iii): identify the types of food delivery systems used in the State agency’s jurisdiction. Describe, if used, the State agency’s limiting criteria. Describe the State agency’s selection criteria and attach a sample vendor agreement. Describe, if applicable, the supervision and instruction the State agency provides to local agencies to which vendor agreement signing has been delegated.

B. Vendor Training – 7 CFR 246.4(a)(14)(xii): describe State and local agency procedures for training WIC Program vendors and farmers/farmers’ markets and for documenting all relevant training.

C. High-Risk Vendor Identification Systems – 7 CFR 246.12(j)(3): describe the policies and procedures for identifying and monitoring high-risk vendors through the use of vendor peer groups, food instrument and cash-value voucher (CVV)/ cash value benefit (CVB) redemption screening, analysis of overcharging and other violations, the use of price lists, tracking complaints, or other means. This section may be submitted separately because it is no longer a State Plan requirement but must still be approved by FNS.

D. Routine Monitoring – 7 CFR 246.4(a)(14)(iv): 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.

E. Compliance Investigations – 7 CFR 246.4(a)(14)(iv): describe the investigative practices and procedures used to conduct both compliance buys and inventory audits for the purpose of detecting, tracking, and documenting vendor noncompliance with program requirements.

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

G. Coordination with the Supplemental Nutrition Assistance Program (SNAP) – 7 CFR 246.4(a)(14)(ii), (a)(14)(iv) and 246.12(h)(3)(xxvi): describe the methods and procedures used to coordinate the monitoring and sharing of information on vendors who participate in both the WIC Program and SNAP.

H. Staff Training on Vendor Management – 7 CFR 246.4(a)(14)(iii), (a)(14)(iv), and (a)(14)(xii): describe the distribution of responsibilities and activities of those individuals at both the State and local levels who are involved in vendor management activities. If applicable, describe the supervision and instruction the State agency provides to
local agencies to which vendor management activities have been delegated.

I. **Participant Access** - 7 CFR 246.4(a)(15); 246.12(b), (q)(1), (q)(8): provide information about the State agency’s definition of participant access.

J. **Farmer/Farmers’ Market Authorization** – 7 CFR 246.4(a)(14)(iii), (a)(14)(xii), and 246.12(v): if the State agency authorizes farmers/farmers’ markets to accept CVVs/CVBs, describe the authorization process.

K. **Farmer/Farmers’ Market Agreements** – 7 CFR 246.4(a)(14)(iii), (a)(14)(xii), and 246.12(v): if the State agency authorizes farmers/farmers’ markets to accept CVVs/CVBs, describe the State agency’s agreement with the farmers/ farmers’ markets and attach a sample farmer/farmers’ market agreement.

L. **Farmer/Farmers’ Market Training** – 7 CFR 246.4(a)(14)(iii), (a)(14)(xii), and 246.12(v): if the State agency authorizes farmers/farmers’ markets to accept CVVs/CVBs, describe the training provided to the authorized farmers/ farmers markets.

M. **Farmer/Farmers’ Market Monitoring** – 7 CFR 246.4(a)(14)(iii), (a)(14)(xii), (a)(14)(v), and 246.12(v): if the State agency authorizes farmers/farmers’ markets to accept CVVs/CVBs, describe the criteria used for selecting farmers/farmers markets for routine monitoring as well as the method(s) and scope of on-site monitoring of the farmers/farmers markets.

N. **Farmer/Farmers’ Market Sanctions, Claims, and Appeals** – 7 CFR 246.4(a)(14)(iii), (a)(14)(v), (a)(14)(xii), and 246.12(v): if the State agency authorizes farmers/farmers’ markets to accept CVVs/CVBs, describe the farmer/farmers’ market sanctions, claims, and appeals and attach a copy of the farmer/farmers’ market sanction schedule (which should be included in the farmer/farmers’ market agreement as well).
A. 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 (specify):
      ☐ Vendors/local agency or clinic ratio (specify):
      ☐ Vendors/local service area or county ratio (specify):
      ☐ Vendors/geographic area (e.g., number per mile, city block, zip code) (specify):
      ☐ Vendor/State agency staff ratio (specify):
      ☐ Statewide cap on the number of vendors (specify):
      ☐ Other (specify):

      ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

2. Vendor Application Periods
   a. The State agency considers applications; check all that apply:
      ☒ On an on-going basis
      ☐ Annually in (month) for a new agreement begins (month:)
      ☐ Every two years (specify month):
      ☐ Every three years (specify month):
      ☐ Any time there is a participant access needed
      ☐ The State agency is currently under a:
         ☐ Federal Moratorium (specify time frame):
         ☐ State agency-imposed deferral of application processing (specify time frame and conditions):
      ☒ Other (specify): During Contract Renewal Year, applications submitted on or after June 1 will not be considered for authorization until October 1.

      ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

3. Vendor Selection and Authorization
   a. The vendor selection criteria used to select vendors for program authorization include:

      Required criteria:
      ☒ EBT capable as defined in 7 CFR 246.12(aa)(4)(ii)
      ☒ A competitive price criterion based on:
         ☒ Vendor applicant price lists
         ☒ WIC redemption data
         ☐ A State agency standard drawn from a price survey
         ☐ A standard drawn from another source (specify):
         ☐ Other (specify):
      ☒ A minimum variety and quantity of supplemental foods criterion that is:
         ☒ Statewide
- Peer group specific
- 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 criterion 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)
  - No history of other business-related criminal convictions or civil judgments
  - Other (specify):
    - Lack of a current SNAP disqualification or civil money penalty for hardship per 7 CFR 246.12(g)(3)(iii)

Optional criteria:
- A requirement to stock a full range of foods in addition to WIC supplemental foods
- A location necessary to ensure adequate participant access
- Redemption of a minimum number/volume of food instruments and CVVs/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
- Hours of operation which meet State agency criteria (specify): Minimum of 8 hours per day, 6 days per week
- Lack of previous WIC sanctions
- Other criteria (specify): Minimum 3,000 square feet of retail space, less than 50 percent of total food sales from the redemption of WIC Food Instruments, 60 percent staple foods requirement.
- Not applicable (explain):

b. Explain how the State agency develops and uses the competitive price criteria identified in item 3a to select vendors for authorization.

  (1) Does the State agency exempt from competitive price criteria pharmacies that provide only exempt infant formula or WIC-eligible medical foods to participants?
  - ☒ No

  (2) 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?
  - ☒ No

c. When does the State agency assess vendors for above-50-percent status?
  - ☒ At authorization
  - ☒ 6 months after authorization
  - ☐ Annually
  - ☒ Other (specify): At re-authorization

d. How does the State agency assess vendors for above-50-percent status? Check all that apply:
  - Use the A50 status determination report in the Food Delivery Portal (e.g., WIC-6 in The Integrity Profile)
  - Collect food sales data documentation from the vendor
  - Collect food sales data documentation from another agency (specify):
e. Does the State agency authorize vendors that derive more than 50 percent of their annual food sales from WIC transactions (i.e., above-50-percent vendors)?

☐ Yes  ☒ No  If “No,” please proceed to item 3f.
If “Yes,” please respond to the following:

(1) How many above-50-percent vendors are currently authorized? (include all above-50-percent vendors, not just WIC-only vendors)

(2) Does the State agency allow above-50-percent vendors to provide incentive items?

☐ Yes  ☐ No  If “No,” please proceed to item 3f.
If “Yes,” please respond to the following:

Describe the incentive approval process or attach a copy of the relevant application form. Description (or list the Appendix citation here):

(3) Does the State agency provide above-50-percent vendors with a list of pre-approved incentive items?

☐ Yes; please provide list  ☐ No

(4) Does the State agency provide above-50-percent vendors with a list of prohibited incentive items?

☐ Yes; please provide list  ☐ No

f. Does the State agency ensure vendors (regular and above-50-percent) do not treat WIC participants differently by offering them incentive items that are not offered to non-WIC customers? (7 CFR 246.12(h)(3)(iii) and WIC Policy Memorandum 2014-3 Vendor Management: Incentive Items, Vendor Discounts and Coupons)

☒ Yes; please explain:  ☐ No; please explain:

Alabama ensures equitable treatment of WIC participants during routine monitoring visits, compliance investigations, and/or through investigating complaints. Vendors found to be treating WIC customers differently than non-WIC customers or providing unauthorized incentive items will be assessed the applicable sanction. This includes prohibiting WIC customers from participating in store promotions.

g. Pre-authorization visits are conducted to verify information received during the application process:

<table>
<thead>
<tr>
<th>by SA</th>
<th>by LA</th>
<th>by Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

h. Does the State agency verify the status of vendor applicants’ SNAP retailer authorization (e.g., via (Food Delivery Portal (FDP) or Store Tracking and Redemption System (STAR))?  

☒ Yes  ☐ No

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XI Attachment 11-6 Alabama WIC Vendor Application Packet.

4. Vendor Peer Groups
If the State agency does not have a vendor peer group system, please attach a copy of the most recent exemption request and approval letters and proceed to item 4e.

a. Are vendors assigned to peer groups for selection/authorization?
   ☒ Yes  ☐ No

b. Are vendors assigned to peer groups for reimbursement purposes?
   ☒ Yes  ☐ No

c. Peer groups are based on the following (check all that apply):

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>WIC sales volume</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Gross food sales volume</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Number of cash registers</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Square footage of store</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Type of store</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Location of store</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local agency service areas</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Zip codes</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>City, County, or regional divisions</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Unique economic location (e.g., rural island, single metro area)</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Urban/suburban/rural</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Other (specify):</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

d. Using the chart on the next page, describe the peer groupings (e.g., supermarkets, medium and small grocery stores, convenience stores, etc.) that the State agency plans to use during the upcoming fiscal year. For State agencies with more than 18 peer groups, please attach a chart containing this Peer Group Description and list the Appendix citation here:

   N/A

e. Has the State agency received approval for an exemption from the vendor peer group system requirement ([7 CFR 246.12(g)(4)(v)](7 CFR 246.12(g)(4)(v)))?
   ☐ Yes; date FNS approved exemption: ☒ No

(1) If yes, the State agency’s exemption was based on the latest available data for the current fiscal year (which covers the period from ________ to ________), and the State agency:

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does not have any above-50-percent vendors; data source:</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Paid above-50-percent vendors percent of the total annual WIC redemptions to date; data source:</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

(2) If the State agency does not use a vendor peer group system, 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.
## DESCRIPTION OF VENDOR PEER GROUP SYSTEM

<table>
<thead>
<tr>
<th>Peer Group No. (1)</th>
<th>Description (e.g., supermarkets, chain stores, pharmacies) (2)</th>
<th>Number of Vendors in Peer Group</th>
<th>Comparable Vendors Peer Group Number (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Type 1: Chain store with own wholesaler</td>
<td>272</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Type 2: Major Independent - 5 or more cash registers</td>
<td>220</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Type 3: Minor Independent - 3 to 4 cash registers</td>
<td>108</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Type 4: Small - 1 to 2 cash registers</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>*Vendor Numbers as of 08/04/2022</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Instructions:*
- Assign a sequential number to each peer group.
- Column 2 – Describe the vendors in the peer group; include all factors and definitions checked in question 4c. (e.g., urban = counties with >100,000 residents OR suburban = counties with >10,000 residents OR rural = counties with <10,000 residents)
- Column 3 – Insert the number of authorized vendors that are regular vendors.
- Column 4 – If the State agency authorizes above-50-percent vendors, insert the number of above-50-percent vendors currently authorized.
- Column 5 – Insert the total number of authorized vendors. This number should be the sum of columns 3 and 4, since the State agency must identify each vendor as being either a regular vendor or an above-50-percent vendor.
- Column 6 – For each peer group that contains above-50-percent vendors, insert the number of the peer group that contains comparable regular vendors. The comparable vendor peer group is the peer group that the State agency uses to derive the competitive price criteria and maximum reimbursement levels that it applies to the above-50-percent vendors. If above-50-percent vendors are placed in a peer group with regular vendors, then the number in column 1 should be the same as that in column 6. If above-50-percent vendors are in separate peer groups, then the number in column 1 will be different from that in column 6.
f. At least every three years the State agency must assess the effectiveness of its peer group system and competitive price criteria to enhance system performance (7 CFR 246.12(g)(4)(ii)(C)).

The State agency makes this assessment—
☐ Annually ☐ Biennially ☒ Every three years
☐ Other (please specify):

What procedures does the State agency have in place to assess the effectiveness of its peer group system and competitive price criteria to enhance system performance?

Alabama currently assesses peer group effectiveness by conducting an analysis of the national averages and current market prices of WIC food items. State agency WIC staff conduct site visits to at least one store within each peer group to verify current market prices for WIC food items. Additionally, the State WIC Office receives information regarding wholesale and market pricing from the Alabama Grocer’s Association. Identifying vendors that are charging significantly higher or lower prices than their peers could be indicative of the need to adjust the current Peer Group structure. A statistically significant difference in the Maximum Allowable Reimbursement Levels (MARLs) within peer groups in comparison to national averages or the current market price allows the state agency to make this assessment. MARLs are currently calculated using redemption data as described in question I. Vendor Management A. Vendor Selection and Authorization b. 3. Prior to the next assessment, the position for the departmental statistician that completes the assessments for Alabama WIC still must be filled. The position has been vacant for several months, which has prevented a thorough assessment of our Peer Group structure. Alabama still plans to utilize the lessons learned from the Altarum Institute WIC Vendor Peer Group Study. We will also utilize redemption data in the next assessment to ensure a more accurate assessment is completed.

Provide date of most recent FNS approval: 09/01/2017

5. Semiannual Shelf Price Collection
   a. Has the State agency received approval for an exemption from the shelf price collection requirement under 7 CFR 246.12(g)(4)(ii)(B):
      ☒ Yes; date FNS approved exemption: 05/18/2021 ☐ No

      If yes, please attach a copy of the most recent exemption request and approval letter(s).

6. Vendor Agreements
   a. The following reflect the State agency’s vendor agreement practices; check all that apply:
      ☒ All vendors have a written agreement with the State agency
      ☒ A standard vendor agreement is used statewide
      ☒ Vendor agreements are subject to the State’s procurement procedures
      ☒ Vendor agreements/handbooks are subject to the State’s Administrative Procedures Act
      ☐ A nonstandard vendor agreement is used for:
          ☐ Military commissaries
          ☐ Pharmacies that only provide exempt infant formula and/or WIC-eligible medical foods
          ☐ All pharmacies
          ☐ Mobile stores
          ☐ Other (specify):
      ☒ Vendors are authorized for a period of 3 year(s)
      ☒ All vendors are provided at least 15 days advance written notice of the expiration of the vendor agreement
      ☒ Chain stores sign a master agreement that includes multiple locations
☐ Chain stores sign an agreement for each store location
☒ All authorized WIC vendors are compliant with the regulatory split tender requirement at 246.12(f)(4)
☒ Other (specify): Currently, vendors are authorized for a period of 2 year(s), with the current vendor agreement spanning FY 2022 – FY 2023 (October 1, 2021 to September 30, 2023).

b. In addition to the requirements in 7 CFR 246.12(h)(3)-(h)(6), the vendor agreement includes:
☐ Periodic submission of vendor price lists. If so, specify frequency:
☒ Maintenance of records in addition to the required inventory records. If so, specify types of records: Tax reports, financial statements, and other records sufficient for establishing food sales.
☐ Submission of food instruments and CVVs/CVBs within a shorter timeframe than required by program regulations. If so, specify timeframe:
☐ Redemption of a minimum number/volume of food instruments and CVVs/CVBs
☒ Minimum hours of operation
☒ Other (specify all): Use of WIC service mark, square footage requirement, applicable state required contract clauses.

c. The State agency delegates the signing of vendor agreements to its local agencies:
☐ Yes ☐ No

If yes, provide a description of the supervision and instruction provided to local agencies to ensure the uniformity and quality of this activity.

Please attach a copy of the Vendor Agreement or provide the appropriate Procedure Manual reference below.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XI Attachment 7 - Alabama WIC Vendor Contract.

B. Vendor Training

1. Vendor Training – General

a. Annual vendor training covers the following content (check all that apply):
☒ Purpose of the WIC Program
☒ Supplemental foods authorized by the State agency
☒ Minimum varieties and quantities of supplemental foods that must be stocked
☒ Obtaining 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
☒ Procedures for obtaining prior State agency approval to provide incentive items to WIC participants
☒ Procedures for transacting and redeeming food instruments and cash-value vouchers
☒ Vendor sanction system
☒ Vendor complaint process
☒ Claims procedures
☒ Changes in program requirements since the last training
☒ Recordkeeping requirements
☒ Replacement food instruments and cash-value vouchers
☒ Participant complaints
☒ Vendor requests for technical assistance
☒ Reauthorization
☒ Reporting changes of ownership, location, or cessation of operations
☒ Procedures for appeal/administrative review
☒ Training employees
☒ WIC/SNAP sanction reciprocity and information sharing
☒ Other (specify): Return procedures, policy regarding not issuing rain checks, importance of the vendor contract, store monitoring visits, compliance activities, coupons/store promotions, and how to order additional training materials.
If any topics listed above are not included in the annual vendor training, explain why.

b. Vendors or vendor representatives receive training on the following occasions and/or through the following materials (check all that apply):
☒ 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 recording
☒ Teleconference, video conference, or webinars
☐ Vendor hotline
☒ State or local agency website
☐ Other (specify):

c. Vendors or vendor representatives receive interactive training as follows (check all applicable responses):
☒ At or before initial authorization
☐ At least once every three years
☒ Annually or more frequently than once every three years

d. The following method(s) are used to evaluate the effectiveness of vendor training (check all that apply):
☐ Evaluation forms provided with training materials
☒ Pre-tests and/or post-tests regarding vendor policies, procedures, and practices
☐ Statistical indicators, such as a reduction in food instrument/cash-value voucher/cash-value benefit errors
☐ Educational buys
☐ Record reviews
☒ Informal feedback from vendors and/or participants
☒ Vendor advisory councils
☐ None
☐ Other (specify):

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Chapter XI 11.5 Vendor Training and Chapter XI Attachments 1-3
2. Delegation of Vendor Training

a. The State agency delegates its vendor training to:
   ☒ Local agencies
   □ A contractor; specify:
   □ A vendor association/representative; specify:
   ☒ Other (specify): State Agency conducts virtual interactive training and assists local agencies with onsite interactive training when necessary.
   □ None (the State agency conducts all vendor training)

b. Indicate the frequency with which the State agency performed the following activities during the past fiscal year:

<table>
<thead>
<tr>
<th>Times/ FY</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>As needed</td>
<td>Provided comprehensive training materials to delegated trainers</td>
</tr>
<tr>
<td>As needed</td>
<td>Provided instruction on vendor training techniques to delegated trainers</td>
</tr>
<tr>
<td></td>
<td>Monitored performance of delegated trainers to ensure the uniformity and quality of vendor training</td>
</tr>
<tr>
<td></td>
<td>Not applicable</td>
</tr>
<tr>
<td>☒</td>
<td>Other (specify): Comprehensive training materials are provided to delegated trainers by the State WIC Office for all newly authorized WIC vendors</td>
</tr>
</tbody>
</table>

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XI 11.5 Vendor Training and Chapter XI Attachments 1-3

3. Documents for and Documentation of Vendor Training

a. The State agency or the entity to which it delegates vendor training documents the content of and vendor participation in annual vendor training:
   ☒ Yes  □ No

b. Vendors or vendor representatives are required to sign an acknowledgment of training when they have received the following types of training (check all that apply):
   ☒ Interactive training  ☒ Annual training
   □ Educational buys  ☒ Monitoring visits
   ☒ Remedial training  □ Other (specify):

c. The State agency produces a Vendor Handbook:
   ☒ Yes  □ No

   If yes, provide the link to the Vendor Handbook or the citation: http://www.alabamapublichealth.gov/wic/assets/WIC_VendorProcedureHandbook.pdf

d. The State agency provides online or web-based training:
   ☒ Yes  □ No

   If yes, provide the link to the training: http://www.alabamapublichealth.gov/wic

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XI 11.5 Vendor Training and Chapter XI Attachments 1-3
C. High-Risk Identification Systems

1. Vendor Complaints
   a. The State agency has a formal system for receiving complaints about vendors:

   ☒ Yes, please explain: Complainets are entered into Crossroads as Customer Service Issues and followed up on by either local or state WIC staff.
   ☐ No; please explain:

   ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XII Program Abuse

2. Identifying High-Risk Vendors
   a. What criteria does the State agency use to identify high-risk vendors: (*) mandatory

   ☒ Yes, please explain: 
   ☐ No; please explain:

   ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XII Program Abuse
c. Identify the type(s) of food instruments/cash-value vouchers/cash-value benefits used in the high-risk vendor analysis. (Check all that apply):

☒ A full monthly food package for a:
   ☒ Woman  ☒ Infant  ☒ Child  ☐ Other (specify):
   ☒ CVVs/CVBs
   ☐ Other (specify):

d. To perform the high-risk vendor analysis, the State agency’s system aggregates a vendor’s redemptions over the following time period:

☐ 1 month  ☐ 2 months  ☒ 3 months  ☐ 4 months  ☐ 5 months  ☐ 6 months

☐ Other (specify):

e. Vendor redemption patterns are generally compared to:

☒ Applicable peer group patterns
☒ All vendors’ patterns statewide
☐ Other (specify):

Provide additional information detailing how the State agency conducts the high-risk vendor analysis and how the State agency ranks and selects vendors for compliance and/or monitoring activity when more than 5% of authorized vendors are high risk.

Information regarding the Risk Analysis functionality in Crossroads is available on the WIC Technology Partners website in the Crossroads Sandbox which contains the Crossroads Support Documentation, Crossroads Detailed Functional Design Documents. Select the DFDD Crossroads Vendor document and see pages 594-656. The State Agency generates the Risk Analysis report in Crossroads on a quarterly basis. Crossroads displays the percent of all analyzed vendors who exceed the high risk threshold. If this percent exceeds the 5 percent of authorized vendors at high risk the Investigator would select vendors with the highest total risk score for investigation. The vendors with the highest total risk score would be those Crossroads identified as being at the greatest risk of fraud and abuse.

D. Routine Monitoring

1. Routine Monitoring Visits

a. Routine monitoring visits are conducted by:

☒ State agency staff
☒ Local agency staff
☐ Other (specify):  State Investigators

b. Identify the activities performed during a routine monitoring visit; check all that apply:

☒ Check the vendor’s inventory of supplemental foods and/or inventory records to determine if the vendor meets the State agency’s requirements for the minimum variety and quantity of supplemental foods.

☒ Check the vendor’s inventory of non-supplemental foods and/or inventory records to provide information on whether the vendor is an above-50-percent vendor.

☐ Determine whether the vendor accepts forms of payment other than WIC food instruments, such as cash, personal checks, and credit cards, to provide information on whether the vendor is an above-50-percent vendor.
☑ Check the vendor’s invoices of infant formula to ensure that the infant formula is obtained only from the State agency’s list of infant formula manufacturers registered with the Food and Drug Administration, and infant formula wholesalers, distributors, and retailers licensed under State law.

☐ If the vendor is an above-50-percent vendor, check its stock of incentive items to ensure that such items have been approved by the State agency.

☑ Obtain the vendor’s shelf prices and/or validate the vendor’s price list

☑ Review food instruments or receipts in the vendor’s possession for vendor violations

☑ Compare shelf prices to prices that appear on the register to test for vendor overcharges

☑ Review use of shelf tags and signage

☑ Review expiration dates on supplemental foods

☐ Compare prices of supplemental foods with similar items not approved as supplemental

☑ Observe WIC transactions that occur

☐ Conduct that the vendor has appropriate terminals deployed in the required number of lanes per 7 CFR 246.12(z)(2)

☐ Conduct an educational buy

☑ Interview manager and/or employees

☑ Review employee training procedures

☑ Conduct annual vendor training or provide vendor with annual training materials

☑ Examine the sanitary conditions of the store

☑ Ensure that vendor is compliant with the split tender requirement

☑ Other (specify all): Provide the Alabama WIC Program Vendor Procedures Handbook and Alabama WIC Approved Food Brochures.

c. Generally, routine monitoring visits are conducted on each vendor (check all that apply):

☐ Annually ☐ Twice a year ☐ As needed (specify) ☑ Other (specify) Alabama monitors vendors each FY to ensure compliance with the 5 percent minimum outlined in 7 CFR (j)(2). The 5 percent minimum of the number of vendors authorized by the State agency as of October 1 of each FY.

d. The following procedures are used in determining whether a vendor is selected for a routine monitoring visit (check all that apply):

☑ Random selection ☑ Complaints

☐ Periodic/scheduled training ☑ Other (specify): Investigators select vendors for routine monitoring from the Vendor Monitor/Audit Report. Priority is given to those vendors with the oldest monitoring date.

☐ Periodic/scheduled review

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XI Attachment 5 Conducting Vendor Monitoring and the Alabama WIC Vendor Monitoring Guide

E. Compliance Investigations

1. Investigative Practices

a. The State agency conducts (check all that apply):

☑ Compliance buys (a covert, on-site investigation in which a representative of the Program poses as a participant, parent, or caretaker of an infant or child participant, or proxy; transacts one or more food instruments or CVVs/ CVBs; and does not reveal during the visit that he or she is a Program representative.)
Inventory audits (the examination of food invoices or other proofs of purchase to determine whether a vendor has purchased sufficient quantities of supplemental foods to provide participants the quantities specified on food instruments redeemed by the vendor during a given period of time.)

Other (specify): The State WIC office monitors social media websites to identify WIC participants who are potentially selling WIC benefits.

b. The following factors are used to determine which vendors are selected for a compliance investigation (check all that apply):

- Vendor is identified by the high-risk vendor identification criteria
- Random selection
- Geographical considerations
- Volume of WIC redemptions
- Participant complaints
- Other (specify): Tip High Risk Indicators

c. The State agency uses standard procedures for conducting and documenting compliance buys and inventory audits:

- Yes If yes, please provide the guidelines in the Vendor Management Appendix or cite to the Procedure Manual reference: Alabama WIC Procedure Manual Chapter XI Section 11.7
- No; specify:

- The results of compliance investigations are used to assess the effectiveness of the State agency’s high-risk vendor identification criteria:

- Yes
- No

If yes, check the items below that describe how the results of compliance investigations are used to assess the effectiveness of high-risk vendor identification criteria:

- The State agency compares data on the prevalence of vendor violations detected among high-risk versus non-high-risk vendors.
- The State agency discards a high-risk vendor identification criterion if compliance investigations of high-risk vendors identified by the criterion result in no vendor violations after [ ] months
- Investigative procedures and training are reevaluated if compliance investigations of high-risk vendors result in the detection of no vendor violations.
- Other (specify):

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

2. Compliance Buys

a. The State agency conducts the following types of compliance buys:

- Trafficking buys (exchanging food instruments for cash)
- Safe buys (transacting food instruments to see if the vendor will overcharge)
- Short buys (transacting food instruments for less food items than those available to see if the vendor will charge for food items not received)
- Major substitution buys (exchanging food instruments for non-food items)
- Minor substitution buys (exchanging food instruments for unauthorized food items)
- Other (specify): Recalled items

b. Does the State agency tailor compliance buys to vendors’ risk type?
c. Compliance buys are usually conducted by:

☒ WIC State agency staff
☐ WIC local agency staff
☒ State investigators
☐ Investigators retained on a contract basis (e.g., Pinkerton, Wells Fargo)
☐ Interns, neighborhood residents, or program participants employed by WIC
☐ Another WIC State agency
☐ Other (specify):

d. Who is responsible for ensuring the proper execution of and follow-up on compliance buys?

☒ WIC State agency vendor manager
☐ WIC local agency manager
☒ State investigators
☐ Contractor
☐ Another WIC State agency
☐ Other (specify):

e. If no vendor violations are detected, how many compliance buys does the State agency conduct before closing a compliance investigation?

☒ Two
☐ Other (specify):

f. If the State agency conducts a standard number of compliance buys per compliance investigation, what is the basis for the prescribed number of buys?

☒ State law or regulation
☒ State agency policy or procedure
☐ Level of evidence necessary to impose vendor sanctions
☐ Legal counsel's advice
☒ Other (specify): Federal Regulations

g. Is the vendor provided written notification of a violation requiring a pattern of violations in order to sanction the vendor, prior to documenting another violation of the same kind, unless the State agency determines that such notice would compromise the investigation and documents this in the vendor's file?

☒ Yes
☐ No

If no, is the determination that the written notification would compromise the investigation documented in the vendor's file?

☐ Yes, if a standard form is used, please attach and cite below.
☐ No; please explain:

h. Does the State agency have a clear, actionable definition of “pattern of violations” approved by its General Counsel/Administrative Officer?

☒ Yes
☐ No
ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

3. Estimate the cost for conducting compliance buys, excluding expenses related to the vendor appeals/administrative review process:

$       Cost per compliance buy
☒ Unknown
☐ Not applicable

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual:

4. Inventory Audits (If inventory audits are not performed, go to Question 5)

a. The following factors are used to determine which vendors selected for compliance investigations will receive inventory audits rather than/or in addition to compliance buys:

☐ Vendor has highest risk based on State agency’s high-risk identification criteria
☒ Suspicion of vendor exchanging cash for food instruments (trafficking)
☒ Inconclusive compliance buy results
☒ Complaints
☒ Other (specify): If a vendor location is not readily accessible for a compliance buy due to suspicion of strangers or other circumstance which would hinder the possibility of a successful compliance buy.

b. The State agency conducts the following types of inventory audits:

☒ On-site inventory audits
☒ State agency inventory audits (vendor sends records to State agency)
☐ Local agency inventory audits (vendor sends records to local agency)
☐ Other (specify):

c. Inventory audits are conducted by (check all that apply):

☒ WIC State agency staff
☐ WIC local agency staff
☐ State investigators
☐ Investigators retained on a contract basis (e.g., Pinkerton's, Wells Fargo)
☐ Other (specify):

d. Identify the amount of, or period of time covered by, the receipts that are examined during an inventory audit:

The receipts examined during an inventory audit cover a 60-day period.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

5. Compliance Buy/Inventory Audit Tracking System(s)

a. The State agency has a means of recording and tracking staff person hours devoted to investigation activities:

☐ Yes, please describe:
☒ No

b. The State agency has an automated system for tracking investigations that monitors the progress and status of each compliance investigation:

☐ Yes, please describe:
☒ No
F. Administrative Review of State Agency Actions

1. Types of Administrative Reviews

The State agency conducts the following types of administrative reviews of vendor appeals for the adverse actions listed below. (Check all that apply):

<table>
<thead>
<tr>
<th>Informal Desk Reviews</th>
<th>Abbreviated Admin Reviews</th>
<th>Full Admin. Reviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial due to competitive price selection criterion</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial due to minimum stocking selection criterion</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial due to business integrity or current SNAP DQ or CMP</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial based on limiting criteria</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial due to State agency selection criteria</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial due to application outside timeframe</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Application of above-50-percent criteria</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ DQ for WIC violations</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ DQ for SNAP CMP</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Other WIC sanctions, e.g., fine or CMP</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial based on circumvention of sanction</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Application of peer group criteria</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Termination due to ownership change</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Termination due to location change</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Termination due to ceasing operations</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Termination for other causes</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ DQ for trafficking/illegal sales conviction</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ DQ/CMP due to another State agency’s mandatory sanction</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ CMP based on SNAP DQ</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑ Denial based on no SNAP authorization</td>
</tr>
</tbody>
</table>

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC Procedure Manual Chapter XIII Administrative Appeals

2. Administrative Review Procedures

a. The State agency has a law or regulation governing WIC administrative reviews:

☑ Yes, please indicate: Hearing of contested cases rules found in Chapter 420-1-3 of the Alabama Administrative Code.

☐ No

If the State agency does have such a law or regulation, this includes:
☒ State agency Administrative Procedures Act
☐ State agency law pertaining to WIC only
☒ State agency health department law
☒ State agency health department regulation
☒ State agency WIC regulation
☐ Other (specify):

b. At which level do administrative reviews of WIC vendor appeals take place:

☐ WIC local agency
☒ WIC State agency
☐ State or Tribal health department
☐ Other (specify):

c. Administrative reviews are conducted by:

☒ Hearing officers
☐ Administrative law judges
☐ Other (specify):

d. The following procedures are followed for administrative reviews:

<table>
<thead>
<tr>
<th>Abbreviated Admin. Reviews</th>
<th>Full Admin. Reviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

e. Check the party(ies) below who may present the State agency case during a full administrative review:

☐ WIC staff person assigned to case ☐ WIC State agency Vendor Manager ☐ WIC State Agency Director
☒ Legal counsel (State Attorney General or General Counsel’s office) ☐ Legal counsel (paid by WIC Program funds)
☐ Other (specify all):

Please attach and/or reference in the Additional Detail area below the location of the State agency’s administrative review procedures.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): Alabama WIC
G. Coordination with SNAP

1. WIC/SNAP Information Sharing

a. An information sharing agreement between the WIC State agency and SNAP is in effect and is maintained at the State agency:
   ☒ Yes ☐ No

   If yes, an updated list of authorized vendors is sent to the appropriate FNS SNAP Retailer Operations Division office:
   ☐ Once a year
   ☐ Regularly, at intervals of less than one year (specify):
   ☐ Periodically, as changes occur
   ☒ Upon request
   ☐ Other (specify):

b. State agency compliance investigators coordinate their activities with their SNAP counterparts:
   ☒ Yes ☐ No

c. State statute, regulations, or procedures restrict the disclosure of WIC vendor and SNAP retailer information to those permitted under 7 CFR 246.26(e) and (f):
   ☒ Yes (specify): Chapter 1, Section 1.19 Record Confidentiality, C Vendor Information, of the Alabama WIC Program Procedure Manual outlines in detail Alabama's procedures regarding information sharing. All WIC employees are required to notify their immediate supervisor of any vendor information requests who will in turn notify the Alabama WIC Program Director. The request will be reviewed by the Alabama WIC Program Director to ensure it is appropriate and in compliance with section 246.26 (e) of the Federal Regulations. Alabama only shares vendor information in accordance with section 246.26 (e) of the Federal Regulations which includes; vendor’s name, address, telephone number, web site/e-mail address, store type, and authorization status. No vendor information requests are granted without first consulting with the Alabama WIC Program Director. If information is requested by a person enforcing Federal or State law or local ordinance who is not directly connected with administration or enforcement of the WIC Program or SNAP, the request is handled by the Department’s General Counsel. General Counsel will consult with the Alabama WIC Program Director as needed while reviewing any requests for vendor information.
   ☐ No

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): See Attached SNAP - WIC Information Sharing Agreement - Attachment III

H. Staff Training

1. Check below the routine formal training available to State and local level staff in vendor management practices:
   State  Local  Other (contractor)
| ☒ | ☒ | ☐ | Vendor selection and authorization |
| ☒ | ☒ | ☐ | Vendor training |
| ☒ | ☒ | ☐ | Routine monitoring |
| ☐ | ☐ | ☐ | Compliance investigations |
| ☐ | ☐ | ☐ | Inventory audits |
| ☐ | ☐ | ☐ | Corrective actions and sanctions |
| ☐ | ☐ | ☐ | Criminal investigations |
| ☐ | ☐ | ☐ | Vendor appeals/administrative reviews |
| ☐ | ☐ | ☐ | Federal and/or State WIC regulations |
| ☐ | ☐ | ☐ | Prevention of vendor fraud and abuse |
| ☐ | ☐ | ☐ | WIC/SNAP information sharing and handling of confidential WIC vendor data |
| ☐ | ☐ | ☐ | High-risk vendor identification |
| ☐ | ☐ | ☐ | Vendor management information system |

☐ Not applicable  
☐ Other (specify):

2. State agency staff meets with vendor representatives as part of a vendor advisory council or other vendor stakeholder group:
   ☐ Monthly  
   ☐ Quarterly  
   ☒ Other frequency:  On an as needed basis.  
   ☐ No vendor advisory council

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

3. Reporting vendor information to the Food Delivery Portal (FDP):
   a. How does the State agency submit vendor information to FDP?
      ☐ Manually (via the FDP screens)  
      ☐ Upload comma delimited file  
      ☒ Upload XML file

   b. Describe how the State agency ensures that this information is accurate:
      Each Special Investigator in the Compliance Unit of the State agency maintains a Food Delivery Portal (FDP), formerly the TIP Data Entry Form that encompass all of the compliance activities done by that investigator for the FY in question. The information from the FDP Data Entry Form will be manually transferred to the FY FDP Report by the Special Investigator. The information entered by one investigator is checked by another investigator and the Vendor Manager for accuracy. Data from our MIS system, Crossroads, is also obtained such as the new, terminated, or expired vendors and entered by the Vendor Services Administrator and the Vendor Manager. Then, the information is checked again for accuracy by the Vendor Manager and the Vendor Services Administrator once it is entered.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

I. 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.

   The Department shall determine there is inadequate participant access if geographic barriers or other conditions make participant access unreasonably difficult and no authorized WIC vendors are within ten miles of the violative vendor.
2. Does the State agency assess all vendor applications not meeting selection criteria for participant access?

☒ Yes ☐ No

a. If yes, describe below or attach and provide a citation of the procedures used for assessing vendor applications for participant access. Provide sufficient details so steps can be followed and criteria applied to a specific vendor.

Prior to notifying a vendor applicant of denial due to failure to meet the Criteria for Participation an Inadequate Participant Access assessment is completed. Per Chapter 420.10.2 of the Alabama Administrative Code governing the WIC Program, the Department may in its discretion waive any of the vendor criteria for participation to ensure adequate participant access to WIC Program benefits. Adequate participant access exists if an authorized WIC vendor is within ten miles of the violative vendor and no geographic barriers or other conditions make participant access unreasonably difficult. The Alabama State WIC office uses two forms to document Inadequate Participant Access assessments: 1) A form for denied Vendor Applicants and 2) A form for Violative Vendors/CMP Assessment. See Attachment IV.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation):

J. Farmer/Farmers’ Market Authorization

☒ IF YOUR STATE AGENCY DOES NOT AUTHORIZE FARMERS/FARMERS’ MARKETS TO ACCEPT CVVs/CVBs; SECTIONS J – N DO NOT APPLY.

1. Does the State agency delegate any tasks related to the management of the Farmers or Farmers' Markets to another entity?

☐ No

☒ Yes (specify what tasks and to whom):

2. The State agency authorizes farmers/farmers’ markets to accept CVVs/CVBs based on:

☐ Authorization by the WIC Farmers’ Market Nutrition Program (FMNP)

☐ Selection criteria established separately from FMNP

3. If the State agency does not authorize farmers/farmers’ markets based on FMNP authorization, the selection criteria include (describe):

4. The State agency consider applications:

☐ On an ongoing basis

☐ Annually

☐ Other (specify):

☐ Every three years

☐ Every two years

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): and/or FMNP State Plan (Citation):

If the State agency does not authorize Farmers/Farmers’ Markets, please proceed to Section N. Participant Access.

K. Farmer/Farmers’ Market Agreements

1. Agreement periods are for:

☐ One year ☐ Two years

☐ Three years ☐ Other (specify):
2. Agreements are:
   - ☐ A modified version of the vendor agreement
   - ☐ Combined with the FMNP agreement
   - ☐ Unique to the authorization of farmers to transact CVVs/CVBs

3. The following reflect the State agency’s farmer/farmers’ market agreement practices:
   - ☐ All farmers/farmers’ markets have a written agreement with the State agency
   - ☐ A standard farmer/farmers’ market agreement is used statewide
   - ☐ Agreements are subject to the State’s procurement procedures
   - ☐ Agreements/handbooks are subject to the State’s Administrative Procedures Act
   - ☐ Farmers/farmers’ markets are authorized/reauthorized under renewable agreements, provided no farmer/farmers’ market violations occurred during the previous agreement period
   - ☐ All farmers/farmers’ markets are provided at least 15 days advance written notice of the expiration of the agreement
   - ☐ All farmers/farmers’ markets are provided a schedule of sanctions, either in or attached to the farmer/farmers’ market agreement, or as a citation to State regulations
   - ☐ Other (specify):

4. Agreement provisions include:
   - ☐ Assure that the CVV/CVB is redeemed only for eligible fruits and vegetables as defined by the State agency
   - ☐ Provide eligible fruits and vegetables at the current price or less than the current price charged to other customers
   - ☐ Accept the CVVs/CVBs within the dates of their validity and submit CVVs for payment within the allowable time period established by the State agency
   - ☐ Redeem the CVV/CVB in accordance with a procedure established by the State agency
   - ☐ Accept training on CVV/CVB procedures and provide training to any employees with CVV/CVB responsibilities on such procedures
   - ☐ Agree to be monitored for compliance with program requirements, including both overt and covert monitoring
   - ☐ Be accountable for actions of employees in the provision of authorized foods and related activities
   - ☐ Pay the State agency for any CVV/CVB transacted in violation of this agreement
   - ☐ Offer WIC participants, parent or caretakers of child participants, or proxies the same courtesies as other customers
   - ☐ Neither the State agency nor the farmer has an obligation to renew the agreement.
   - ☐ Other (specify):

5. The farmer/farmers markets agreement reflects that the farmer/farmers’ market must not:
   - ☐ Collect sales tax on CVV/CVB purchases
   - ☐ Seek restitution from WIC participants, parent or caretakers of child participants, or proxies for CVVs/CVBs not paid or partially paid by the State agency
   - ☐ Issue cash change for purchases that are in an amount less than the value of the CVV/CVB
   - ☐ Other (specify):

   Please attach a copy of the Farmer/Farmers’ Market Agreement or provide the appropriate Procedure Manual reference below.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation): and/or FMNP State Plan (Citation):

L. Farmer/Farmers’ Market Training

1. Farmer/farmers’ market training includes:
   - ☐ Eligible fruits and vegetables
☐ Procedures for transacting and redeeming CVVs/CVBs
☐ Agreement provisions
☐ Sanctions and Appeals
☐ Other (specify):

2. Interactive farmer/farmers’ market training (e.g., face-to-face, video conference, web cam) is conducted:
   ☐ At or before initial authorization
   ☐ At least every three years following initial authorization
   ☐ Other (specify):

3. Non-interactive farmer/farmers’ market training (e.g., via hard copy mail, email, online) is conducted:
   ☐ Annually following authorization
   ☐ Changes in procedures
   ☐ Other (specify):

4. The State agency delegates training to:
   ☐ Local agency (specify):
   ☐ Contractor (specify):
   ☐ Farmer representative (specify):
   ☐ Other (specify):

5. If the State agency delegates training, briefly describe the State agency’s supervision of such training:

6. The State agency produces a Farmer/farmers markets Training Handbook:
   ☐ Yes ☐ No
   If yes, provide the citation:

7. The State agency provides online or web-based training:
   ☐ Yes ☐ No
   If yes, provide the link to the training or citation:

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation) and/or FMNP State Plan (Citation):

M. Farmer Monitoring

1. Farmers/farmers’ markets are included in the:
   ☐ FMNP sample of farmers/farmers markets for monitoring ☐ WIC sample of vendors for monitoring

2. Monitoring includes:
   ☐ Covert methods, such as compliance buys ☐ Overt methods, such as routine monitoring

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation) and/or FMNP State Plan (Citation):

N. Farmer/Farmers’ Market Sanctions, Claims, and Appeals
1. Farmer/farmers' market violations may result in; check all that apply:
   ☐ Disqualification
   ☐ Denial of payment or demand for refund due to improperly redeemed CVVs/CVBs (Claims)
   ☐ Prosecution under Federal, State, or local law regarding fraud or other illegal activity
   ☐ Monetary sanctions such as civil money penalties and fines

2. Farmers/farmers’ markets may administratively appeal:
   ☐ Disqualification
   ☐ Denial of application
   ☐ Other sanction (specify):

3. Farmers/farmers' markets may not administratively appeal:
   ☐ Expiration of an agreement
   ☐ Claims
   ☐ Other (specify):

Please attach and/or reference the location of the State agency's administrative review procedures.

ADDITIONAL DETAIL: Vendor Management Appendix and/or Procedure Manual (Citation) and/or FMNP State Plan (Citation):
I. VENDOR AND FARMER MANAGEMENT
A. Vendor Selection and Authorization
3. Vendor Selection and Authorization
b. Explain how the State agency develops and uses the competitive price criteria identified in item 3a to select vendors for authorization.

The State Agency (SA) develops and uses the competitive price criteria identified in item 3a to select vendors for authorization by the following: The SA vendor applicants must submit a price survey with their application that will be used to compare their prices to the average prices plus two standard deviations of current vendors in their appropriate peer group. Once all reported prices on the applicant’s price survey are verified during a pre-authorization visit, the price survey information is entered into our Management Information System (MIS). If prices on the vendor’s price list are above the peer groups average redemption amounts plus two standard deviations, the MIS will flag the price as being above the allowable amount. The applicant will then be contacted and asked to lower their prices. If the applicant refuses to lower their prices, they will not be considered for authorization. However, applicants whose prices fall within the assumed peer group’s average prices plus two standard deviations, will be considered price competitive and can proceed in the authorization process.
MEMORANDUM OF UNDERSTANDING (MOU) FOR INFORMATION SHARING BETWEEN THE WIC STATE AGENCY AND THE FOOD AND NUTRITION SERVICE (FNS)

In order to promote cooperation and reduce vendor/retailer fraud and abuse in the Supplemental Nutrition Assistance Program (SNAP) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), the WIC State agency, the Food and Nutrition Service (FNS) Special Nutrition Program (SNP) and Office of Retailer Operations and Compliance (ROC) Investigative Analysis Branch (IAB) enter into a Memorandum of Understanding. The undersigned parties agree to the following:

I. Responsibilities of the FNS ROC IAB

A. Provide the WIC State agency with the name, title, and address of the FNS ROC IAB office where information on violative WIC vendors should be sent.

Name/Title: Marchee M. Briant, Section Chief, IAB Area 4
USDA Food and Nutrition Service
Office of Retailer Operations and Compliance

Address: 1320 Braddock Place Ste.
FO-46 Alexandria, VA 22314

Telephone: 609-259-5020
Fax: 844-205-1642
E-mail: marchee.briant@usda.gov

B. Provide the WIC State agency with a copy of the notice of determination sent to retailers that have either been disqualified or imposed a civil money penalty in lieu of disqualification. This information must include the name of the store owner, the full name of the store, address, FNS authorization number, the length of disqualification or the length of the disqualification corresponding to the violation for which the civil money penalty was assessed and the effective date of the sanction. This notification must be provided within 15 days after the retailer’s right to appeal a SNAP sanction has either expired or been exhausted.

C. Include the following statement on charge letters, letters of determination, and final notices: “If you are an authorized vendor under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), you may be disqualified from the WIC Program as a result of your disqualification from SNAP. In accordance with the current law governing both the SNAP and the WIC Program, such a WIC Program disqualification is not subject to administrative or judicial review under the WIC Program. A civil money penalty (CMP) from the Supplemental Nutrition Assistance Program may also result in a WIC Program disqualification, but such a disqualification would be subject to administrative and/or judicial review.”
D. Provide the WIC State agency, upon request, with information on specific SNAP authorized retailers that is not available to the WIC State agency through the FNS Store Tracking and Redemption Subsystem (STARS) database.

II. Responsibilities of the FNS SNP

A. Facilitate communications between the WIC State agency and the appropriate FNS ROC IAB Office.

B. Monitor the effectiveness of this memorandum of understanding.

III. Responsibilities of the WIC State Agency

A. Provide FNS ROC IAB with the name, title, and address of the WIC State agency where all information on violative SNAP retailers should be sent.

<table>
<thead>
<tr>
<th>Name/Title:</th>
<th>Ashley Johnson/WIC Vendor Branch Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency:</td>
<td>Alabama Department of Public Health</td>
</tr>
<tr>
<td>Address:</td>
<td>The RSA Tower</td>
</tr>
<tr>
<td></td>
<td>201 Monroe Street, Suite 1300</td>
</tr>
<tr>
<td></td>
<td>Montgomery, AL 36130</td>
</tr>
<tr>
<td>Telephone:</td>
<td>334-203-3071</td>
</tr>
<tr>
<td>Fax:</td>
<td>531-203-2914</td>
</tr>
<tr>
<td>E-mail:</td>
<td><a href="mailto:Ashley.Johnson@adph.state.al.us">Ashley.Johnson@adph.state.al.us</a></td>
</tr>
</tbody>
</table>

B. Provide the FNS ROC IAB office with a copy of the notice of adverse action and information on vendors it has either disqualified or imposed a civil money penalty in lieu of disqualification for any of the violations listed in Section 246.12(l)(1)(i) through (l)(1)(iv) of the regulations. This information must include the name of the vendor, address, identification number, the type of violation(s), and the length of disqualification or the length of the disqualification corresponding to the violation for which the civil money penalty was assessed. This information must be provided within 15 days after the vendor’s opportunity to file for a WIC administrative review has expired or all of the vendor’s WIC administrative reviews have been completed.

C. Include on all disqualification notices to WIC vendors the following statement: "This disqualification from WIC may result in disqualification as a retailer in the Supplemental Nutrition Assistance Program (SNAP) per Section 278.6(c)(8) of the SNAP regulations. Such disqualification may not be subject to administrative or judicial review under the Supplemental Nutrition Assistance Program."

IV. The undersigned parties further mutually agree that:
A. Information exchanged in accordance with this agreement must be disclosed and used only in direct connection with the administration and enforcement of WIC and SNAP regulations and procedures, except that such information must be disclosed to the Comptroller General of the United States and other authorized officials for audit and examination authorized by law. Under no circumstances should such information be disclosed to any State agency personnel who are not directly involved in the management of vendors in the WIC Program, other public or private agencies, or to private citizens or enterprises not directly involved in State agency vendor management. The protected information includes all information exchanged about retailers/vendors, as well as about investigations of retailers/vendors, such as the identities of investigators and investigative aides.

B. Information received by the WIC State agency on SNAP investigations must not be disclosed to local agencies unless specific prior approval has been given by FNS ROC IAB.

C. Information exchanged in accordance with this agreement is subject to the Federal Freedom of Information Act.

D. Any of the offices listed below may terminate this MOU with 30 days’ advance notice to the other party. This MOU will remain in effect until such notice is given.

Allison Hatchett
Director
WIC State Agency

Digitally signed by Allison Hatchett
Date: 2020.11.19
16:33:44 -06'00'

11/19/2020

MICHAEL PACE
Branch Chief
FNS Office of Retailer Operations and Compliance

Digitally signed by MICHAEL PACE
Date: 2020.11.18
10:20:10 -05'00'

11/18/2020

SANDRA BENTON DAVIS
Branch Chief
Special Supplemental Nutrition Programs for Women, Infants and Children
FNS Special Nutrition Programs Division

Digitally signed by SANDRA BENTON DAVIS
Date: 2020.11.19 16:51:27 -06'00'

11/19/2021

Rev. 28 January 2014

State Health Officer

Page 3 of 3
Alabama WIC Program
Vendor Management
Participant Access Assessment Form

The Department shall determine there is inadequate participant access if geographic barriers or other conditions make participant access unreasonably difficult and no authorized WIC vendors are within ten miles of the violative vendor.

☐ Authorization of New Vendor
☐ Re-Authorization of Existing Vendor

Name of Applicant or Vendor

Vendor Number (If available)

Physical Address
City, ST, ZIP

Nearest Vendor
Vendor Number
Physical Address
City, ST, ZIP
*Distance to Applicant or Vendor in Question

2nd Nearest Vendor
Vendor Number
Physical Address
City, ST, ZIP
*Distance to Applicant or Vendor in Question

Comments: Description of Geographical Barriers and/or other Conditions which would make access unreasonably difficult:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Completed by: __________________________ Date: __________________

WIC Representative Signature

Decision:

☐ Deny Application – After departmental and legal review, it is deemed that this vendor is not needed for participant access. There are no existing barriers or conditions that would make access unreasonably difficult. There are authorized WIC vendor(s) within 10 miles.

☐ Approve Application – After departmental and legal review, there are existing barriers and/or conditions that would make access unreasonably difficult. There is no authorized WIC vendor(s) within 10 miles.
Chapter II

Nutrition Services
II – Nutrition Services

(Please indicate) **State Agency: Alabama** for FY 2023

Nutrition services include the full range of activities performed by a variety of staff to operate a WIC Program such as, participant screening and assessment, nutrition education and counseling, breastfeeding promotion and support and health promotion, food package prescriptions, and health care referrals. WIC State agencies should refer to the WIC Nutrition Service Standards, available WIC Works Resource System at [WIC Works - http://wicworks.nal.usda.gov](http://wicworks.nal.usda.gov) for recommended criteria and best practices to incorporate activities that are consistent with providing quality nutrition services and revitalizing quality nutrition services (RQNS).

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

A. **Nutrition Education-246.4(a)(9); 246.11(a)(1-3) (c)(1,3-7):** describe the nutrition education goals and action plan and the provisions for providing nutrition education contacts and materials to all participants including the special nutrition education needs of migrant farmworkers and their families, Native Americans, and homeless persons. Also describe methods to be used to provide drug and other harmful substance abuse prevention information. Establish standards for breastfeeding promotion and support including the development and/or maintenance of a peer counselor program consistent with the WIC Breastfeeding Model Components for Peer Counseling.

B. **Food Package Design-246.10:** describe the procedures for determining which foods should be authorized and how the food package should be nutritionally tailored and by whom and plans for substitutions or eliminations to WIC food package. In addition to regulations at 246.10, State agencies should refer to the Food Package Guidance Handbook and Frequently Asked Questions available on the FNS PartnerWeb.

C. **Staff Training-246.11(c)(2):** describe the training and technical assistance provided to WIC professional and paraprofessional personnel who provide nutrition education, and breastfeeding promotion/education to participants.
II – Nutrition Services

A. Nutrition Education

1. Nutrition Education Plans (§246.11)
   a. The State agency develops and coordinates the nutrition education component with consideration of local agency plans, needs, and available nutrition education resources. (§246.11(c)(1))
   ☒ Yes ☐ No

   b. The State agency monitors local agency activities to ensure compliance with provisions set forth in paragraphs §246.11(c)(7), (d), and (e) of this section. (§246.11(c)(5))
   ☒ Yes ☐ No ☐ N/A, State agency has no authorized local agency(ies).

   c. The local agency develops an annual nutrition education plan that is consistent with the State's nutrition education component of Program operations. (§246.11(d)(2))
   ☒ Yes ☐ No ☐ N/A, State agency has no authorized local agency(ies).

   d. The State agency requires that local agency nutrition education include:

   ☒ A needs assessment
   ☒ Goals and objectives for participants
   ☒ Evaluation/follow-up
   ☐ Other (list):

   e. The State agency monitors local agency progress toward meeting nutrition education goals, nutrition education action plans, and objectives via:

   ☒ Quarterly or annually written reports
   ☒ Year-end summary report
   ☒ Annual local agency reviews
   ☐ Other (specify):

   f. State policies reflect the definition of “nutrition education” as defined in §246.2 and in the Child Nutrition Act. The definition is “Nutrition education means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.”

   ☒ Yes ☐ No

ADDITIONAL DETAIL: Nutrition Services Supporting Documentation:
AL WIC Procedure Manual - Chapter 3 Nutrition Education, Chapter 15 Quality Assurance

2. Annual Assessment of Participant Views on Nutrition Education and Breastfeeding Promotion and Support

   a. Is an annual Assessment of Participant Views on Nutrition Education and Breastfeeding Promotion and Support conducted?

   ☐ Yes ☒ No
II – Nutrition Services

b. Check below the method(s) used in the past fiscal year to assess participant views on nutrition education and breastfeeding promotion and support provided by WIC:

☐ State-developed questionnaire issued by local agencies
☐ Locally developed questionnaires (need approval by SA):
  ☐ Yes   ☐ No
☐ State-developed questionnaire issued by State agency.
☐ Focus groups
☒ Other (Specify): Local agencies may obtain input from participants through local suggestion boxes, focus groups, and discussion with participants. The State WIC Office does not oversee these efforts. The State WIC Office does informally talk with participants during Quality Assurance reviews and site visits. Suggestions are also received through ADPH Customer Service surveys and emails and shared with Local Agencies.

c. Results of participant views are:

☐ Used in the development of the State Plan
☐ Used in the development of local agency nutrition education plans and breastfeeding promotion and support plans
☒ Other (specify): These results are used by Local Agencies to modify nutrition education and breastfeeding support efforts to better reach participants.

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):

3. Nutrition Education Contacts (§246.11(a)(1-3): (1) Nutrition education shall be considered a benefit of the program, and shall be made available at no cost to the participant. Nutrition education shall be designed to be easily understood by participants, and it shall bear a practical relationship to participant nutritional needs, household situations, and cultural preferences including information on how to select food for themselves and their families. Nutrition education shall be thoroughly integrated into participant health care plans, the delivery of supplemental foods, and other Program operations. (2) Nutrition education is made available to all participants. Nutrition education may be provided through the local agencies directly, or through other agencies. At the time of certification, the local agency shall stress the positive, long term benefits of nutrition education and encourage the participant to attend and participate in nutrition education activities. However, individual participants shall not be denied supplemental foods for failure to attend or participate in nutrition education activities. (3) The State agency shall ensure that local agencies provide drug and other harmful substance abuse information to all pregnant, postpartum, and breastfeeding women and to parents or caretakers of infants and children participants. Drug and other harmful substance abuse information may also be provided to pregnant, postpartum, and breastfeeding women and to parents or caretakers of infants and children participating in local agency services other than the Program.)

a. The State agency assures that each local agency offers adult participants, parents, or caretakers of infant and child participants, and whenever possible, the child participants themselves at least two (≥2) nutrition education contacts per 6 month certification period, and quarterly nutrition education contacts to participants certified in excess of 6 months, to ensure adequate nutrition education in accordance with §246.11(e) via:

☒ Local agency addresses in the annual nutrition education plan
☒ State nutrition staff monitoring annually during local agency reviews
II – Nutrition Services

☒ Local agency providing periodic reports to State agency
☐ Other (specify):

b. The State agency has developed minimum nutrition education standards for the following participant categories:

☒ Pregnant women  ☒ Breastfeeding women  ☒ Postpartum women
☒ Children  ☒ Infants  ☒ High-risk participants

The minimum nutrition education standards address:

☒ Exit counseling  ☒ Protocols  ☒ Breastfeeding promotion and support
☒ Number of contacts  ☒ Documentation  ☒ Information on substance abuse prevention
☒ Care plans  ☒ Referrals  ☒ Nutrition topics relevant to participant assessment
☒ Counseling methods/teaching strategies
☒ Content (WIC appropriate topics)
☒ Appropriate use of educational reinforcement (videos, brochures, posters, etc.)

c. The State agency allows the following nutrition education delivery methods:

☒ Face-to-face, individually or group
☒ Online/internet
☒ Telephone
☒ Food demonstration
☒ A delivery method performed by other agencies, (i.e., EFNEP, SNAP-Ed). Please describe the type of nutrition education delivered. EFNEP
☐ Other (specify):

d. The State agency ensures that nutrition risk data is used in providing appropriate nutrition education by:

☒ Individual nutrition education contacts tailored to the participant’s needs
☒ Group nutrition education contacts relevant to the participant’s needs (please explain how appropriate group nutrition classes are identified and offered to the participant.)

☒ Other (specify): Online contacts relevant to participant’s needs in keeping with VENA.

e. An individual care plan is provided based on:

☐ Nutritional risk
☐ Priority level
☐ Healthcare provider’s prescription
☐ CPA discretion
☐ Participant set goal
☒ Other (specify): An individual care plan is provided for all participants.
II – Nutrition Services

f. Individual care plans developed include the following components:

<table>
<thead>
<tr>
<th>Must Include</th>
<th>May Include</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

Other (specify by typing into the cells below):

Participant set goal Must be Included ☒ ☐

g. Check the following individuals allowed to provide general or high-risk nutrition education:

<table>
<thead>
<tr>
<th>General Nutrition Education</th>
<th>High-Risk Nutrition Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

Other (specify by typing into the cells below):

| Physicians | ☒ | ☒ |

h. The State agency allows adult participants to receive nutrition education by proxy, per 7 CFR 246.12(r)(1-4).

☐ No

☒ Yes (If yes, check the applicable conditions below):

☐ Proxy is spouse/significant other
II – Nutrition Services

☐ Proxy is parent of adolescent prenatal participant
☐ Proxy is neighbor
☒ Other (specify): Proxies are designated by the participant at certification/subcertification.
☐ Only for certain priorities (specify):

i. The State agency allows parents/guardians of infant and child participants to receive nutrition education by proxy.
☐ No
☒ Yes (If yes, check the applicable conditions below):
☐ Proxy is grandparent or legal guardian of infant or child participant
☐ Proxy is neighbor
☒ Other (specify): Proxies are designated by the participant at certification/subcertification.
☐ Only for certain priorities (specify):

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual: Ch. 3 Nutrition Education, Ch. 4 Nutrition Assessment/Visit Standards, Ch. 15 Quality Assurance.

4. Nutrition Education Materials (§246.11(c)(1,3,4,6,7): The State agency shall (1) develop and coordinate the nutrition education component of Program operations with consideration of local agency plans, needs, and available nutrition education resources; (3) identify or develop resources and educational materials for use in local agencies, including breastfeeding promotion and instruction materials, taking reasonable steps to include materials in languages other than English in areas where a significant number or proportion of the population needs the information in a language other than English; (4) develop and implement procedures to ensure that nutrition education is offered to all adult participants and to parents/caregivers of infant or child participants, as well as child participants whenever possible; (6) establish standards for participant contacts that ensure adequate nutrition education in accordance with paragraph 246.11(e); and (7) establish standards for breastfeeding promotion and support, including a positive breastfeeding supportive clinic environment, a local agency breastfeeding coordinator, breastfeeding promotion, and support for new staff.)

a. The State agency shares material with the Child and Adult Care Food Program (CACFP) at no cost:
☐ Yes ☒ No

If applicable, list other agencies:

If yes, does a written material sharing agreement exist between the relevant agencies, per 7CFR 246.4(a)(9)(ii)?
☐ Yes ☐ No

b. The State agency recommends and/or makes available nutrition education materials for the following topics:
II – Nutrition Services

<table>
<thead>
<tr>
<th>English</th>
<th>Spanish</th>
<th>Other (specify by typing into the cells below):</th>
</tr>
</thead>
<tbody>
<tr>
<td>General nutrition ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Specific nutrition-related disorders ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Maternal nutrition ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Infant nutrition ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Child nutrition ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Nutritional needs of homeless ☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Nutritional needs of migrant farmworkers &amp; their families ☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Nutritional needs of Native Americans ☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Nutritional needs of Teenage prenatal women ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Breastfeeding promotion and support (including troubleshooting problems) ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Danger of harmful substances (alcohol, tobacco and other drugs), as well as secondhand smoke during pregnancy and breastfeeding ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Food Safety ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Physical activity ☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Other (specify by typing into the cells below): ☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Attach a listing of the nutrition education resources available from the State agency or other sources for use by local agencies or specify the location in the Procedure Manual and reference below.

c. The State agency follows written procedures to ensure that nutrition education materials recommended/made available are appropriate in terms of the following:

- ☒ Content
- ☐ Reading level/language
- ☐ Graphic design
- ☐ Cultural relevance

☐ Other (specify):

d. Locally developed nutrition education materials must be approved by State agency prior to use.

- ☒ Yes
- ☐ No

If no, State agency requires local agency to follow a standardized format for evaluating nutrition education materials.

- ☐ Yes
- ☐ No

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):

See attachment AL WIC Publications and Forms; AL WIC Procedure Manual Ch. 3 Nutrition Education
II – Nutrition Services

5. Nutrition Education Needs of Special Populations
   The State agency tailors its nutrition education efforts to address the specific needs of migrant farmworkers (M), homeless individuals (H), substance-abusing individuals (S), and/or breastfeeding women (B) through (check all that apply):

<table>
<thead>
<tr>
<th>M</th>
<th>H</th>
<th>S</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
<td>☒</td>
<td>☒</td>
</tr>
</tbody>
</table>

   Providing nutrition education materials appropriate to this population and language needs
   Providing nutrition curriculum or care guidelines specific to this population
   Requiring local agencies who serve this population to address its special needs in local agency nutrition education plans
   Arranging for special training of local agency personnel who work with this population
   Distributing resource materials related to this population
   Encouraging WIC local agencies to network with one another
   Coordinating at the State and local levels with agencies who serve this population

   Other (specify by typing into the cells below):

   ☐ ☐ ☐ ☐ ☐

   ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):

   See attachment AL WIC Publications and Forms; AL WIC Procedure Manual Ch. 3 Nutrition Education, Ch. 7 Special Populations.

6. Breastfeeding Promotion and Support Plan
   a. The State agency coordinates with local agencies to develop a breastfeeding promotion plan that contains the following elements (check all that apply):
      ☒ Activities such as development of breastfeeding coalitions, task forces, or forums to address breastfeeding promotion and support issues
      ☒ Identification of breastfeeding promotion and support materials
      ☒ Procurement of breastfeeding aids which support the initiation and continuation of breastfeeding (e.g., breast pumps).
      ☒ Training of State/local agency staff
      ☒ Designating roles and responsibilities of staff
      ☒ Evaluation of breastfeeding promotion and support activities
      ☐ Other (specify):

   b. The State agency has established minimum protocols for breastfeeding promotion and support which include the following (check all that apply):
      ☒ A policy that creates a positive clinic environment which endorses breastfeeding as the preferred method of infant feeding
II – Nutrition Services

☒ A requirement that each local agency designate a local agency staff person to coordinate breastfeeding promotion and support activities
☒ A requirement that each local agency incorporate task-appropriate breastfeeding promotion and support training into orientation programs for new staff involved in direct contact with WIC participants.
☒ A plan to ensure that women have access to breastfeeding promotion and support activities during the prenatal and postpartum periods
☒ A plan to ensure that women have access to continued breastfeeding promotion and support when normal operations are disrupted
☒ Participant breastfeeding assessment
☒ Food package prescription and tailoring based on breastfeeding and nutrition assessment
☒ Data collection (at State and local level)
☒ Referral criteria
☒ Peer counseling
☐ Other (specify):

7. Breastfeeding Peer Counseling

a. Does the State agency request WIC Breastfeeding Peer Counseling (BFPC) funds to develop and/or maintain a peer counselor program?

☒ Yes ☐ No

If yes, the State agency is requesting to receive which of the following amounts in BFPC funds for the upcoming fiscal year (select only one amount)? Please consider available BFPC funds from prior fiscal years when making this request.

☐ Full amount of available BFPC funds.
☒ Specific amount of available BFPC funds $0. (Not to exceed the full amount available.)

b. Attach a copy of an updated line-item budget, with written narrative, demonstrating how peer counseling funds are being used for approved peer counseling activities. Include the citation for the attachment here:

Attached BFPC FY 2023 Line-Item Budget.

c. Please provide the approximate number of WIC peer counselors in your State: 12

d. Please provide the number of local agencies designated by the State agency to receive funds to operate peer counseling programs.

8

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 6 Breastfeeding Promotion and Support.

e. The State agency coordinates with local agencies to develop a breastfeeding peer counseling program that contains the following components (see WIC Breastfeeding Model Components for Peer Counseling):

☒ Yes ☐ No

f. Definition of peer counselor defined as follows: paraprofessional recruited and hired from target population; available to WIC participants outside usual clinic hours and outside the WIC clinic

☒ Yes ☐ No
II – Nutrition Services

g. Designated breastfeeding peer counseling program managers/coordinators at State and/or local level
   ☒ Yes □ No

h. Defined job parameters and job descriptions for breastfeeding peer counselors
   ☒ Yes □ No

   If yes, the job parameters for peer counselors (check all that apply):
   ☒ Define settings for peer counseling service delivery (check all that apply):
     □ Home (peer counselor makes telephone calls from home)
     □ Participant’s home (peer counselor makes home visits)
     ☒ Clinic
     □ Hospital
   ☒ Define frequency of participants contacts
   ☒ Define procedures for making referrals
   ☒ Define scope of practice of peer counselor

i. Adequate compensation and reimbursement of breastfeeding peer counselors
   ☒ Yes □ No

j. Training of State and local staff (managers, designated breastfeeding experts, peer counselors, others) using the FNS-developed breastfeeding training curriculum.
   ☒ Yes □ No

k. Training of WIC clinic staff about the role of the WIC peer counselor
   ☒ Yes □ No

l. Establishment of standardized breastfeeding peer counseling program policies and procedures (check all that apply):
   ☒ Timing and frequency of contacts
   ☒ Documentation of participants contacts
   ☒ Referral protocols
   ☒ Confidentiality
   ☒ Use of social media
   □ Other (specify):

m. Adequate supervision and monitoring of breastfeeding peer counselors through (check all that apply):
   □ Regular, systematic contact with peer counselor
   ★ Regular, systematic review of peer counselor contact logs
   ★ Regular, systematic review of peer counselor contact documentation
   ★ Spot checks
   ☒ Observation
   ★ Other (specify): Performance appraisal and supervisor review

n. Participation in community partnerships to enhance the effectiveness of breastfeeding peer counseling programs (check all that apply):

II – Nutrition Services

- Breastfeeding coalitions
- Businesses
- Community organizations
- Cooperative extension
- La Leche League
- Hospitals
- Home visiting programs
- Private Healthcare clinics
- Other (specify):

**o. Adequate support of peer counselors by providing the following (check all that apply):**
- Timely access to WIC-designated breastfeeding experts for referrals outside peer counselors’ scope of practice
- Mentoring of newly trained peer counselors in early months of job
- Regular contact with supervisor
- Participation in clinic staff meetings as part of WIC team
- Opportunities to meet regularly with other peer counselors
- Other (specify):

**p. Provision of training and continuing education of peer counselors (check all that apply):**
- Standardized training using FNS-developed curriculum
- Ongoing training at regularly scheduled meetings
- Home Study
- Opportunities to “shadow” or observe lactation experts and other peer counselors
- Training/experience to become senior level peer counselors, WIC-Designated Breastfeeding Expert, etc.
- Other (specify):

**ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):**
AL WIC Procedure Manual Ch. 6 Breastfeeding Promotion and Support.

**B. Food Package Design**

1. **Authorized WIC-Eligible Foods**

   a. Include a copy of the current State-authorized food list and the individual food package design for each category in the Appendix or cite Procedure Manual reference:

   **b. The State agency considers the following when making decisions about authorizing WIC-eligible foods other than WIC formulas:**

   - Federal regulatory requirements
   - Participant acceptance
   - Statewide availability
   - Healthcare provider request
   - Nutritional value
   - Cost
   - Participant cultural consideration
   - Other (specify):
II – Nutrition Services

c. The State agency utilizes additional State nutritional criteria for authorizing foods for the State WIC food list, in addition to the minimum Federal regulatory requirements.

☑ Yes ☐ No

If yes, describe actual values or criteria identified by the State. Enter “n/a” if not applicable. (i.e. artificial sweeteners, artificial color/flavor, low sodium, etc.):

See AL WIC Procedure Manual Ch. 5 Supplemental Foods Attachments 5-1 Criteria for Approving AL WIC Food Packages and 5-2 AL WIC Approved Foods Brochure.

d. The State agency provides the maximum amount of all authorized foods allowed in accordance with the Federal WIC regulations at section 246.10 for each of the seven WIC Food Packages (I-VII).

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑</td>
<td></td>
</tr>
<tr>
<td>☑</td>
<td></td>
</tr>
<tr>
<td>☑</td>
<td></td>
</tr>
<tr>
<td>☑</td>
<td></td>
</tr>
<tr>
<td>☑</td>
<td></td>
</tr>
<tr>
<td>☑</td>
<td></td>
</tr>
</tbody>
</table>

e. WIC Formulas:

(1) The State agency establishes policies regarding the issuance of primary contract, contract, and non-contract brand infant formula.

☑ Yes ☐ No

(2) The State agency requires medical documentation for contract infant formula (that does not meet the requirements in Table 4 at 246.10(e)(12) per 7 CFR 246.10(d)(1)(vi).

☐ Yes ☑ No

(3) The State agency requires medical documentation for contract formula (other than primary contract formula per 7 CFR 246.16a(c)(9).

☐ Yes ☑ No

(4) The State agency requires medical documentation for non-contract infant formula.

☑ Yes ☑ No

(5) The State agency requires medical documentation for exempt infant formula/ WIC eligible nutritionals.

☑ Yes ☐ No

(6) State agency authorizes local agencies to issue a non-contract brand infant formula that meets the requirements of Table 4 in 246.10(e)(12) without medical documentation in order to meet religious eating patterns:

☑ Yes ☐ No

(7) The State agency coordinates with medical payors and other programs that provide or reimburse for exempt infant formulas and WIC-eligible nutritionals per Section 246.10(e)(3)(vi).

☐ Yes ☑ No

If yes, describe the State agency reimbursement and/or referral system used for this
II – Nutrition Services

coordination? Include describing monitoring/tracking tools in place to ensure program integrity.

If no, has the State agency met the requirement to annually contact their State Medicaid counterparts regarding the payment of WIC-eligible exempt infant formulas and medical foods to mutual program participants per WIC Policy Memo #2015-7?

☒ Yes ☐ No

Please attach and provide the citation for any existing written agreement between the State agency and the State Medicaid office as well as local government agencies or private agencies regarding payment of WIC-eligible exempt infant formulas and medical foods.

f. Rounding:
   (1) The State agency management information systems is flexible for issuing infant formula to support the option to use either method (i.e., monthly issuance or rounding up methodology) for the timeframes (the number of months the participant will receive the food packages).
      ☒ Yes ☐ No

   (2) The State agency management information systems supports the ability for infant formula to be individual tailored when using either method (i.e., monthly issuance or rounding up methodology) for the timeframes (the number of months the participant will receive the food packages).
      ☒ Yes ☒ No

   (3) Does the State agency issue infant formula according to the specific rounding methodology per Section 246.10(h)(1)?
      ☒ Yes ☐ No

   (4) Does the State agency issue infant foods according to the specific rounding methodology per Section 246.10(h)(2)?
      ☒ Yes ☒ No

   (5) If the State agency implemented the rounding option for issuing infant foods, are there established written policies in place?
      ☒ Yes ☐ No

g. Is infant formula issued in the 1st month to partially breastfed infants?
   ☒ Yes ☐ No

h. State policies & materials reflect the definition of “supplemental foods” as defined 246.2 and in the Child Nutrition Act.
   ☒ Yes ☐ No

i. Does the State agency only allow issuance of reduced fat (2%) milk to children ≥ 24 months of age and women with certain conditions, including but not limited to, underweight and maternal weight loss during pregnancy, in accordance with Footnote 7 of Table 2 in 246.10(e)(10)?
   ☒ Yes ☐ No

j. Does the State agency allow issuance of fat-reduced milks to 1-year-old children for whom
II – Nutrition Services

overweight, or obesity is a concern, in accordance with Footnote 7 of Table 2 in 246.10(e)(10)?
☐ Yes ☒ No

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 5 Supplemental Foods.

2. Individual Nutrition Tailoring

a. The State agency allows individual nutrition tailoring of food packages only in accordance with 246.10(c).
☒ Yes ☐ No

b. The State agency provides a special individually tailored package for
☒ Homeless individuals and those with limited cooking facilities
☒ Residents of institutions
☐ Other (specify):

ADDITIONAL DETAIL:
Please attach copies of all food packages that are tailored. Nutrition Services Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 5 Supplemental Foods.

c. The State agency develops written individual nutrition tailoring policies and supportive science-based nutrition rationale based on the following participant characteristics:
☐ Does not develop individual nutrition tailoring policies
☒ Develops based on (check all that apply):
☒ Nutrition risk/nutrition and breastfeeding assessment
☒ Participant preference
☒ Household condition
☐ Other (specify):

d. The State agency allows local agencies to develop specific individual tailoring guidelines.
☐ Yes ☒ No

If yes, check those of the following methods used by the State agency to review or approve local agency tailoring guidelines:
☐ Local agencies are required to submit individual tailoring guidelines for State approval
☐ Local agency individual tailoring guidelines are monitored annually during local agency reviews
☐ Agency reviews
☐ Other (specify):

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 5 Supplemental Foods.
II – Nutrition Services

3. Prescribing Packages

a. Individuals allowed to prescribe food packages:

<table>
<thead>
<tr>
<th></th>
<th>Standard food package</th>
<th>Individually tailored food package</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPA</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Other (specify by typing into the cells below):</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>WIC Clerk</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

ADDITIONAL DETAIL: Provide a copy of the actual foods included in the homeless and institution packages in the Appendix or cite Procedure Manual. Attach copies of all food packages that are tailored. Nutrition Services Appendix and/or Procedure Manual (citation): AL WIC Procedure Manual Ch. 5 Supplemental Foods.

C. Staff Training

The State agency provides or sponsors the following training for WIC competent professional authorities:

<table>
<thead>
<tr>
<th>Professional/Paraprofessional</th>
<th>Professionals</th>
<th>Paraprofessionals (may or may not be CPAs in some SAs)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Regularly</td>
<td>As Needed</td>
</tr>
<tr>
<td>General nutrition education methodology</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>State certification policies/procedures</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Anthropometric measurements</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Blood work procedures</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Nutrition counseling techniques</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Breastfeeding promotion/support</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Dietary assessment techniques</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Prescribing &amp; tailoring food packages</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Referral protocol</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Maternal, infant, and child nutrition</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Cultural competencies</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Customer service</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Immunization Screening/referral</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Care Plan Development</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>VENA staff competency training</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Substance abuse prevention</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Delivery of nutrition education remotely</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Other (specify by typing in cells below):</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
II – Nutrition Services

ADDITIONAL DETAIL: Nutrition Services Appendix and/or Procedure Manual (citation): (Please describe the type of training conducted or offered that correlate to the boxes selected above).

AL WIC Procedure Manual Ch. 1 Program Administration, Ch. 3 Nutrition Education, Ch. 6 Breastfeeding Promotion and Support.
## WIC Breastfeeding Peer Counseling Line Item Budget Worksheet

<table>
<thead>
<tr>
<th>State Agency Name</th>
<th>Alabama</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fiscal Year</td>
<td>2023</td>
</tr>
</tbody>
</table>

### Staff Salaries (State and Local)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Salary, Fringe, and Indirect Costs</td>
<td>$235,000.00</td>
</tr>
<tr>
<td>Peer Counselor Salary, Fringe, and Indirect Costs</td>
<td>$182,000.00</td>
</tr>
<tr>
<td>Other Subrecipient grants for Jefferson and Mobile Counties</td>
<td>$264,000.00</td>
</tr>
<tr>
<td><strong>Total Salaries</strong></td>
<td><strong>$681,000.00</strong></td>
</tr>
</tbody>
</table>

### Program Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
<td>$5,000.00</td>
</tr>
<tr>
<td>Communications and Forms</td>
<td>$10,500.00</td>
</tr>
<tr>
<td>Office Supplies</td>
<td>$2,000.00</td>
</tr>
<tr>
<td>Equipment</td>
<td>$11,500.00</td>
</tr>
<tr>
<td>Advertising</td>
<td>$40,000.00</td>
</tr>
<tr>
<td>Rent and Utilities</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td><strong>Total Program Expenses</strong></td>
<td><strong>$69,000.00</strong></td>
</tr>
</tbody>
</table>

### Training Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training Materials</td>
<td>$5,000.00</td>
</tr>
<tr>
<td>Conferences and Workshops</td>
<td>$15,000.00</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td><strong>Total Training Expenses</strong></td>
<td><strong>$20,000.00</strong></td>
</tr>
</tbody>
</table>

### Educational Materials

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Educational Materials</td>
<td></td>
</tr>
</tbody>
</table>

### Other Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indirect Costs</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td><strong>Total Other Expenses</strong></td>
<td>$-</td>
</tr>
</tbody>
</table>

### Fiscal Year 2023 Total BFPC Expenses and Budget

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$770,000.00</td>
</tr>
</tbody>
</table>
**Narrative**

Please provide a written narrative describing how the available WIC breastfeeding peer counseling funds will be used for the activities described on the previous page. If necessary, additional documentation may be provided as a separate attachment.

The majority of Peer Counseling funds are allocated to salaries of the State Breastfeeding Peer Counselor Coordinator, State Breastfeeding Coordinator, Peer Counselors, and Peer Counselor Supervisor salaries as well as fringe and indirect costs. The State WIC Program will continue working with ADPH Human Resources and State of Alabama Personnel Department to create at least one full-time, merit Peer Counselor position in each district. Remaining funds are directed for training, conferences/workshops, cellular phones, supplies, equipment and travel, all of which are essential for program soundness, as well as advertising to promote the BFPC program and recruit BFPCs.
## WIC Directory of Publications and Forms

August, 2022

<table>
<thead>
<tr>
<th>ADPH Form:</th>
<th>Description</th>
<th>Revision Date:</th>
<th>Packaged:</th>
<th>Available from:</th>
</tr>
</thead>
<tbody>
<tr>
<td>WIC-100/100S</td>
<td>Do You Need Additional Information</td>
<td>2/12</td>
<td>-</td>
<td>Doc. Library</td>
</tr>
<tr>
<td>WIC-104</td>
<td>WIC Referral/Medical Information Form</td>
<td>8/20</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-111a</td>
<td>WIC Formula Prescription for Infants</td>
<td>8/21</td>
<td>-</td>
<td>Doc Library (alabamapublichealth.gov/wic)</td>
</tr>
<tr>
<td>WIC-111b</td>
<td>WIC Formula Prescription for Child and Woman</td>
<td>8/21</td>
<td></td>
<td>Doc Library (alabamapublichealth.gov/wic)</td>
</tr>
<tr>
<td>WIC-112</td>
<td>Formula Log/Issuance Sheet</td>
<td>8/18</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-114</td>
<td>Hospital Special Formula Notification</td>
<td>8/21</td>
<td></td>
<td>State WIC Office</td>
</tr>
<tr>
<td>WIC-115/115S</td>
<td>Letter of Support (Spanish on Back)</td>
<td>06/99</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-116/116S</td>
<td>No Proof Form (Spanish on Back)</td>
<td>06/99</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-117</td>
<td>Immunization Book Marker</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-118/118S</td>
<td>What to Bring to Your Appointment (Spanish on Back)</td>
<td>02/16</td>
<td>Pads of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-119</td>
<td>AI WIC Program Eligibility Expiration Notice</td>
<td>12/16</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-126/126S</td>
<td>How WIC Helps</td>
<td>02/10</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-140</td>
<td>Postcard - Reminder</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-154/154S</td>
<td>Mom-To-Be (Spanish on Back)</td>
<td>6/18</td>
<td></td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-155E</td>
<td>Clinic ID/Appointment card</td>
<td>4/19</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-156</td>
<td>Warning Insert</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-157/157S</td>
<td>Who is Eligible for WIC (Spanish on Back)</td>
<td>5/18</td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-158</td>
<td>Get Growing with WIC Infant Record Card</td>
<td>03/05</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-160</td>
<td>We Missed You/Card</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-161</td>
<td>How WIC Works for You/Poster</td>
<td>10/01</td>
<td>Single Poster</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-205</td>
<td>WIC Is Good for You and Your Children/Card</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>ADPH Form:</td>
<td>Description:</td>
<td>Revision Date:</td>
<td>Packaged:</td>
<td>Available from:</td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------------------------------------------</td>
<td>----------------</td>
<td>-----------</td>
<td>-----------------</td>
</tr>
<tr>
<td>WIC-280/280S</td>
<td>Listeriosis</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-304/304S</td>
<td>Breastfeeding in the Hospital</td>
<td>05/01</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-308/308S</td>
<td>Nutrition During Breastfeeding</td>
<td>05/01</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-330</td>
<td>Breastfeeding Supply Accountability Form</td>
<td></td>
<td>Packs of 100</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-331</td>
<td>Clinic Issuance and Inventory Form for Breast Pumps and Silicone Nipple Shields</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-331a</td>
<td>Clinic Issuance and Inventory Form for Non-Returnable Breastfeeding Items</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-333</td>
<td>Breast Pump Loan/Release Form</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-335</td>
<td>Single-User Electric Breastpump Issuance</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-351</td>
<td>Requisition Breastfeeding Resources Form</td>
<td></td>
<td>-</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-352</td>
<td>Property Removal Form</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-401</td>
<td>WIC Operations – Equipment/Supply Request Form</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-402</td>
<td>Record Destruction Request Form</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-403</td>
<td>Coloring Book/Fruits &amp; Veggies – More Matters</td>
<td>10/10</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-404/404S</td>
<td>What’s On Your Plate?</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-411/411S</td>
<td>Calcium for Strong Bones and Teeth</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-412/4125</td>
<td>You Need Vitamin A</td>
<td>4/96</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-413/413S</td>
<td>You Need Vitamin C</td>
<td></td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-414/4145</td>
<td>Iron You Need It!</td>
<td>08/05</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-416/4165</td>
<td>Less Salt in Your Diet</td>
<td>05/03</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-426/4265</td>
<td>Lead and Nutrition</td>
<td>05/03</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-428</td>
<td>Get Healthy AL/Fruits &amp; Veggies - More Matters</td>
<td>09/07</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-430/4305</td>
<td>What to Eat Before Your Baby Comes</td>
<td>4/5</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-431</td>
<td>Nutrition for the Teenage Mother-to-Be</td>
<td>03/96</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-432/4325</td>
<td>Indigestion and Heartburn (Spanish on Back)</td>
<td>12/95</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>ADPH Form:</td>
<td>Description:</td>
<td>Revision Date:</td>
<td>Packaged:</td>
<td>Available from:</td>
</tr>
<tr>
<td>------------</td>
<td>--------------</td>
<td>----------------</td>
<td>------------</td>
<td>----------------</td>
</tr>
<tr>
<td>WIC-433/433S</td>
<td>Nausea</td>
<td>4/2</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-434/434S</td>
<td>Constipation and Hemorrhoids</td>
<td>01/96</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-435/435S</td>
<td>When You Are Gaining Too Fast</td>
<td>12/95</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-436/436S</td>
<td>When You Are Not Gaining</td>
<td></td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-437/437S</td>
<td>Why You Should Quit Smoking</td>
<td>03/96</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-438/438S</td>
<td>Drugs &amp; Alcohol Can Hurt Unborn Baby</td>
<td>06/04</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-439/439S</td>
<td>WIC Wants You To Know Healthy Choices</td>
<td></td>
<td>Packs of 100</td>
<td>Doc Library/ Warehouse</td>
</tr>
<tr>
<td>WIC-440/440S</td>
<td>Infant-Feeding Your Baby 0 to 6 Months</td>
<td>07/09</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-441/441S</td>
<td>Infant-Feeding Your Baby 6 to 9 Months</td>
<td>07/09</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-442/442S</td>
<td>Infant-Feeding Your Baby 9 to 12 Months</td>
<td>07/09</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-443/443S</td>
<td>How to Make Formula</td>
<td></td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-444/444S</td>
<td>Weaning</td>
<td></td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-445/445S</td>
<td>Infant 7-12 Months</td>
<td></td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-446/446S</td>
<td>Infant – Finger Foods</td>
<td></td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-447</td>
<td>Infant – Weaning</td>
<td></td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-448/448S</td>
<td>Infant - Nursing Bottle Cavities</td>
<td>03/96</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-449</td>
<td>Infant - Constipation</td>
<td>03/95</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-461/461S</td>
<td>When Child is Constipated 1-2</td>
<td>09/94</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-462/462S</td>
<td>When Child is Constipated 2-5</td>
<td>03/96</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-464/464S</td>
<td>When a Child Needs to Gain Weight</td>
<td>03/96</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-466</td>
<td>Develop Good Eating Habits</td>
<td>02/95</td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-467/467S</td>
<td>Go Glow Grow</td>
<td></td>
<td>Packs of 25</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-470/470S</td>
<td>Healthy Weight of Life</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-471</td>
<td>Healthy Eating for 1 Year Olds</td>
<td>4/1</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>ADPH Form:</td>
<td>Description:</td>
<td>Revision Date:</td>
<td>Packaged:</td>
<td>Available from:</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------------------------------------------</td>
<td>----------------</td>
<td>------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>WIC-472</td>
<td>Healthy Eating for 2 Year Olds</td>
<td>4/1</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-473</td>
<td>Healthy Eating for 3 Year Olds</td>
<td>4/1</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-474</td>
<td>Healthy Eating for 4 Year Olds</td>
<td>4/1</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-475/475S</td>
<td>Folic Acid for Women</td>
<td>12/97</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-482/482S</td>
<td>Ten Facts About Fruits and Veggies - More Matters (Spanish on Back)</td>
<td>07/10</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-483/483S</td>
<td>Ten Safety Tips for Handling Raw Fruits &amp; Veggies / Fruits &amp; Veggies - More Matters (Spanish on Back)</td>
<td>07/10</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-492</td>
<td>Drugs &amp; Alcohol Hurt Your Unborn Baby/Poster (Bilingual)</td>
<td>06/04</td>
<td>Single Poster</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-493/493S</td>
<td>Second Hand Smoke (Spanish on Back)</td>
<td>-</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-600/600S</td>
<td>Get Healthy with WIC: Try Something New with Fruits and Vegetables</td>
<td>Packs of 100</td>
<td>Warehouse</td>
<td></td>
</tr>
<tr>
<td>WIC-601</td>
<td>Get Healthy with WIC: Make Half of Your Grains - Whole Grains</td>
<td>Packs of 100</td>
<td>Warehouse</td>
<td></td>
</tr>
<tr>
<td>WIC-602</td>
<td>Get Healthy with WIC: A Healthy Choice Low Fat Dairy</td>
<td>Packs of 100</td>
<td>Warehouse</td>
<td></td>
</tr>
<tr>
<td>WIC-603</td>
<td>Get Healthy with WIC: More Than Meat Protein</td>
<td>Packs of 100</td>
<td>Warehouse</td>
<td></td>
</tr>
<tr>
<td>WIC-664/664S</td>
<td>Playing with Your Baby</td>
<td>10/03</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-665/665S</td>
<td>Playing with Your Toddler</td>
<td>10/03</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-666/666S</td>
<td>Playing with Your Preschooler</td>
<td>10/03</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-667/667S</td>
<td>Making Mealtimes Happy!</td>
<td>6/4</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-669/669S</td>
<td>Having Problems Feeding Your Child?</td>
<td>6/4</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-670/670S</td>
<td>Just Move It!</td>
<td>Packs of 100</td>
<td>Warehouse</td>
<td></td>
</tr>
<tr>
<td>WIC-671/671S</td>
<td>Help Your Child Drink for Health!</td>
<td>06/04</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-672/672S</td>
<td>Setting Limits</td>
<td>06/04</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-673</td>
<td>ADPH Employee/Family Receiving WIC Benefits or Serving as a Proxy</td>
<td>8/18</td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-674/674S</td>
<td>Lead the Way - Choose Fruits/Vegs and Physical Activity</td>
<td>06/04</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-675</td>
<td>Learner Centered Approach</td>
<td>Packs of 100</td>
<td>Warehouse</td>
<td></td>
</tr>
<tr>
<td>WIC-676</td>
<td>Guide for Obtaining Hemoglobin (Hgb)/Hematocrit (Hct) Values</td>
<td>Distributed by State Office when revised</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADPH Form:</td>
<td>Description:</td>
<td>Revision Date:</td>
<td>Packaged:</td>
<td>Available from:</td>
</tr>
<tr>
<td>----------------------------</td>
<td>-------------------------------------------------</td>
<td>----------------</td>
<td>----------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>WIC-677</td>
<td>Effective Communication Checklist</td>
<td>1/17</td>
<td></td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-678</td>
<td>WIC Coordinator Monitoring Checklist</td>
<td></td>
<td>-</td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-679</td>
<td>WIC Coordinator Monitoring Checklist-Comments Page</td>
<td></td>
<td></td>
<td>Doc Library</td>
</tr>
<tr>
<td>WIC-694/694S</td>
<td>WICHealth.org Insert</td>
<td>09/16</td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-697</td>
<td>WIC Measures Up!</td>
<td>2016</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-698</td>
<td>Let WIC Work for You!</td>
<td>2016</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-700/700S</td>
<td>WIC Approved Foods</td>
<td>7/17</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-720</td>
<td>Breastfeeding Certificate</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-737</td>
<td>Electric Breast Pump Reminder/Postcard</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-738/738S</td>
<td>Why Should I Nurse My Baby</td>
<td></td>
<td>Single Books</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-740/740S</td>
<td>Pump Kit Cleaning</td>
<td></td>
<td>Pads of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-750</td>
<td>Peer Counselor Participant Contact Log</td>
<td>7/22</td>
<td>Packs of 50</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-752</td>
<td>Alabama WIC Peer Counseling Program-Green Card (Spanish on Back)</td>
<td>1/6</td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-753</td>
<td>Peer Counselor Weekly Activity Report</td>
<td>7/22</td>
<td>Packs of 50</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-754</td>
<td>Moms Helping Moms. Meet Your WIC Breastfeeding PC</td>
<td>8/18</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-755</td>
<td>WIC Circle of Care for Breastfeeding Mothers. How PC's Help</td>
<td>8/18</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-760/760S</td>
<td>Our First Week – Breastfeeding Information</td>
<td>11/8</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-762</td>
<td>Ten Steps to Successful Breastfeeding</td>
<td></td>
<td>Packs of 50</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-763/763S</td>
<td>Breastfeeding: The Older Baby</td>
<td></td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-764/764S</td>
<td>Breastfeeding: Growing Healthy Babies &amp; Moms</td>
<td></td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-766/766S</td>
<td>Expressing Your Breast milk</td>
<td></td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-767/767S</td>
<td>Breastfeeding Basics: Getting Started</td>
<td></td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-768/768S</td>
<td>Managing Basic Breastfeeding Challenges</td>
<td>10/12</td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>WIC-770/770S</td>
<td>Thinking about Breastfeeding?</td>
<td>7/16</td>
<td>Packs of 100</td>
<td>Doc Library/Warehouse</td>
</tr>
<tr>
<td>ADPH Form:</td>
<td>Description:</td>
<td>Revision Date:</td>
<td>Packaged:</td>
<td>Available from:</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------------------------------</td>
<td>----------------</td>
<td>------------</td>
<td>----------------</td>
</tr>
<tr>
<td>WIC-771</td>
<td>Busy Moms Loving Support</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-772</td>
<td>Encouragement Loving Support</td>
<td>2014</td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-773</td>
<td>Ready, Set, Breastfeed! Loving Support</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-774</td>
<td>10 Tips for Dads Loving Support</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-775</td>
<td>Confidence Loving Support</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-782</td>
<td>Breastfeeding Support Card</td>
<td></td>
<td>Packs of 100</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-NVRA-1</td>
<td>A &amp; B, State of AL Agency-Based Voter Registration Application</td>
<td></td>
<td>Packs of 250</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-NVRA-2</td>
<td>State of AL Postcard Voter Registration Form</td>
<td></td>
<td>Packs of 200</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-NVRA-3</td>
<td>State of AL instructions for Agency-Based compliance to NVRA</td>
<td></td>
<td>Single Sheet</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-NVRA-4</td>
<td>Voter Registration Application Transmittal Form</td>
<td></td>
<td>Single Sheet</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-NVRA-5</td>
<td>Envelope for mailing to Board of Registration</td>
<td></td>
<td>Packs of 25</td>
<td>Warehouse</td>
</tr>
<tr>
<td>WIC-NVRA-6</td>
<td>Registration Guideline</td>
<td></td>
<td>Single Sheet</td>
<td>Warehouse</td>
</tr>
<tr>
<td></td>
<td>Expired/Damaged Formula Form</td>
<td>9/16</td>
<td></td>
<td>Doc Library</td>
</tr>
<tr>
<td></td>
<td>Vendor Training Checklist Form</td>
<td></td>
<td></td>
<td>State WIC Office</td>
</tr>
</tbody>
</table>
Chapter III

Management Information System (MIS)
III. MANAGEMENT INFORMATION SYSTEM (MIS)

(Please indicate) State Agency: Alabama for FY: 2023

This section, Management Information System (MIS) involves the planning, documentation, security/confidentiality and production of the necessary reports relating to program operations through the utilization of automated data processing services at the State and local level.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO

A. **System Planning and Operation** – 246.4(a)(11)(iv): Describe the procedures for planning, approving and monitoring Automated Data Processing (ADP) goods and services, and any interaction with other statewide ADP operations which may take place, including system costs for services and security.

B. **Participant Characteristics Minimum Data Set (MDS)** – 246.4(a)(11)(i): All State agencies currently collect all required Minimum Data Set items. Please confirm that your State agency will continue to do so. For the Supplemental Data Set (SDS), which varies by the capacity of State systems, please describe the data items which are reported electronically regarding participant characteristics and whether these items are currently being collected or if there are plans to collect them in the future.

C. **WIC Systems Functional Requirements Checklist** – 246.4(a)(8); (9); (11); (12); (13); (14); (15); and (18): Describe those functions which are currently incorporated into the MIS or which are planned to be incorporated in the future.
A. System Planning and Operation (Online and Offline)

1. Management Information System Planning

a. The WIC State agency is included in the following comprehensive Statewide ADP plan(s):
   - ☐ Title IVa (TANF)
   - ☐ Title V (MCH)
   - ☐ Title XIX (Medicaid)
   - ☐ Supplemental Nutrition Assistance Program (SNAP)
   - ☒ Other (specify): The Alabama Department of Public Health follows state procedures for planning, approving and monitoring goods and services as regulated by the Office of Information Technology (OIT) of the Alabama Department of Finance. See AL OIT Policy 380-01, Computer Device Refresh.
   - ☐ No

   If no, please provide a copy of the WIC State agency's ADP utilization plan.

b. The State agency has written procedures for monitoring and approving local agency requests for ADP goods and services. If yes, please provide a copy of written procedures.
   - ☐ Yes
   - ☒ No

   ADDITIONAL DETAIL: Management Information System Appendix and/or Procedure Manual (cite):

2. System Documentation

a. The State system is fully documented in accordance with (check all that apply):
   - ☒ USDA/FNS Advance Planning Document Handbook No.901
   - ☐ USDA/FNS ADP Security Guide
   - ☐ Other (specify):

b. The State agency maintains overall system documentation (check all that apply):
   - ☐ A general design
   - ☒ User's manual
   - ☒ Method for updating documentation for system changes/modifications
   - ☒ A detailed design
   - ☐ Maintenance manual

   Note: These documents are NOT required for FNS review or submission with the State plans but should be available if requested.

   ADDITIONAL DETAIL: Management Information System Appendix and/or Procedure Manual (cite): All documents related to the Crossroads MIS are available for access by state and local staff.

3. Automated Data Processing Services

a. Indicate below whether the following ADP functions, if applicable, are performed by State agency staff or are contracted to an outside firm.

<table>
<thead>
<tr>
<th>Function</th>
<th>Performed SA Staff</th>
<th>Performed LA Staff</th>
<th>Contracted to Outside Firm (specify company name):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data entry</td>
<td>☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Food instrument production</td>
<td>☐</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>EBT Data Reports</td>
<td>☒</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Feasibility study</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>ADP development</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>ADP system hardware operation</td>
<td>☒</td>
<td>☐</td>
<td></td>
</tr>
</tbody>
</table>
Custom software development ☐ ☐ ☐ Custom software maintenance ☒ ☐ ☐ Gainwell=XRUG

maintenance and enhancement contract

Printing forms/FIs ☐ ☒ ☐ Backup computer facility ☒ ☐ ☐
Other (specify): ☐ ☐ ☐

Back-up files ☒ ☐ ☐ EBT processing ☒ ☒ ☐ Conduent=eWIC
    Processor ☐ ☐ ☐

b. The State agency has a contract in effect (check all that apply). Please provide a copy of agreement.
☐ Equipment ☐ Services ☐ Software

c. The State agency has methods in place for ensuring that the cost of equipment or services used by WIC and other programs are equitably prorated among funding sources. Please provide policy of method used.
☒ Yes ☐ No
d. The State agency periodically reviews system costs billing.
☒ Yes ☐ No
e. The State agency acquires banking services through:
☐ Competitive bids among banks within the State
☐ Competitive bids among in-State and out-of-State banks
☐ Use of State agency designated bank
☐ Other:

f. The State agency acquires EBT services through:
☐ Competitive bids among EBT processors
☐ State hosted EBT services
☒ Other: Request for Proposal (RFP).

ADDITIONAL DETAIL: Management Information System Appendix and/or Procedure Manual (cite):

4. System Security/Data Confidentiality

a. To ensure that data files and computer programs are protected, the State agency ensures that (check all that apply):
☒ There is a separate organizational area/individual to control access to electronic storage media.
☒ Access to WIC Program data files is controlled through password access or similar control.
☒ Operational personnel are limited to only those jobs for which they are responsible.
☒ Passwords are protected.
☒ Passwords are changed periodically.
☐ The system access procedures are audited at least once a year. Please provide a copy of access procedures.
☒ Procedures are implemented for timely removing passwords, ID’s etc. when personnel leave.
☒ Biennial security reviews are performed by ADPH Security Officer. Please provide a written summary of the most current biennial security review.
Periodic risk assessments are performed by ADPH Security Officer.

Data uploaded to mobile applications, participant portals, etc. are secure and participant information is protected.

Other (specify): Password auditing (every 60 days) is an internal process not performed by an external auditor.

b. To ensure that disaster contingency plans (e.g., file storage, backup hardware, and software procedures) are sufficient to allow the management information and electronic benefit transfer systems to recover and continue processing after fire, flood or similar disaster, the State agency ensures that (check all that apply):

- Backup copies of files and program are stored off-site in a secure location. Please provide address of location.
  ADPH Warehouse, 1635 Mitchell Young Road, Montgomery, Alabama 36108
- Backup copies are kept up to date.
- There is an agreement with another processing unit with compatible hardware to provide services in an emergency. Please provide copy of agreement.
- A contingency plan is in place in the event of service interruption. Please provide a copy of contingency plan.
- A recent test of the WIC system or mock disaster recovery operation has been conducted at the backup facility. Please provide a written summary of the conducted test.
- Other (specify):

ADDITIONAL DETAIL: Management Information System Appendix and/or Procedure Manual (cite):

5. Description of MIS changes that occurred in the past year: Temporary CVB increases, Crossroads desktop for end of Internet Explorer support.

6. Description of MIS changes planned for the upcoming year: Crossroads user group requested defect fixes and enhancements, risk code changes.

B. Participant Characteristics Minimum Data Set

The Participant Characteristics (PC) Minimum Data Set (MDS) contains data items which are reported to FNS electronically by State agencies in April in even numbered years on all or a State-representative sample of participants. The MDS has required data items which must be collected and reported. The Supplemental Data Set (SDS) is comprised of data items which State agencies have agreed are desirable to collect and report at the national level. Please check MDS or SDS data items the State agency currently collects in its Information Systems and those MDS or SDS data items it is planning to collect within the next two years.

State Agency IS Collects:

- **State Agency ID.** A unique number that permits linkage to the WIC State agency where the participant was certified.

- **Local Agency ID.** A unique number that permits linkage to the local agency where the participant was certified as eligible for WIC benefits.

- **Service Site ID.** A unique number that permits linkage to the service site where certified. Either local agency ID or service site ID may be reported according to the level the State Agency feels appropriate. At a minimum, State agencies must provide agency names and addresses for each ID provided on their files.
☒ **Case ID.** A unique record number for each participant which maintains individual privacy at the national level. (This may not be the case number used in the State agency's MIS for the individual.) Participant or Case IDs for each participant should continue to maintain individual privacy at the national level.

☒ **Client Date of Birth.** Month, day and year of participant's birth reported in MMDDYYYY format.

☒ **Client Race/Ethnicity.** The classification of the participant into one of the five (5) racial/ethnic categories: For race: American Indian or Alaskan Native; Asian; Black or African American; Native Hawaiian or Other Pacific Islander; and White. For ethnicity: Hispanic or Latino; Not Hispanic or Latino.

☒ **Certification Category.** The category---one of five (5) possible categories---under which a person is certified as eligible for WIC benefits: pregnant woman; breastfeeding woman; postpartum woman (not breastfeeding); infant (under 12 months); or child (12-59 months).

☒ **Expected Date of Delivery or Weeks Gestation.** For pregnant women, the projected date of delivery (MMDDYYYY format) or the number of weeks since the last menstrual period as determined at WIC Program certification.

☒ **Date of Certification.** The date the person was declared eligible for the most current WIC Program certification. Month, day, and year should be reported in MMDDYYYY format.

☒ **Sex.** For infants and children, male or female.

☒ **Priority Level.** Participant priority level for WIC Program certification.

☒ **Participation in TANF, SNAP, Medicaid.** The participant's reported participation in each of these programs at the time of the most recent WIC Program certification.

☒ **Migrant Status.** Participant migrant status according to the federal WIC Program definition of a migrant farm worker (currently counted in the FNS 798 report).

☒ **Number in Family/Household or Economic Unit.** The number of persons in the family/household or economic unit upon which WIC income eligibility was based. A self-declared number in the family/household or economic unit may be reported for participants whose income was not required to be determined as part of the WIC certification process. These participants include adjunctively income-eligible participants (due to TANF, SNAP, or Medicaid participation) and those participants deemed income eligible under optional procedures available to the State Agency in Federal WIC Regulations, Section 246.7(d)(2)(vi-viii) (means-tested programs identified by the State for automatic WIC Program income eligibility, income eligibility of Indian and in-stream migrant farmworker applicants).

☒ **Family/Household or Economic Unit Income.** For persons for whom income is determined during the certification process, the income amount that was determined to qualify them for the WIC Program during the most recent certification. For descriptive purposes only, for participants whose income was not required to be determined as part of the WIC Program certification process, the self-reported income at the time of certification. These participants include adjunctively income-eligible participants and those persons deemed eligible under optional procedures available to the State Agency in Federal WIC Regulations, Section 246.7(d)(2)(vi-viii). Zero should not be used to indicate income values that are missing or not available. Zero should indicate only an actual value of zero.

☒ **Nutrition Risk(s) Present at Certification.** Up to 10 highest priority nutritional risks present at the WIC Program certification

☒ **Hemoglobin or Hematocrit.** That value for the measure of iron status that applies to the WIC Program certification. It is assumed that the measure was collected at the time of certification or within ninety (90) days of the certification date.
**Date of Blood Measurement.** The date of the blood measurement that was used during the most recent WIC Program certification in MMDDYYYY format.

**Weight.** The participant's weight measured according to the CDC nutrition surveillance program standards [nearest one-quarter (1/4) pound]. If weight is not collected in pounds and quarter pounds, weight may be reported in grams.

**Height.** The participant's height (or length) measured according to the CDC nutrition surveillance program standards [nearest one-eighth (1/8) inch]. If height is not collected in inches and 1/8 inches, height may be reported in centimeters.

**Date of Height and Weight Measure.** The date of the height and weight measures that were used during the most recent WIC Program certification in MMDDYYYY format.

**Currently Breastfed.** Information is needed for all infant participants ages six through thirteen months, whether or not the infant is currently receiving breastmilk.

**Ever Breastfed.** Information is needed for all infant participants ages six through thirteen months, whether or not the infant was ever breastfed.

**Length of Time Breastfed.** For infants ages six through thirteen months, the number of weeks the infant received breastmilk.

**Date Breastfeeding Data Collected.** For infants ages six through thirteen months, the date on which breastfeeding status was reported in MMDDYYYY format.

**Food Packages.** The food package code(s) for the WIC food package or for all food instruments prescribed for the participant during the month.

**OPTIONAL:**

Supplemental Data Set

<table>
<thead>
<tr>
<th>State Agency IS Collects</th>
<th>State Agency IS Plans to Collect</th>
</tr>
</thead>
</table>

**Date of First WIC Certification.** Date the participant was first certified for the WIC Program in MMDDYYYY format. For pregnant, breastfeeding and postpartum women, this applies to the current/most recent pregnancy and not to prior pregnancies.

**Educational Level.** For pregnant, breastfeeding and postpartum women, the highest grade or year of school completed. For infants and children, the highest grade or year of school completed by mother or primary caretaker.

**Number in Family/Household on WIC.** The number of people in the participant's family/household receiving WIC benefits.

**Date Previous Pregnancy Ended.** For pregnant women, the date previous pregnancy ended in MMDDYYYY format.

**Total Number of Pregnancies.** For pregnant women, the total number of times the woman has been pregnant, including this pregnancy, all live births and any pregnancies resulting in miscarriage, abortion or stillbirth.

**Total Number of Live Births.** For pregnant women, the total number of
babies born alive to this woman, including those who may have died shortly after birth.

☐ ☐  

**Pre-pregnancy Weight.** For pregnant women only, the participant's weight immediately prior to pregnancy. Pre-pregnancy weight may be reported either in pounds and ounces or in grams.

 ☑ ☐  

**Participant's Weight Gain During Pregnancy.** For breastfeeding and postpartum women, the participant's weight gain during pregnancy as taken immediately at or prior to delivery. Weight gain during pregnancy may be reported in either pounds and ounces or in grams.

 ☑ ☐  

**Birth Weight.** For infants and children, the participant's weight at birth measured according to the CDC nutrition surveillance program standards (lbs/ounces). Birth weight may be reported in either pounds or ounces, or in grams.

 ☑ ☐  

**Birth Length.** For infants and children, the participant's length measured according to the CDC nutrition surveillance program standards (1/8 inches). Birth length may be reported in either inches and eighth inches or in centimeters.

 ☐ ☐  

**Participation in the Food Distribution Program on Indian Reservations.** The participant's reported participation in this program.

C. **WIC Systems Functional Requirements Checklist**

The following checklists were taken from the WIC Functional Requirements Document (FRED) which is provided as guidance to State agencies on functions they should consider incorporating into their Information Systems. Please check those functions/capabilities which the State agency system currently performs or plans to perform within the next two years.

<table>
<thead>
<tr>
<th>State Agency System Performs</th>
<th>Planned</th>
<th>Automated Cord Function/Capabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑  ☐</td>
<td>☑</td>
<td>1. Calculates the date certification is due to expire.</td>
</tr>
<tr>
<td>☑  ☐</td>
<td>☑</td>
<td>2. Assigns the participant a nutritional risk code and assigns a priority level. (CPA confirms the code is correct.)</td>
</tr>
<tr>
<td>☐  ☐</td>
<td>☑</td>
<td>2a. Assigns one risk code.</td>
</tr>
<tr>
<td>☐  ☐</td>
<td>☑</td>
<td>2b. Assigns up to 3 risk codes.</td>
</tr>
<tr>
<td>☐  ☐</td>
<td>☑</td>
<td>2c. Assigns up to 6 risk codes.</td>
</tr>
<tr>
<td>☑  ☐</td>
<td>☑</td>
<td>2d. Assigns more than 6 risk codes.</td>
</tr>
<tr>
<td>☑  ☐</td>
<td>☑</td>
<td>3. Calculates the applicant's household income and flags individuals whose income exceeds program standards.</td>
</tr>
<tr>
<td>☑  ☐</td>
<td>☑</td>
<td>3a. Converts incremental income (weekly, monthly) to an annual figure.</td>
</tr>
<tr>
<td>☑  ☐</td>
<td>☑</td>
<td>4. Associates family members.</td>
</tr>
</tbody>
</table>
5. Statewide data is maintained to facilitate families transferring within the State.
6. Transfers certification data to the central computer facility electronically either in real time or batch mode.
7. Captures or documents the nutrition education provided each participant as well as the topics covered.
8. Uses table-driven food packages.
   - 8a. Uses standard pre-defined food packages.
   - 8b. Enables easy food package tailoring.
   - 8c. Performs edits to prevent over-issuance during food package creation.
9. Enables food instruments to be issued when the participant is present for pick-up, i.e., on-demand.
10. Captures or documents the name of the programs to which the participant was referred.
11. Performs food instrument reconciliation.
17. Captures basic transaction data by vendor.
18. Flags high-risk vendors through peer group analysis of redemption data.
   - 18a. Identifies vendors with high average food instrument redemptions.
   - 18b. Identifies vendors with a narrow variation in redemptions.
19. Assigns a maximum value for each food instrument type (paper) or each item/UPC (EBT).
   - 19a. Receives data about the amount a vendor requests for each food instrument (paper) or item/UPC (EBT) redeemed.
20. Captures source of income.
21. Has the capability of annualizing household income occurring at more than one frequency.
22. Performs automated dietary assessment.
23. Has automated growth charts.
24. Has point of certification data entry, i.e., a personal computer at each “station” within the clinic.
25. Allows for ad hoc reporting.
STATE OF ALABAMA
OFFICE OF INFORMATION TECHNOLOGY

POLICY 380: Computer Device Refresh

VERSION NUMBER  Policy 380-01
VERSION DATE  August 10, 2018
POLICY TITLE  Computer Device Refresh
OBJECTIVE  The objective of this policy is to establish an effective approach to information technology (IT) lifecycle management by replacing aging IT equipment following a planned device upgrade strategy.
AUTHORITY  The authority of the Office of Information Technology (OIT) to create and enforce policies relating to the management and operation of IT by state agencies, and exceptions to such authority, are derived from:


Policies of the OIT are approved and signed by the Governor
APPLICABILITY  The requirements and responsibilities defined in OIT policies apply to all departments, agencies, offices, boards, commissions, bureaus, and authorities (referred to generally as agency or agencies) and authorized individuals in the employment of the State of Alabama responsible for the management, operation, or use of state IT.

This policy applies to the following IT devices:
- Desktops, laptops, tablets, and smartphones
- Servers, mass-storage systems, and backup systems
- Peripheral devices such as printers and scanners
- Network communications and control equipment
- Security, access control systems, and logging devices
- IP-based voice communications equipment
- Software running on any of the devices listed above
STATEMENT OF POLICY

It is imperative that agencies establish and implement policies to refresh (replace) or extend the useful life of IT equipment under their control. As IT equipment ages, the cost of maintenance increases and the likelihood of downtime (and lost productivity) increases. An effective IT refresh cycle ensures IT assets are compatible with the current technological environment and allows state agencies to maximize their service productivity.

The optimal age for replacing IT devices varies by device and is influenced by many factors including (but not limited to) the type of use, changes in technology, changes to user requirements, and the expected duration of vendor support.

This policy does not require a single standard schedule for refresh, but does require agencies to plan for system refresh based on the requirements and recommendations provided herein.

It is the policy of the OIT that:

• Agencies track the age of IT assets under their control.
• Agencies establish a device refresh policy for IT devices (as listed above) based on these recommended guidelines:
  o Portable devices: refresh every 2-4 years
  o Desktop PCs and peripheral devices: 3-5 years
  o Servers, network devices, appliances: 5-10 years
  o Software: follow vendor support dates
  o Include consideration of systems that may outlive their component parts (e.g., a mass-storage system lifespan may be 10 years or more, but individual hard drives may need to be replaced more frequently)

OIT RESPONSIBILITIES

Advise agencies when widely utilized applications and major operating systems are approaching the end of vendor support.

Utilize available forums (user groups, State Security Council, or CIO Advisory Council) to encourage agencies to review annually their IT refresh policy.

When requested, provide advice to agencies for the establishment and implementation of an IT refresh policy.
AGENCY RESPONSIBILITIES

Develop an IT refresh policy for routine replacement of IT equipment that provides, within budgetary constraints, a complete refresh of IT within expected and supported system lifespans.

Include within IT expenditures, a line item on the annual budget for planned future replacement cost of computer hardware and software items.

Select IT equipment that can be reasonably expected to meet users’ needs for at least 3 to 4 years (except for mobile devices which may have a shorter expected lifecycle).

For leased computers and other data processing equipment, ensure the replacement cycle is defined in the lease contract and that it complies with the requirements of this policy.

Enforce this policy through periodic compliance inspections of agency information systems with intent of identifying systems older than the recommended refresh age or no longer supported by the vendor (or by a third-party support provider).

When it is required that IT systems continue operation beyond life-expectancy or without vendor (or third-party) support, agency shall provide to OIT written documentation justifying continued use of unsupported systems and include a remediation plan and replacement or upgrade schedule.

Other than computer equipment kept for temporary replacement parts, all other computer equipment, upon warranty or support expiration, shall be decommissioned, sanitized, and sent to surplus or disposed of in accordance with applicable policies or procedures.

USER RESPONSIBILITIES

Inform supervisors when computer systems are suboptimal to properly fulfill their roles and responsibilities.

EFFECTIVE DATE

This policy shall be effective upon its approval by the Secretary of Information Technology and the Governor of Alabama as evidenced by the signatures of the Secretary and Governor being affixed hereto.

SUPERSEDES

This is the initial policy and does not supersede a previous version.
The undersigned, as Acting Secretary of Information Technology of the State of Alabama, exercising the power vested in that Office by the laws of this state, declares this policy to be adopted as of the date on which the Governor has approved and signed it.

Jim Purcell  
*Acting Secretary of Information Technology*

ORDERED

Kay Ivey  
*Governor*

This 13 day of September, 2018.

**DOCUMENT CHANGE HISTORY**

<table>
<thead>
<tr>
<th>Version</th>
<th>Version Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>380-01</td>
<td>08/10/2018</td>
<td>Initial version</td>
</tr>
</tbody>
</table>


**Business Continuity Plan for Local Agency Operations in the Event Crossroads is Unavailable**

**Prerequisites:**
1. Staff has been trained on the Business Continuity plan.
2. Crossroads required Data Elements form is available.
3. Form is available to document other activities (classes, nutrition ed, care plan, changes in family/participant demographics, food Rx)
4. Staff has run the AL Master Participant List report from Crossroads monthly and printed or saved it to a local device or jump drive.
5. All Crossroads data is replicated to databases at the ADPH disaster recovery site.
   a. If one or more clinics are down, the state office and other clinics assist with reporting and information sharing. The clinic staff will complete certifications on paper as stipulated below and benefits can be loaded remotely.
   b. If the state office is down, a copy of the main application server would be installed at the disaster recovery site and users would be given an alternate URL to access Crossroads.

**When Crossroads is initially unavailable, and duration is uncertain:**
- Check with local IT support to determine if a local problem.
- If not a local problem, notify AL Help Desk and appropriate AL Crossroads staff.
- Continue to certify participants using Required Data Elements form.
- Order special formulas from AL state office.

**When Crossroads is expected to be unavailable for a week or longer:**
- Continue to certify applicants:
  - Complete new certifications by completing Required Data Elements form.
  - Complete subsequent certifications by reviewing the AL Master Participant List and completing Required Data Elements form.
- Continue to provide classes, individual nutrition education, assessments:
  - Ask family about any changes in demographic or personal information, and food prescription. Document any reported changes on Required Data Elements form.
  - Complete Required Data Elements form to document services
- Continue to provide food benefit issuance:
  - Ask family about any changes in demographic or personal information, and food prescription. Document any reported changes on Required Data Elements form.
  - For all participants except those on exempt formula or WIC-eligible medical foods:
    - Issue each participant one month food benefit and possibly issue up to three months if the situation warrants.
    - Ask participant to call for a future appointment when Crossroads is back on line or continue procedure in place for open access clinics.
  - For any participant on exempt formula or WIC-eligible medical foods, select one of these options:
    - Issue up to a week’s supply from inventory on hand.
- Order product from AL state office.
- Thoroughly document actions/instructions.

When Crossroads system is available again:
- Enter data documented on forms:
  - Required Data Elements
  - Other data forms as needed
  - Print required notices
  - When Crossroads becomes available participants may be contacted either by phone or mail to schedule appointments.
Chapter IV

Organization and Management
IV. ORGANIZATION AND MANAGEMENT

(Please indicate) State Agency: Alabama for FY: 2023

Organization and management involve the procedures for the documentation of staff time at the State level devoted to the various WIC functions, the evaluation and selection of local agencies, the documentation of local agency staffing standards and data, as well as disaster planning.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

A. State Staffing – 246.3(e), 246.4(a)(4) and (24): describe the information relating to State level staff requirements and utilization as it relates to WIC Program functions and how the State agency will provide a drug-free workplace.

B. Evaluation and Selection of Local Agencies - 246.4(a)(5)(i) and (7) and 246.5: describe the procedures and criteria utilized in the selection and authorization of local agencies.

C. Local Agency Staffing - 246.4(a)(4): describe the State staffing standards which apply to the selection of local agency staff and the means used by the State agency to track and analyze local level staffing data.

D. Disaster Planning - describe the disaster plans to be implemented in the event of a disaster.
A. State Staffing

1. State Level Staff
   a. Record below the current total full-time equivalent staff (FTEs) available for each position listed or attach equivalent information in the section’s Appendix noted here:

<table>
<thead>
<tr>
<th>Position</th>
<th>FTE</th>
<th>WIC FTE WIC</th>
<th>FTE WIC</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director</td>
<td>1.0</td>
<td>1.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutritionist</td>
<td>6.25</td>
<td>6.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vendor Specialist</td>
<td>6.0</td>
<td>6.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Specialist</td>
<td>4.0</td>
<td>4.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Specialist</td>
<td>2.1</td>
<td>2.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breastfeeding Coordinator</td>
<td>2.0</td>
<td>2.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(MIS/EBT) Specialist</td>
<td>3.25</td>
<td>3.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intern</td>
<td></td>
<td></td>
<td>0.35</td>
<td>0.35</td>
</tr>
<tr>
<td>Other (specify): Program Admin</td>
<td></td>
<td></td>
<td>4.95</td>
<td>4.95</td>
</tr>
<tr>
<td>Other (specify): Administrative</td>
<td></td>
<td></td>
<td>1.0</td>
<td>1.0</td>
</tr>
<tr>
<td>Other (specify): SAM Crossroads</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
   b. The State agency has a WIC organizational chart showing all positions, titles, and staff names.
      ☒ Yes ☐ No
      If yes, please attach and/or reference the location of the State agency’s WIC organization chart:
      See Attachments: FY 2023 FHS Org Chart, FY 2023 WIC Org Chart, FY 2023 Finance Org Chart, FY 2023 IT Org Chart
   c. Please attach and/or reference the location of the overall organizational chart that identifies the WIC Program’s relationship within the State Health Department or Indian Tribal Organization:
      https://www.alabamapublichealth.gov/blog/assets/organizationalchart.pdf
   d. The State agency has updated position descriptions for each of the above positions.
      ☒ Yes ☐ No
      If yes, please attach and/or reference the location of the position descriptions:
      See Attachment: Employee Responsibilities

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 1 Program Administration

2. Estimate below the average percent of State staff time devoted to fulfilling the following functions:

<table>
<thead>
<tr>
<th>Function</th>
<th>Percent of Total Staff Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certification, including nutrition risk determination</td>
<td></td>
</tr>
<tr>
<td>Breastfeeding training/promotion and support</td>
<td></td>
</tr>
<tr>
<td>Nutrition education</td>
<td></td>
</tr>
</tbody>
</table>
Monitoring of local agencies
Fiscal reporting
Food delivery system management
Vendor management, including vendor training
Staff training and continuing education
(MIS/EBT) system development and maintenance
Civil Rights
Coordination with and referrals to other assistance programs and social service agencies
Other (specify): AL State WIC Office staff allocate 100% (percent) of their time and effort to cover all functions listed with the exception of fiscal reporting provided by external partial FTE and technical support.

Total 100

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

3. Drug-Free Workplace
a. The State agency has a plan that will enable them to achieve a drug-free workplace.
☒ Yes ☐ No

b. Please attach and/or reference the location of a description of the State agency’s plans to provide and maintain a drug-free workplace in Appendix of this section.
ADPH Drug Free Workplace Policy #2004-019 attached.

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

B. Evaluation and Selection of Local Agencies
☐ Does not apply because the State agency has only one location or no local agency(ies). (PROCEED TO NEXT SECTION)

1. Local Agencies Authorized
10 Number of local agencies authorized to provide WIC services last fiscal year
10 Number of local agencies planned to provide WIC services this fiscal year

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

2. The State agency accepts applications from potential local agencies:
☐ Annually ☐ Biennially
☐ On an on-going basis ☒ Other (specify) ADPH solicits an RFP when there is a need and funds are available.

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

3. Existing local agencies must reapply and compete with new applicant agencies for authorization:
☐ Annually  ☐ Biennially
☐ Not applicable  ☒ Other (specify) RFP is submitted for a 2 year term with an optional 2 year renewal for services in the Montgomery, AL area.

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

4. Selection Criteria

a. The State agency uses the following criteria in selecting local agencies in new service areas and/or in reviewing applications from existing service areas:

<table>
<thead>
<tr>
<th>New Service Areas</th>
<th>Existing Service Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Coordination with other health care providers</td>
<td>☒ Projected cost of operations/ability to operate with available funds</td>
</tr>
<tr>
<td>☒ Location/participant accessibility</td>
<td>☒ Financial integrity/solvency</td>
</tr>
<tr>
<td>☒ Relative need in the area</td>
<td>☒ Range and quality of services</td>
</tr>
<tr>
<td>☒ History of performance in other programs</td>
<td>☒ Ability to serve projected caseload</td>
</tr>
<tr>
<td>☒ Non-smoking facility</td>
<td>☒ Americans with Disabilities Act (ADA) compliance</td>
</tr>
</tbody>
</table>

Other (specify by typing into the cells below):

b. The State agency conducts studies (provide date of most recent study: 6/3/2022) of the cost-effectiveness of local agency operations that examine:

☐ Location and distribution of local agencies in proportion to new applicants/participants
☒ Clinic procedures to optimize participant access/service (Patient Flow Analysis, etc.)
☒ Staff-to-participant ratios and related staffing analyses
☒ Comparative analyses of local agency/clinic costs
☒ Other

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):
See Attached: Local Agency Cost Effectiveness Study

5. The State agency enters into a formal written agreement or contract with each local agency.

☒ Yes (state contract duration): 1 year unless otherwise stated  ☐ No

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):
See attachments: Health Services Center, Jefferson, Mobile, and Poarch Creek Indian agreements for FY 2022 attached.
6. The State agency has established statewide fair hearing procedures for local agency appeals.
   ☒ Yes, attach local agency fair hearing procedures or specify the location in the Procedure Manual and reference below: AL WIC Procedure Manual Ch. 12 Program Abuse
   ☐ No

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

7. The State agency maintains a listing of clinic sites that includes the following information. If available, please attach and/or reference the location of the listing:
   AL WIC Mobile App: https://www.alabamapublichealth.gov

   ☒ Location
   ☐ Type of site (e.g., hospital, health department, community action program)
   ☐ Service area
   ☒ Hours of operation
   ☒ Days of operation
   ☐ Health services provided on-site
   ☐ Social services provided on-site
   ☐ Participation
   ☒ Other (specify): Contact information

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):
   WIC Clinic List by District attached.

C. Local Agency Staffing

☐ Does not apply because the State agency has only one location or no local agency(ies). (PROCEED TO NEXT SECTION)

1. Staffing Standards

a. The State agency prescribes local agency staffing standards that include:
   ☒ Credentials
   ☒ Staff levels
      ☒ Staff-to-participant ratio standards
      ☐ Time spent on WIC functions
      ☐ Other (specify):
   ☒ Functions of CPAs
   ☐ Paraprofessional requirements
   ☒ Separation of duties to ensure no conflicts of interest
   ☐ Other (specify):
   ☐ Not applicable

b. The State agency has a plan for ensuring that local agency credentials are in line with the Nutrition Services Standards.
   ☒ Yes ☐ No

c. The State agency maintains copies of local agency CPA position descriptions, classified in terms of
Nutrition Services Standards, i.e., federal requirements, recommended criteria, best practices.
☒ Yes ☐ No

d. Local agencies follow staffing standards established by unions or local governmental authorities.
☐ Yes ☒ No

If yes, how many of the total local agencies are currently authorized by unions or local governmental authorities?

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

2. Local Level Staffing Data
a. The State agency gathers and analyzes data to determine staff-to-participant ratios (check all that apply):

☒ For each clinic/local agency ☒ By function
☒ At regular intervals ☐ Program management
☐ Monthly ☐ Food delivery
☒ Quarterly ☒ Certification
☐ Annually ☒ Nutrition education
☐ Breastfeeding promotion and support
☒ Other (specify): Provider/Clerical to Participant Ratio and Provider/Clerical Visits per Day.

b. Results of analyses are reported back to local agencies.
☐ No
☒ Yes, in a single report comparing all local agencies
☐ Yes, in a local agency-specific report (no comparative data)

ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):

3. Local Agency Breastfeeding Staffing Requirement
a. Number of local agencies with a designated staff person to coordinate breastfeeding promotion and support activities.
8

b. The State agency maintains approved copies of local agency Breastfeeding Coordinator and Peer Counselor position descriptions as outlined in the WIC Breastfeeding Support.
☒ Yes ☐ No

c. Number of local agencies with breastfeeding peer counselors. 6 (will be 8 once vacancies filled)

D. Disaster Plan

1. State agency has developed a WIC disaster or emergency operations plan.
☒ Yes ☐ No
2. The WIC disaster plan is part of a broader Health Department or other State agency disaster plan.
☐ Yes, what agency(ies): **ADPH Emergency Management Plan**
☐ No

3. The State agency shares the disaster plan with its local agencies and clinics?
☐ Yes  ☐ No

4. The Disaster Plan addresses:
☐ Procedures to assess the extent of a disaster and report findings
☐ Access to program records
☐ Certification and food issuance sites and procedures
☐ Food package adjustments
☐ Food delivery systems to include electronic benefits transfer (EBT)
☐ Management Information System (MIS) Recovery
☐ Publication notification of variances in program operations
☐ Necessary equipment (health and safety) approval process
☐ Communications plan
☐ Use of mobile equipment, clinics
☐ Staffing arrangements
☐ Back up filing systems
☐ Back up computer systems
☐ MIS alternate procedures
☐ Emergency authorization of vendors
☐ Other (describe):

5. The State agency requires local agencies/clinics to have individual disaster plans.
☐ Yes  ☐ No

If yes, such plans are reviewed for compliance and consistency with the State agency disaster plan.
☐ Yes  ☐ No

6. The State agency has a designated staff person to coordinate disaster planning.
☐ Yes  ☐ No

**ADDITIONAL DETAIL: Organization & Management Appendix and/or Procedure Manual (citation):**
GRANT
BETWEEN
THE ALABAMA DEPARTMENT OF PUBLIC HEALTH
AND
HEALTH SERVICES, INC.

This Grant entered into by and between the Alabama Department of Public Health, hereinafter the "Department," and Health Services, Inc., hereinafter "Sub-Recipient," is effective October 1, 2021, or upon approval by the Governor, and terminates September 30, 2022.

WHEREAS, the purposes of this Grant, per Public Law 95-627, as amended, is to authorize the establishment of a Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program) within the State of Alabama.

WHEREAS, Code of Ala. 1975, § 22-12C-2 authorizes the State Board of Health to promulgate and adopt rules and procedures it deems necessary to carry out its responsibilities under the WIC Program.

WHEREAS, the Department is responsible for determining the anthropometrics of citizens obtaining health care benefits.

WHEREAS, federal funds have been made available to Department for the purpose of carrying out the WIC Program in accordance with applicable regulations issued by the United States Department of Agriculture, such funds to be used either to purchase supplemental foods for participants or for administrative and program service costs as in the approved budget attached hereto.

WHEREAS, funding for activities performed under this Grant is provided by the Department, Bureau of Family Health Services, WIC Division, through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children (CFDA 10.557), being grant number CFDA 10.557, 5AL700700, for the budget period October 1, 2021 through September 30, 2022. The program is authorized through the Child Nutrition Act.

WHEREAS, this Grant is entered into following a request for proposal process in accordance with Code of Ala. 1975, § 41-16-72.

WHEREAS, Sub-Recipient has submitted a proposal which has been accepted by the Department including a plan or scope of work, which is herein incorporated by reference.

NOW THEREFORE, in consideration of the mutual covenants herein below specified and other good and valuable consideration, the receipt of which is hereby acknowledged, the parties herein agree to the following:
The Department shall:

1) Be responsible for assuring proper administration of WIC Program funds granted under and pursuant to the WIC Program and for establishing performance policy for all aspects of the program, to include, but not necessarily limited to the following:
   (a) Enter into Vendor Contracts with local grocery vendors.
   (b) Provide supplies for food benefit issuance.
   (c) Pay contract name/WIC processor for food benefits redeemed.
   (d) Reimburse the Sub-Recipient for nutrition services and actual approved administrative costs.

The Sub-Recipient shall:

1) Meet or exceed the monthly target caseload of 1,749.
2) Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, but not necessarily limited to the following:
   (a) Provide adequate insurance and bond to safeguard program assets. Prior to initiation of this Agreement, demonstrate proof of insurance and bond procurement with Department named as beneficiary, by delivering such proof to the WIC Program Director.
   (b) Accept applicants from designated service area.
   (c) Examine, evaluate and certify participants using state and federally approved certification procedures. Maintain on file, have available for review and audit all criteria used for certification, including residence information, income standards or other standards used to determine eligibility for free or reduced cost health care and a list of the specific criteria used to determine nutritional need.
   (d) Sub-Recipient shall be held liable for food instruments issued and redeemed to participants not properly certified and documented. Sub-Recipient is also liable for over issuance of food instruments.
   (e) Make available appropriate health and nutritional education services to participants.
   (f) Ensure breast-feeding as the preferred and normal method for infant feeding and inform all participants of the benefits of breastfeeding for the mother and infant; thereby, allowing the participant to make an informed decision.
   (g) Ascertain that participants are not charged a fee as a requirement to participate in the WIC Program.
   (h) Use supplies provided by the Department to issue food benefits.
   (i) Issue food benefits following procedures from the Department.
   (j) Submit claim for reimbursement of administrative costs on a monthly basis to the Department. Reimbursement of travel in the performance of this agreement will not exceed the current state allowed rate for per diem and for mileage. Out of state travel must be approved in advance by the State
WIC Office. Administrative costs must be broken out and reported in the following categories: Administration, client services, nutrition education, and breastfeeding.

(k) Submit required reports and Annual Nutrition Education Plan, timely or by due dates, to the Department.

(l) Maintain complete and accurate records ensuring that the WIC Program is administered in accordance with the State WIC Policy and Procedure Manual, Federal Regulations, and interim State Office policy letters.

(m) Notify the Department, in advance, of any anticipated changes in accounting policies and procedures that may have an effect on this agreement. Maintain complete, accurate, documented and correct accounting records of program funds allocated and expended. This includes time studies to document time actually worked on the WIC Program in accordance with OMB Circular A-87.

(n) Retain all records for three and one-half years following the date of submission of the final expenditures report for the period to which the reports pertain. The Department may by written notice require longer retention of records deemed necessary for resolution of an audit or of any litigation. Permission to dispose of any records must be in writing and approved by the WIC Program Director.

(o) Comply with federal regulations that require agencies to meet the requirements of OMB Circular A-133 Audits of state, local governments and non-profit organizations. Make all records, including medical records and financial statements (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the Sub-Recipient to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the Sub-Recipient's most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

(p) All purchases will be made in compliance with the "Common Rule", uniform administrative requirements for grants and cooperative agreements to state and local governments, and requirements of OMB Circular A-87 and 7 CFR Part 3016 and 3017 relating to government-wide debarment and suspension (non-procurement). All equipment will be returned to the Department upon termination of the agreement, dissolution of the Sub-Recipient or disposal of the equipment. Ensures that all equipment purchased with WIC funds is used 100 percent for the WIC Program.

(q) Obtain prior written approval from the WIC Program Director for all equipment purchased (to include Advanced Data Processing).

(r) Inform participants of available health services. Health services means ongoing routine pediatric and obstetric care (such as infant and child care and prenatal and postpartum examinations) or referral for treatment.
(s) Maintain competent professional staff to perform certification and appropriate nutrition education services. Ensure that WIC employees attend all applicable training scheduled by the State WIC Office.
(u) Comply with the Clinical Laboratory Improvement Amendments (CLIA) of 1988 and provide the Department with the Sub-Recipient's CLIA number, as applicable.
(v) Comply with the National Voter Rights Act (NVRA) of 1993 requirements as set forth in the WIC Procedures Manual, Chapter 5.
(w) Provide substance abuse information, screening and referral according to the WIC Substance Abuse Policy as set forth in the WIC Procedure Manual.
(x) All electronic patient data entered into Crossroads will be maintained in a secure manner to prevent inappropriate disclosures of confidential patient information.
(y) Monitor compliance with the civil rights requirements.

3) Provide the current indirect cost rate agreement and cost allocation plan upon signing the Grant. Changes to the indirect cost rate agreement and cost allocation plan during the Grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, Allison.Hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

4) Submit an annual budget.
5) Submit itemized invoices monthly.

Any program or activity for which the applicant received federal financial assistance from the Department of Agriculture: Must HEREBY GIVE ASSURANCE THAT it will immediately take any measures necessary to effectuate this Agreement.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all federal financial assistance, grants, and loans of federal funds, reimbursable expenditures, grant or donation of Federal property and interest in property, the detail of federal personnel, the sale and lease of, and the permission to use, federal property or interest in such property, or the furnishing of services without consideration or at a nominal consideration, or at a consideration which is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be serviced by such sale, lease, or furnishing of services to recipient, or any improvements made with Federal financial assistance extended to the Sub-Recipient by the Department of Agriculture. This includes any federal agreement, arrangement, or other contract which has as one of its purposes the provision of assistance such as food, food stamps, cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.
BY ACCEPTING THIS ASSURANCE, the Sub-Recipient agrees to compile data, maintain records, and submit reports as required, to permit effective enforcement of Title VI and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with Title VI. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Services, shall have the right to seek judicial enforcement of this assurance on the behalf of the Sub-Recipient.

The Sub-Recipient operates at two sites: Gateway (East South Boulevard) and Chisholm (VanDiver Street). The Sub-Recipient shall perform the services contained herein in accordance with the standards of performance governing the profession or occupation and, in a manner, consistent with standards recognized in the industry.

Under no circumstances shall the maximum amount payable under this Grant exceed $250,000.00 for the Grant period.

CONTINGENCY CLAUSE: Funding for the activities to be performed under this Grant has historically been provided through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, and the Department anticipates receipt of continued federal funding in cooperation with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children for the grant period October 1, 2021 to September 30, 2022, as in years previous.

Each and every part of this Agreement is dependent upon receipt of the federally appropriated funds. Failure of the Department to qualify for and receive said funds will render this Grant null and void.

FEDERAL DISCLOSURES CLAUSE. The Grant must meet the federal requirements for pass-through entities in 2 C.F.R. § 200.331 (see also 45 C.F.R. § 75.352), which require the Department to notify Sub-Recipient of the following:

a. This Grant constitutes a subaward. The identification information required to be provided under the subaward is enumerated in 2 C.F.R. § 200.331(a)(1) (see also 45 C.F.R. § 75.352(a)(1));

b. All requirements imposed by the Department on Sub-Recipient so that the federal award is used in accordance with federal statutes, regulations, and terms and conditions of the federal award, as set forth below:
(1) Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, all previously listed requirements located under the "Sub-Recipient shall" section, number two, items a-y.
(2) Meet or exceed the target caseload of 1,749.
(3) Provide the current indirect cost rate agreement and cost allocation plan upon signing the Grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

(4) Submit an annual budget.

(5) Submit itemized invoices monthly.

c. Any additional requirements the Department imposes on Sub-Recipient in order for the Department to meet its own responsibility to the Federal awarding agency, including identification of any required financial and performance reports, as set forth below:

(1) Make all records related to the WIC Program, including medical records and financial statements (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the agency to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the Sub-Recipient’s most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

d. An approved federally recognized indirect cost rate negotiated between Sub-Recipient and the Federal Government, or, if no such rate exists, either a rate negotiated between the Department and Sub-Recipient (in compliance with 2 C.F.R. Part 200 and 45 C.F.R. Part 75), or a de minimis indirect cost rate, as defined in 2 C.F.R. § 200.414(f) (see also 45 C.F.R. § 75.414(f)), as set forth below:

(1) Per signed letter from Terry W. Reid, Chief Operating Officer, at Health Services, Inc., the indirect costs for this WIC grant are not being included in their budget and are being waived therefore the indirect cost rate is not required. The Department agrees with this.

e. Sub-Recipient must permit the Department, including the Office of Program Integrity, and auditors access to Sub-Recipient’s records and financial statements as necessary for the Department to meet the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75);

f. Additional terms and conditions concerning closeout of the subaward, as set forth below:

(1) Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.
g. Sub-Recipient’s use of the subaward will be monitored by the Department for compliance with the conditions of the award, federal law and regulations, and for achievement of performance goals. As part of its compliance monitoring, the Department must:
   (1) Review financial and performance reports required by the Department;
   (2) Follow up and ensure that Sub-Recipient takes timely and appropriate action on all deficiencies pertaining to the subaward detected through audits, onsite reviews, and other means;
   (3) Issue a management decision for audit findings pertaining to the subaward, as required by 2 C.F.R. § 200.521 (see also 45 C.F.R. § 75.521).

h. Any additional specific subaward conditions imposed on Sub-Recipient by the Department, as described in 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), and as set forth herein, including, if applicable, the reasons for imposition of such conditions and any actions required by Sub-Recipient for their removal:
   (1) Not applicable

i. Sub-Recipient’s failure to comply with the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) may result in the imposition of additional special conditions by the Department, as provided under 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), or additional remedies for non-compliance, as provided under 2 C.F.R. § 200.338 (see also 45 C.F.R. § 75.371).

The Department must also notify Sub-Recipient of the requirement to adhere to the Federal property standards in 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) for any equipment purchased with subaward funding, including the standards in 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all such equipment.

EQUIPMENT USE AND PROCUREMENT CLAUSE. The Sub-Recipient shall adhere to the requirements of 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all equipment purchased by Sub-Recipient with subaward funding, to include the following:

a. Use all equipment purchased with subaward funding for the project’s authorized purposes and in accordance with state laws and procedures;

b. Not encumber or dispose of the property without the written approval of the Department and the federal awarding agency. Disposition of any equipment will be made in accordance with instructions provided by the federal awarding agency;

c. Maintain property records that include a description of the property, a serial number, or other identification number, the source of funding, who holds title, the acquisition date, and cost of the property, percentage of federal participation in the project cost, the location, use and condition of the property, and any ultimate disposition data, including the date of disposal and sale price of the property;

d. Physical inventory of the property must be taken, and the results reconciled with the property records at least once every two years;
e. Adequate safeguards to protect against loss, damage or theft of the property and investigation of any lost, damaged or stolen property;

f. Develop procedures to ensure program staff forward invoices for equipment purchases of $500 or more to Sub-Recipient’s employee in charge of maintaining records for equipment inventory tracking;

g. Recognize that title to materials and supplies, including computing devices, will vest in Sub-Recipient upon acquisition, subject to the requirements of 2 C.F.R. § 200.314 (see also 45 C.F.R. § 75.321) for compensation to the federal awarding agency for residual inventory of unused supplies exceeding $5,000 in total aggregate value upon termination or completion of the project or program.

BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT. By signing this grant, the parties affirm, for the duration of the grant, that they will not violate federal immigration law or knowingly, employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama. Furthermore, a party found to be in violation of this provision shall be deemed in breach of the grant and shall be responsible for all damages resulting therefrom.

OFFICE OF INSPECTOR GENERAL EXCLUSION PROVISION. Section 6501 of the Patient Protection and Affordable Care Act (“PPACA”) regarding exclusions from federal health care programs took effect on January 1, 2011. This Section of PPACA amends the Social Security Act to provide that State Medicaid agencies must exclude or terminate from participation any individual or entity excluded from participating in any federal healthcare program, such that, if an individual or entity is excluded or terminated by Medicare or by Medicaid in any state, that individual or entity must be excluded from all other states’ Medicaid programs.

Pursuant to that provision, if the Sub-Recipient is entering into this agreement for a federal health care program, Sub-Recipient agrees to screen all employees and subcontractors against the OIG list of excluded individuals and entities upon engagement and at least monthly. This includes screening of former names and variations of names.

CLOSEOUT CLAUSE. Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.

ASSURANCE OF CIVIL RIGHTS COMPLIANCE. The Sub-Recipient hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C.2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) as implemented by Department of Justice regulations at (28 CFR Parts 35 and 36);
Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." (August 11, 2000), all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the Sub-Recipient receives federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the Sub-Recipient agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all federal financial assistance, grants, and loans of federal funds, reimbursable expenditures, grant, or donation of Federal property and interest in property, the detail of federal personnel, the sale and lease of, and the permission to use federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with federal financial assistance extended to the Program applicant by USDA. This includes any federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

This assurance is binding on the Sub-Recipient, its successors, transferees, and assignees as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the Sub-Recipient.

ANTI-DISCRIMINATION CLAUSE. Sub-Recipient will comply with Titles IV, VI, and VII of the Civil Rights Act of 1964, the Federal Age Discrimination in Employment Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all applicable federal and state laws, rules and regulations implementing the foregoing statutes with respect to nondiscrimination on the basis of race, creed, color, religion, national origin, age, sex or disability, as defined in the above laws and regulations. Sub-Recipient shall not discriminate against any otherwise qualified disabled applicant for, or recipient of aid, benefits, or services or any employee or
person on the basis of physical or mental disability in accordance with the Rehabilitation Act of 1973 or the Americans With Disabilities Act of 1990.

ANTIBOYCOTT CLAUSE. Sub-Recipient represents that it is not currently engaged in, and will not engage in, the boycott of a person or an entity based in or doing business with a jurisdiction with which this state can enjoy open trade.

GOVERNOR'S PRORATION CLAUSE. It is agreed that the Department may terminate this Grant by providing thirty (30) days written notice to Sub-Recipient should the Governor of Alabama declare proration of the fund from which payment under this Grant is to be made. This termination for cause is supplemental to other rights the Department may have under this Grant or otherwise to terminate this Grant.

TERMINATION CLAUSE. This Grant may be terminated by either party providing a thirty (30) day written notice to the other party.

AMENDMENT CLAUSE. This Grant may be amended only by mutual agreement in writing, signed by Department and Sub-Recipient, and processed through and approved by all necessary authorities.

STANDARD OF PRACTICE CLAUSE. Sub-Recipient agrees to observe and comply at all times with all federal and state laws and rules in effect during the term of this Grant which in any manner affect performance under this Grant. Sub-Recipient agrees to perform services consistent with customary standard of practice and ethics in the profession.

WHISTLEBLOWER PROTECTION CLAUSE. Pursuant to 41 U.S.C. § 4712, an employee of a contractor, subcontractor, or grantee may not be discharged, demoted, or otherwise discriminated against as a reprisal for whistleblowing. The statute defines whistleblowing as making a disclosure that the employee reasonably believes is evidence of:

- Gross mismanagement of a federal contract or grant;
- A gross waste of federal funds;
- An abuse of authority relating to a federal contract or grant;
- A substantial and specific danger to public health or safety; or
- A violation of law, rule, or regulation related to a federal contract or grant.

To qualify under the statute, the employee's disclosure must be made to:

- A member of Congress or a representative of a Congressional committee;
- An Inspector General;
- The Government Accountability Office;
- A federal employee responsible for contract or grant oversight or management at the relevant agency;
- An official from the Department of Justice or other law enforcement agency;
A court or grand jury; or
A management official or other employee of the contractor, subcontractor, or
grantee who has responsibility to investigate, discover or address misconduct.

ASSIGNMENT CLAUSE. The rights, duties, and obligations arising under the
terms of this Grant shall not be assigned by any of the parties hereto without the written
consent of all other parties.

ENTIRE AGREEMENT CLAUSE. This Grant contains the entire agreement of
the parties and there are no other agreements, verbal or written, affecting this Grant that
have not been incorporated herein or attached hereto.

SEVERABILITY CLAUSE. Each provision of this Grant is intended to be
severable. If any term or provision of this Grant is illegal or invalid for any reason
whatsoever, said illegality or invalidity shall not affect the legality or validity of the
remainder of this Grant.

HEADINGS CLAUSE. Headings in this Grant are for convenient reference only
and shall not be used to interpret or construe the provisions of this Grant.

DO NOT WORK CLAUSE. Sub-Recipient acknowledges and understands that
this Grant is not effective until it has received all requisite State government approvals
and Sub-Recipient shall not begin performing work under this Grant until notified to do
so by the Department. Sub-Recipient is entitled to no compensation for work performed
prior to the effective date of this Grant.

EMERGENCY CANCELLATION CLAUSE. Notwithstanding any other provision
of this Grant, upon the issuance of a Declaration of Financial Necessity by the State
Health Officer, this Grant may be canceled immediately upon notice of such cancellation
being given in writing to the Sub-Recipient. Notwithstanding such cancellation, the Sub-
Recipient shall be recompensed for work and labor performed and completed prior to
the issuance of such notice on principles of quantum meruit.

FINANCIAL NECESSITY CLAUSE. All terms and conditions of this Grant
notwithstanding, the parties agree that upon the issuance of a Declaration of Financial
Necessity by the State Health Officer, the maximum amount payable under this Grant
may be unilaterally reduced by the Department to an appropriate amount to be
determined by the Department upon notice of such being given in writing to the Sub-
Recipient. Notwithstanding such reduction, the Sub-Recipient shall be recompensed for
work and labor performed and completed prior to the issuance of such notice on
principles of quantum meruit.

DEBT OF STATE CLAUSE. It is agreed that the terms and commitments
contained herein shall not be constituted as a debt of the State of Alabama in violation
of Article XI, Section 213 of the Constitution of Alabama of 1901, as amended by
Amendment Number 26. It is further agreed that if any provision of this Grant shall
contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this Grant, be enacted, then that conflicting provision in the Grant shall be deemed null and void. The Sub-Recipient's sole remedy for the settlement of any and all disputes arising under the terms of this Grant shall be limited to the filing of a claim with the Board of Adjustment for the State of Alabama.

DISPUTES. In the event of any dispute between the parties, senior officials of both parties shall meet and engage in a good faith attempt to resolve the dispute. Should that effort fail, and the dispute involves the payment of money, a party's sole remedy is the filing of a claim with the Board of Adjustment of the State of Alabama. For any and all other disputes arising under the terms of this contract which are not resolved by negotiation, the parties agree to utilize appropriate forms of non-binding alternative dispute resolution including, but not limited to, mediation. Such dispute resolution shall occur in Montgomery, Alabama, utilizing where appropriate, mediators selected from the roster of mediators maintained by the Center for Dispute Resolution of the Alabama State Bar.

MERIT SYSTEM CLAUSE. Sub-Recipient shall not be entitled to receive any benefits under this Grant that merit system employees receive by virtue of their status or employment, nor may Sub-Recipient nor any of its officers, agents, servants or employees be employed as a merit system employee during the term of this Grant. Any such employment automatically voids this Grant.

HOLD HARMLESS CLAUSE. Sub-Recipient hereby holds harmless the State of Alabama and the Department and their officers, agents, servants, and employees from any and all claims arising out of acts or omissions committed by the Sub-Recipient or any agent, servant, or employee of Sub-Recipient while in performance hereunder.

TOBACCO SMOKE CLAUSE. Public Law 103-227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor facility routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by federal programs either directly or through state or local governments, by federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to one-thousand dollars ($1000) per day and/or the imposition of an administrative compliance order on the responsible entity. By signing and submitting this Grant the Sub-Recipient certifies that it will comply with the requirements of the Act. The Sub-Recipient further agrees that it will require the language of this certification be included in any sub-awards which contain provisions for the children's services and that all Sub-Recipients shall certify accordingly.
LOBBYING CLAUSE. The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal grant, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal Grant, contract, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than ten-thousand dollars ($10,000) and not more than one-hundred-thousand dollars ($100,000) for each such failure.

DEBARMENT, SUSPENSION CLAUSE. For the purposes of this clause, "prospective lower tier participant" or "lower tier participant" refers to the Grantee or Sub-Recipient herein.

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact
the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under sub-paragraph 5 above, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transactions.

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

RECORD RETENTION. The Sub-Recipient is aware that it must retain all records pertinent to expenditure incurred under this Grant for a period of three (3) years.
after the termination of all activities funded under this Grant. Records for any displaced person must be kept three (3) years after he/she has received final payment. Notwithstanding the above, if there are litigation, claims, audits, negotiations or other actions that involve any of the records cited and that have started before the expiration of the three-year period, then such records must be retained until completion of the actions and resolutions of all issues, or the expiration of the three-year period, plus the current year whichever occurs later. See Department of Public Examiners for its record retention policy.

AVAILABILITY OF FINANCIAL STATEMENTS. All records and financial statements, to include a copy of the independent audit report, shall be made available to authorized personnel from the State or Federal Program Office, the Examiners of Public Accounts or their representatives, for audit and inspection purposes.

AUDIT REQUIREMENTS. A non-Federal Sub-Recipient that expends $750,000 in federal awards or more during the Sub-Recipient's fiscal year must have a single audit conducted in accordance with the Uniform Administrative Requirements, 2 CFR Part 200, Subpart F.

HIPAA CLAUSE. This clause is necessitated by the application of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"); as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). References to this clause are to the Code of Federal Regulations, hereinafter "CFR."

The parties agree to use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health Information ("Privacy Rule"). The definitions set forth in the Privacy Rule are incorporated by reference into this Grant (45 C.F.R. §§ 160.103 and 164.501). The Parties likewise agree to take all necessary precautions to protect the integrity of electronic protected health information (e-PHI) by complying with the HIPAA Security Rule.

INTERPRETATION CLAUSE. Where there is an apparent conflict among the Grant documents which cannot be resolved by interpretation, this document controls.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK.]
Sub-Recipient:
Health Services, Inc.

Signed: [Signature]
Gilbert Darrington
Chief Executive Officer

Date: 11/14/2021

Address:
1845 Cherry Street
P. O. Box 70365
Montgomery, Alabama 36107

Telephone: 334-263-2301
Fax: 334-263-0881

Sub-Recipient please type or print your email address:

Social Security or FEIN: 63-0565762
DUNS NO: 040664161

Alabama Department of Public Health
This Grant has been reviewed as to content

Signed: [Signature]
Grace H. A. Thomas, M.D., F.A.C.O.G
Medical Officer
Bureau of Family Health Services

Date: 11/22/21

APPROVED:
Alabama Department of Public Health

Signed: [Signature]
Scott Harris, M.D., M.P.H.
State Health Officer

Date: 12/2/21

APPROVED: State of Alabama

Signed: [Signature]
Kay Ivey
Kay Ivey, Governor

Date: 12/4/2021

APPROVED AS TO FORM AND COMPLIANCE WITH APPLICABLE RULES AND REGULATIONS
DEPT. OF PUBLIC HEALTH

NOV 30 2021

OFFICE OF GENERAL COUNSEL
GRANT
BETWEEN
THE ALABAMA DEPARTMENT OF PUBLIC HEALTH
AND
JEFFERSON COUNTY DEPARTMENT OF HEALTH

This Grant entered into by and between the Alabama Department of Public Health, hereinafter the “Department,” and Jefferson County Department of Health, hereinafter “Sub-Recipient,” is effective October 1, 2021 and terminates September 30, 2022.

WHEREAS, the purpose of this Grant, per Public Law 95-627, as amended, is to authorize the establishment of a Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program) within the State of Alabama.

WHEREAS, Code of Ala. 1975, § 22-12C-2 authorizes the State Board of Health to promulgate and adopt rules and procedures it deems necessary to carry out its responsibilities under the WIC Program.

WHEREAS, the Department is responsible for determining the anthropometrics of citizens obtaining health care benefits.

WHEREAS, funding for activities performed under this Grant is provided by the Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, being Grant number CFDA 10.557, 5AL700700, for WIC Nutrition Services Administration for the Grant budget period October 1, 2021 through September 30, 2022; and Grant numbers CFDA 10.557, 5AL700W5003 and 5AL700707, for Breastfeeding Peer Counseling for Grant budget periods October 1, 2017 through September 30, 2022, and October 1, 2019 through September 30, 2022, respectively.

The program is authorized through the Child Nutrition Act.

NOW THEREFORE, in consideration of the mutual covenants herein below specified and other good and valuable consideration, the receipt of which is hereby acknowledged, the parties herein agree to the following:

The Department shall:
1) Be responsible for assuring proper administration of WIC Programs funds granted under and pursuant to the WIC Program and for establishing performance policy for all aspects of the program, to include, but not necessarily limited to the following:
   (a) Enter into Vendor Contracts with local grocery vendors.
   (b) Provide supplies for food benefit issuance.
(c) Pay contract bank/e-WIC processor for food benefits redeemed.
(d) Reimburse the Sub-Recipient for nutrition services, actual approved administrative costs and allowable Breastfeeding Peer Counseling Program costs.

The Sub-Recipient shall:
1) Meet or exceed the monthly target caseload of 13,264.
2) Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, but not necessarily limited to the following:
   (a) Provide adequate insurance and bond to safeguard program assets. Prior to initiation of this agreement, demonstrate proof of insurance and bond procurement with Department named as beneficiary, by delivering such proof to the WIC Program Director;
   (b) Accept applicants from designated service area.
   (c) Examine, evaluate and certify participants using State and Federally approved certification procedures. Maintain on file, have available for review and audit all criteria used for certification, including residence information, income standards or other standards used to determine eligibility for free or reduced cost health care and a list of the specific criteria used to determine nutritional need.
   (d) Be held liable for food instruments issued and redeemed to participants not properly certified and documented. Sub-Recipient is also liable for over issuance of food instruments.
   (e) Make available appropriate health and nutritional education services to participants.
   (f) Ensure breastfeeding as the preferred and normal method for infant feeding and inform all participants of the benefits of breast-feeding for the mother and infant; thereby, allowing the participant to make an informed decision.
   (g) Ascertian that participants are not charged a fee as a requirement to participate in the WIC Program.
   (h) Use supplies provided by the Department to issue food benefits.
   (i) Issue food benefits following procedures from the Department.
   (j) Submit claim for reimbursement of administrative costs on a monthly basis to the Department. Reimbursement of travel in the performance of this agreement will not exceed the current State allowed rate for per diem and for mileage. Sub-Recipient must submit their current travel policy if it is different from the Department's current rates. Out of State travel must be approved in advance by the State WIC Office. Administrative costs must be broken out and reported in the following categories: Administration, Client Services, Nutrition Education, and Breastfeeding.
   (k) Submit required reports and Annual Nutrition Education Plan, timely or by due dates, to the Department.
   (l) Maintain complete and accurate records ensuring that the WIC Program is
administered in accordance with the State WIC Policy and Procedure Manual, Federal Regulations, and interim State Office policy letters.

(m) Notify the Department, in advance, of any anticipated changes in accounting policies and procedures that may have an effect on this agreement. Maintain complete, accurate, documented and correct accounting records of program funds allocated and expended. This includes time studies to document time actually worked on the WIC Program in accordance with OMB Circular A-87.

(n) The records and documents of the Sub-Recipient must be retained three years after the United States Department of Agriculture (USDA) notifies the Department that audits are closed and after all other pending matters are closed. The records shall be subject to audit at any reasonable time and upon reasonable notice, by the State of Alabama, the Examiners of Public Accounts, USDA, the Comptroller General of the United States, or their duly appointed representatives. The Department may by written notice require longer retention of records deemed necessary for resolution of an audit or any litigation. Permission to dispose of any records must be in writing and approved by the WIC Program Director.

(o) Comply with federal regulations that require agencies to meet the requirements of OMB Circular A-133 Audits of State, Local Governments and Non-Profit Organizations. Make all records, including medical records and financial statements, (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the Sub-Recipient to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the Sub-Recipient's most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

(p) All purchases will be made in compliance with the "Common Rule", uniform administrative requirements for grants and cooperative agreements to State and Local Governments, and requirements of OMB Circular A-87 and 7 CFR Part 3016 and 3017 relating to government wide debarment and suspension (non-procurement). All equipment will be returned to the Department upon termination of the agreement, dissolution of the Sub-Recipient or disposal of the equipment. Ensures that all equipment purchased with WIC funds is used 100 percent for the WIC Program.

(q) Obtain prior written approval from the WIC Program Director for all equipment purchased.

(r) Inform participants of available health services. Health services means ongoing routine pediatric and obstetric care (such as infant and child care and prenatal and postpartum examinations) or referral for treatment.
(s) Maintain competent professional staff to perform certification and appropriate nutrition education services. Ensure that WIC employees attend all applicable training scheduled by the State WIC Office.


(u) Comply with the Clinical Laboratory Improvement Amendments (CLIA) of 1988 and provide the Department with the Sub-Recipient’s CLIA number, as applicable.

(v) Comply with the National Voter Rights Act (NVRA) of 1993 requirements as set forth in the WIC Procedures Manual.

(w) Provide substance abuse information, screening and referral according to the WIC Substance Abuse Policy as set forth in the WIC Procedure Manual.

(x) All electronic patient data entered into Crossroads will be maintained in a secure manner to prevent inappropriate disclosures of confidential patient information.

(y) Monitor compliance with the Civil Rights requirements.

3) Provide the current indirect cost rate agreement and cost allocation plan upon signing the grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

4) Submit an annual budget.

5) Submit itemized invoices monthly.

6) Participate in the WIC Breastfeeding Peer Counselor Program.
   (a) Breastfeeding Peer Counselor Program spending will not exceed $64,675.
   (b) Will have designated Breastfeeding Peer Counselor Coordinator(s).
   (c) Will be responsible for the management of the Breastfeeding Peer Counseling Program by providing ongoing supervision, following proper policies and procedures, monitoring program records, and submitting forms as requested to the State WIC Office.
   (d) Submit claim for reimbursement of Breastfeeding Peer Counseling Program costs on a monthly basis to the Department.

Any program or activity for which the applicant received federal financial assistance from the Department of Agriculture: MUST HEREBY GIVE ASSURANCE THAT it will immediately take any measures necessary to effectuate this Agreement.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all federal financial assistance, grants, and loans of federal funds, reimbursable expenditures, grant or donation of federal property and interest in property, the detail of federal personnel, the sale and lease of, and the permission to use, federal property or interest in such property, or the furnishing of services without consideration or at a
nominal consideration, or at a consideration which is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be serviced by such sale, lease, or furnishing of services to recipient, or any improvements made with federal financial assistance extended to the Sub-Recipient by the Department of Agriculture. This includes any federal agreement, arrangement, or other contract which has as one of its purposes the provision of assistance such as food, food stamps, cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

BY ACCEPTING THIS ASSURANCE, the Sub-Recipient agrees to compile data, maintain records, and submit reports as required, to permit effective enforcement of Title VI and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with Title VI. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Services, shall have the right to seek judicial enforcement of this assurance on the behalf of the Sub-Recipient.

The Sub-Recipient operates at three sites: Central, Western, and Eastern. The Sub-Recipient shall perform the services contained herein in accordance with the standards of performance governing the profession or occupation. The Sub-Recipient shall perform herein in a manner consistent with standards recognized in the industry.

Under no circumstances shall the maximum amount payable under this Grant exceed $3,082,238.00 for the Grant period, which includes the WIC budget allocation amount of $3,017,563.00 and the Breastfeeding Peer Counselor Program amount of $64,675.00. The State WIC Office reserves the right to reduce this Grant amount if caseload does not grow or is not maintained which causes the administrative cost per participant to be determined as excessive.

CONTINGENCY CLAUSE: Funding for the activities to be performed under this Grant has historically been provided through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, and the Department anticipates receipt of continued federal funding in cooperation with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children for the grant period October 1, 2021 to September 30, 2022, as in years previous.

Each and every part of this Agreement is dependent upon receipt of the federally appropriated funds. Failure of the Department to qualify for and receive said funds will render this Grant null and void.

FEDERAL DISCLOSURES CLAUSE. The Grant must meet the federal requirements for pass-through entities in 2 C.F.R. § 200.331 (see also 45 C.F.R. § 75.352), which require the Department to notify Sub-Recipient of the following:
A. This Grant constitutes a subaward. The identification information required to be provided under the subaward is enumerated in 2 C.F.R. § 200.331(a)(1) (see also 45 C.F.R. § 75.352(a)(1)).

B. All requirements imposed by the Department on Sub-Recipient so that the federal award is used in accordance with federal statutes, regulations, and terms and conditions of the federal award, as set forth below:

1. Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, but not necessarily limited to, all of the previously listed requirements listed under the “Sub-Recipient shall” section, number two, items a-y.

2. Meet or exceed the monthly target caseload of 13,264.

3. Provide the current indirect cost rate agreement and cost allocation plan upon signing the grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

4. Submit an annual budget.

5. Submit itemized invoices monthly.

6. Participate in the WIC Breastfeeding Peer Counselor Program.
   a. Breastfeeding Peer Counselor Program spending will not exceed $64,675.
   b. Have designated Breastfeeding Peer Counselor Coordinator(s).
   c. Be responsible for the management of the Breastfeeding Peer Counseling Program by providing ongoing supervision, following proper policies and procedures, monitoring program records, and submitting forms as requested to the State WIC Office.

C. Any additional requirements the Department imposes on Sub-Recipient in order for the Department to meet its own responsibility to the federal awarding agency, including identification of any required financial and performance reports, as set forth below:

1. Make all records related to the WIC Program, including medical records and financial statements (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the Sub-Recipient to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the Sub-Recipient's most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.
D. An approved federally recognized indirect cost rate negotiated between Sub-Recipient and the Federal Government, or, if no such rate exists, either a rate negotiated between the Department and Sub-Recipient (in compliance with 2 C.F.R. Part 200 and 45 C.F.R. Part 75), or a de minimis indirect cost rate, as defined in 2 C.F.R. § 200.414(f) (see also 45 C.F.R. § 75.414(f)), as set forth below:

(1) The indirect cost rate as provided by the Sub-Recipient and accepted by the Department is 60.65 percent.

E. Sub-Recipient must permit the Department, including the Office of Program Integrity, and auditors access to Sub-Recipient’s records and financial statements as necessary for the Department to meet the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75).

F. Additional terms and conditions concerning closeout of the subaward, as set forth below:

(1) Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.

G. Sub-Recipient's use of the subaward will be monitored by the Department for compliance with the conditions of the award, federal law and regulations, and for achievement of performance goals. As part of its compliance monitoring, the Department must:

(1) Review financial and performance reports required by the Department;
(2) Follow up and ensure that Sub-Recipient takes timely and appropriate action on all deficiencies pertaining to the subaward detected through audits, onsite reviews, and other means;
(3) Issue a management decision for audit findings pertaining to the subaward, as required by 2 C.F.R. § 200.521 (see also 45 C.F.R. § 75.521).

H. Any additional specific subaward conditions imposed on Sub-Recipient by the Department, as described in 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), and as set forth herein, including, if applicable, the reasons for imposition of such conditions and any actions required by Sub-Recipient for their removal:

(1) Under no circumstances shall the maximum amount payable under this Grant exceed $3,082,238.00 for the Grant period, which includes the WIC budget allocation amount of $3,017,563.00 and the Breastfeeding Peer Counselor Program amount of $64,675.00.
(2) The State WIC Office reserves the right to reduce this contract amount if caseload does not grow or is not maintained which causes the administrative cost per participant to be determined as excessive.

I. Sub-Recipient’s failure to comply with the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) may result in the imposition of additional special conditions by the Department, as provided under 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), or additional remedies for non-compliance, as provided under 2 C.F.R. § 200.338 (see also 45 C.F.R. § 75.371).
The Department must also notify Sub-Recipient of the requirement to adhere to the federal property standards in 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) for any equipment purchased with subaward funding, including the standards in 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all such equipment.

EQUIPMENT USE AND PROCUREMENT CLAUSE. The Sub-Recipient shall adhere to the requirements of 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all equipment purchased with subaward funding, to include the following:

a. Use all equipment purchased with subaward funding for the project's authorized purposes and in accordance with state laws and procedures;

b. Not encumber or dispose of the property without the written approval of the Department and the federal awarding agency. Disposition of any equipment will be made in accordance with instructions provided by the federal awarding agency;

c. Maintain property records that include a description of the property, a serial number, or other identification number, the source of funding, who holds title, the acquisition date, and cost of the property, percentage of federal participation in the project cost, the location, use and condition of the property, and any ultimate disposition data, including the date of disposal and sale price of the property;

d. Physical inventory of the property must be taken and the results reconciled with the property records at least once every two years;

e. Adequate safeguards to protect against loss, damage or theft of the property and investigation of any lost, damaged or stolen property;

f. Develop procedures to ensure program staff forward invoices for equipment purchases of $500 or more to Sub-Recipient's employee in charge of maintaining records for equipment inventory tracking;

g. Recognize that title to materials and supplies, including computing devices, will vest in Sub-Recipient upon acquisition, subject to the requirements of 2 C.F.R. § 200.314 (see also 45 C.F.R. § 75.321) for compensation to the federal awarding agency for residual inventory of unused supplies exceeding $5,000 in total aggregate value upon termination or completion of the project or program.

OFFICE OF INSPECTOR GENERAL EXCLUSION PROVISION. Section 6501 of the Patient Protection and Affordable Care Act ("PPACA") regarding exclusions from federal health care programs took effect on January 1, 2011. This Section of PPACA amends the Social Security Act to provide that State Medicaid agencies must exclude or terminate from participation any individual or entity excluded from participating in any federal healthcare program, such that, if an individual or entity is excluded or terminated by Medicare or by Medicaid in any state, that individual or entity must be excluded from all other states' Medicaid programs.
Pursuant to that provision, if the Sub-Recipient is entering into this agreement for a federal health care program, Sub-Recipient agrees to screen all employees and subcontractors against the OIG list of excluded individuals and entities upon engagement and at least monthly. This includes screening of former names and variations of names.

CLOSEOUT CLAUSE. Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.

PAYMENTS TO THE SUB-RECIPIENT. The Department shall pay the Sub-Recipient upon receipt of monthly itemized invoices by the Sub-Recipient. Invoices will not be processed if funds are utilized for any activities not specifically outlined unless prior approval is granted by the WIC Program Director.

ASSURANCE OF CIVIL RIGHTS. The Sub-Recipient hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C.2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.), Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) as implemented by Department of Justice regulations at (28 CFR Parts 35 and 36); Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." (August 11, 2000), all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity for which the Sub-Recipient receives federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the Sub-Recipient agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all federal financial assistance, grants, and loans of federal funds, reimbursable expenditures, grant, or donation of federal property and interest in property, the detail of federal personnel, the sale and lease of, and the permission to use federal property or interest in such property or the furnishing of services without consideration or at a
nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with federal financial assistance extended to the Program applicant by USDA. This includes any federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

This assurance is binding on the Sub-Recipient, its successors, transferees, and assignees as long as it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the Sub-Recipient.

ANTI-DISCRIMINATION CLAUSE. Sub-Recipient will comply with Titles IV, VI, and VII of the Civil Rights Act of 1964, the Federal Age Discrimination in Employment Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all applicable Federal and State laws, rules and regulations implementing the foregoing statutes with respect to nondiscrimination on the basis of race, creed, color, religion, national origin, age, sex or disability, as defined in the above laws and regulations. Sub-Recipient shall not discriminate against any otherwise qualified disabled applicant or recipient of aid, for benefits or services, or any employee or person on the basis of physical or mental disability in accordance with the Rehabilitation Act of 1973 or the Americans With Disabilities Act of 1990.

GOVERNOR'S PRORATION CLAUSE. It is agreed that the Department may terminate this Grant by providing thirty (30) days written notice to Sub-Recipient should the Governor of Alabama declare proration of the fund from which payment under this Grant is to be made. This termination for cause is supplemental to other rights the Department may have under this Grant or otherwise to terminate this Grant.

TERMINATION CLAUSE. This Grant may be terminated by either party providing a thirty (30) day written notice to the other party.

AMENDMENT CLAUSE. This Grant may be amended only by mutual agreement in writing, signed by Department and Sub-Recipient, and processed through and approved by all necessary authorities.

STANDARD OF PRACTICE CLAUSE. Sub-Recipient agrees to observe and comply at all times with all federal and state laws and rules in effect during the term of this Grant which in any manner affect performance under this Grant. Sub-Recipient agrees to perform services consistent with customary standard of practice and ethics in the profession.

WHISTLEBLOWER PROTECTION CLAUSE. Pursuant to 41 U.S.C. § 4712, an employee of a contractor, subcontractor, or grantee may not be discharged, demoted,
or otherwise discriminated against as a reprisal for whistleblowing. The statute defines whistleblowing as making a disclosure that the employee reasonably believes is evidence of:

- Gross mismanagement of a federal contract or grant;
- A gross waste of federal funds;
- An abuse of authority relating to a federal contract or grant;
- A substantial and specific danger to public health or safety; or
- A violation of law, rule, or regulation related to a federal contract or grant.

To qualify under the statute, the employee's disclosure must be made to:

- A member of Congress or a representative of a Congressional committee;
- An Inspector General;
- The Government Accountability Office;
- A federal employee responsible for contract or grant oversight or management at the relevant agency;
- An official from the Department of Justice or other law enforcement agency;
- A court or grand jury; or
- A management official or other employee of the contractor, subcontractor, or grantee who has responsibility to investigate, discover or address misconduct.

ASSIGNMENT CLAUSE. The rights, duties, and obligations arising under the terms of this Grant shall not be assigned by any of the parties hereto without the written consent of all other parties.

ENTIRE AGREEMENT CLAUSE. This Grant contains the entire agreement of the parties and there are no other agreements, verbal or written, affecting this Grant that have not been incorporated herein or attached hereto.

SEVERABILITY CLAUSE. Each provision of this Grant is intended to be severable. If any term or provision of this Grant is illegal or invalid for any reason whatsoever, said illegality or invalidity shall not affect the legality or validity of the remainder of this Grant.

HEADINGS CLAUSE. Headings in this Grant are for convenient reference only and shall not be used to interpret or construe the provisions of this Grant.

DO NOT WORK CLAUSE. Sub-Recipient acknowledges and understands that this Grant is not effective until it has received all requisite state government approvals and Sub-Recipient shall not begin performing work under this Grant until notified to do so by the Department. Sub-Recipient is entitled to no compensation for work performed prior to the effective date of this Grant.

EMERGENCY CANCELLATION CLAUSE. Notwithstanding any other provision of this Grant, upon the issuance of a Declaration of Financial Necessity by the State
Health Officer, this Grant may be canceled immediately upon notice of such cancellation being given in writing to the Sub-Recipient. Notwithstanding such cancellation, the Sub-Recipient shall be recompensed for work and labor performed and completed prior to the issuance of such notice on principles of quantum meruit.

FINANCIAL NECESSITY CLAUSE. All terms and conditions of this Grant notwithstanding, the parties agree that upon the issuance of a Declaration of Financial Necessity by the State Health Officer, the maximum amount payable under this Grant may be unilaterally reduced by the Department to an appropriate amount to be determined by the Department upon notice of such being given in writing to the Sub-Recipient. Notwithstanding such reduction, the Sub-Recipient shall be recompensed for work and labor performed and completed prior to the issuance of such notice on principles of quantum meruit.

DEBT OF STATE CLAUSE. It is agreed that the terms and commitments contained herein shall not be constituted as a debt of the State of Alabama in violation of Article X1, Section 213 of the Constitution of Alabama of 1901, as amended by Amendment Number 26. It is further agreed that if any provision of this Grant shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this Grant, be enacted, then that conflicting provision in the Grant shall be deemed null and void. The Sub-Recipient's sole remedy for the settlement of any and all disputes arising under the terms of this Grant shall be limited to the filing of a claim with the Board of Adjustment for the State of Alabama.

TOBACCO SMOKE CLAUSE. Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor facility routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through state or local governments, by federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to one-thousand dollars ($1000) per day and/or the imposition of an administrative compliance order on the responsible entity. By signing and submitting this Grant the Sub-Recipient certifies that it will comply with the requirements of the Act. The Sub-Recipient further agrees that it will require the language of this certification be included in any sub-awards which contain provisions for the children's services and that all Sub-Recipients shall certify accordingly.

LOBBYING CLAUSE. The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a member of Congress, an officer or employee of Congress, or
an employee of a member of Congress in connection with the awarding of any federal grant, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal Grant, contract, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than ten-thousand dollars ($10,000) and not more than one-hundred-thousand dollars ($100,000) for each such failure.

DEBARMENT, SUSPENSION CLAUSE. For the purposes of this clause, "prospective lower tier participant" or "lower tier participant" refers to the Grantee or Sub-Recipient herein.

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules Implementing Executive Order 12549. You may contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily
excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under sub-paragraph 5 above, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—Lower Tier Covered Transactions.

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

RECORD RETENTION. The Sub-Recipient is aware that it must retain all records pertinent to expenditure incurred under this Grant for a period of three (3) years after the termination of all activities funded under this Grant. Records for any displaced person must be kept three (3) years after he/she has received final payment. Notwithstanding the above, if there are litigation, claims, audits, negotiations or other actions that involve any of the records cited and that have started before the expiration of the three-year period, then such records must be retained until completion of the actions and resolutions of all issues, or the expiration of the three-year period, plus the
current year whichever occurs later. See Department of Public Examiners for its record retention policy.

AVAILABILITY OF FINANCIAL STATEMENTS. All records and financial statements, to include a copy of the independent audit report, shall be made available to authorized personnel from the State or Federal Program Office, the Examiners of Public Accounts or their representatives, for audit and inspection purposes.

AUDIT REQUIREMENTS. A non-Federal Sub-Recipient that expends $750,000 in federal awards or more during the Sub-Recipient's fiscal year must have a single audit conducted in accordance with the Uniform Administrative Requirements, 2 CFR Part 200, Subpart F.

HIPAA CLAUSE. This clause is necessitated by the application of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). References to this clause are to the Code of Federal Regulations, hereinafter "CFR."

The parties agree to use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health Information ("Privacy Rule"). The definitions set forth in the Privacy Rule are incorporated by reference into this Grant (45 C.F.R. §§ 160.103 and 164.501). The Parties likewise agree to take all necessary precautions to protect the integrity of electronic protected health information (e-PHI) by complying with the HIPAA Security Rule.

INTERPRETATION CLAUSE. Where there is an apparent conflict among the Grant documents which cannot be resolved by interpretation, this document controls.
Sub-Recipient: Jefferson County Department of Health

Signed: Mark E. Wilson, M.D., A.H.O.

Date: 1-27-2022

Address: 1400 6th Ave, S.
Birmingham, AL 35233-1502

Telephone: (205) 933-1502
Fax: (205) 830-0843

Social Security or FEIN: 63-0475700
DUNS NO: 829537567

Alabama Department of Public Health
This Grant has been reviewed as to content

Signed: Tommy Johnson, D.M.D.
State Dental Director
Acting Bureau Director
Bureau of Family Health Services

Date: 2-4-2022

APPROVED:
Alabama Department of Public Health

Signed: Scott Harris, M.D., M.P.H.
State Health Officer

Date: 3-11-2022

APPROVED AS TO FORM AND COMPLIANCE WITH APPLICABLE RULES AND REGULATIONS DEPT. OF PUBLIC HEALTH

FEB 9 2022

OFFICE OF GENERAL COUNSEL
GRANT BETWEEN
THE ALABAMA DEPARTMENT OF PUBLIC HEALTH
AND
MOBILE COUNTY BOARD OF HEALTH

This Grant entered into by and between the Alabama Department of Public Health, hereinafter the "Department," and Mobile County Board of Health, hereinafter "Sub-Recipient," is effective October 1, 2021 and terminates September 30, 2022.

WHEREAS, the purposes of this Grant, per Public Law 95-627, as amended, is to authorize the establishment of a Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program) within the State of Alabama.

WHEREAS, Code of Ala. 1975, § 22-12C-2 authorizes the State Board of Health to promulgate and adopt rules and procedures it deems necessary to carry out its responsibilities under the WIC Program.

WHEREAS, the Department is responsible for determining the anthropometrics of citizens obtaining health care benefits.

WHEREAS, funding for activities performed under this Grant is provided by the Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, being grant number CFDA 10.557, 5AL700700, for WIC Nutrition Services Administration for the grant budget period October 1, 2021 through September 30, 2022; grant numbers CFDA 10.557, 5AL700W5003 and 5AL700707, for Breastfeeding Peer Counseling for the grant budget periods October 1, 2017 through September 30, 2022, and October 1, 2019 through September 30, 2022, respectively; and grant number CFDA 10.578, WICINF-20-AL-01, for WIC Infrastructure for the grant budget period October 1, 2019 through September 30, 2022.

The program is authorized through the Child Nutrition Act.

NOW THEREFORE, in consideration of the mutual covenants herein below specified and other good and valuable consideration, the receipt of which is hereby acknowledged, the parties herein agree to the following:

The Department shall:
1) Be responsible for assuring proper administration of WIC Programs funds granted under and pursuant to the WIC Program and for establishing performance policy for all aspects of the program, to include, but not necessarily limited to the following:
   a. Enter into Vendor Contracts with local grocery vendors.
   b. Provide supplies for food benefit issuance.
c. Pay contract bank/e-WIC processor for food benefits redeemed.
d. Reimburse the Sub-Recipient for nutrition services, actual approved administrative costs, allowable Breastfeeding Peer Counseling Program costs and allowable infrastructure costs related to the WIC Citronelle renovation project.

The Sub-Recipient shall:
(1) Meet or exceed the monthly target caseload of 11,401.
(2) Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto,
   a. Provide adequate insurance and bond to safeguard program assets. Prior to initiation of this agreement, demonstrate proof of insurance and bond procurement with Department named as beneficiary, by delivering such proof to the WIC Program Director.
   b. Accept applicants from designated service area.
   c. Examine, evaluate and certify participants using State and Federally approved certification procedures. Maintain on file, have available for review and audit all criteria used for certification, including residence information, income standards or other standards used to determine eligibility for free or reduced cost health care and a list of the specific criteria used to determine nutritional need.
   d. Be held liable for food instruments issued and redeemed to participants not properly certified and documented. Sub-Recipient is also liable for over issuance of food instruments.
   e. Make available appropriate health and nutritional education services to participants.
   f. Ensure breastfeeding as the preferred and normal method for infant feeding and inform all participants of the benefits of breast-feeding for the mother and infant; thereby, allowing the participant to make an informed decision.
   g. Ascertain that participants are not charged a fee as a requirement to participate in the WIC Program.
   h. Use supplies provided by the Department to issue food benefits.
   i. Issue food benefits following procedures from the Department.
   j. Submit claim for reimbursement of administrative costs monthly to the Department. Reimbursement of travel in the performance of this agreement will not exceed the current State allowed rate for per diem and for mileage. Sub-Recipient must submit their current travel policy if it is different from the Department’s current rates. Out of State travel must be approved in advance by the State WIC Office. Administrative costs must be broken out and reported in the following categories: Administration, Client Services, Nutrition Education, and Breastfeeding.
   k. Submit required reports and Annual Nutrition Education Plan, timely or by due dates, to the Department.
   l. Maintain complete and accurate records ensuring that the WIC Program is administered in accordance with the State WIC Policy and Procedure Manual, Federal Regulations, and interim State Office policy letters.
m. Notify the Department, in advance, of any anticipated changes in accounting policies and procedures that may influence this agreement. Maintain complete, accurate, documented and correct accounting records of program funds allocated and expended. This includes time studies to document time worked on the WIC Program in accordance with OMB Circular A-87.

n. The records and documents of the Sub-Recipient must be retained three years after the United States Department of Agriculture (USDA) notifies the Department that audits are closed and after all other pending matters are closed. The records shall be subject to audit at any reasonable time and upon reasonable notice, by the State of Alabama, the Examiners of Public Accounts, USDA, the Comptroller General of the United States, or their duly appointed representatives. The Department may by written notice require longer retention of records deemed necessary for resolution of an audit or any litigation. Permission to dispose of any records must be in writing and approved by the WIC Program Director.

o. Comply with Federal regulations that require agencies to meet the requirements of OMB Circular A-133 Audits of State, Local Governments and Non-Profit Organizations. Make all records, including medical records and financial statements, (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the agency to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the agency’s most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

p. All purchases will be made in compliance with the “Common Rule”, uniform administrative requirements for grants and cooperative agreements to State and Local Governments, and requirements of OMB Circular A-87 and 7 CFR Part 3016 and 3017 relating to government wide debarment and suspension (non-procurement). All equipment will be returned to the Department upon termination of the agreement, dissolution of the Sub-Recipient or disposal of the equipment. Ensures that all equipment purchased with WIC funds is used 100 percent for the WIC Program.

q. Obtain prior written approval from the WIC Program Director for all equipment purchased.

r. Inform participants of available health services. Health services means ongoing routine pediatric and obstetric care (such as infant and child care and prenatal and postpartum examinations) or referral for treatment.

s. Maintain competent professional staff to perform certification and appropriate nutrition education services. Ensure that WIC employees attend all applicable training scheduled by the State WIC Office.


u. Comply with the Clinical Laboratory Improvement Amendments (CLIA) of
1988 and provide the Department with the Sub-Recipient's CLIA number, as applicable.

v. Comply with the National Voter Rights Act (NVRA) of 1993 requirements as set forth in the WIC Procedures Manual.

w. Provide substance abuse information, screening and referral according to the WIC Substance Abuse Policy as set forth in the WIC Procedure Manual.

x. All electronic patient data entered into Crossroads will be maintained in a secure manner to prevent inappropriate disclosures of confidential patient information.

y. Monitor compliance with the Civil Rights requirements.

(3) Provide the current indirect cost rate agreement and cost allocation plan upon signing the grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

(4) Submit an annual budget.

(5) Submit itemized invoices monthly.

(6) Participate in the WIC Breastfeeding Peer Counselor Program.
   a. Breastfeeding Peer Counselor Program spending will not exceed $120,000.
   b. Will have designated Breastfeeding Peer Counselor Coordinator(s).
   c. Will be responsible for the management of the Breastfeeding Peer Counseling Program by providing ongoing supervision, following proper policies and procedures, monitoring program records, and submitting forms as requested to the State WIC office.
   d. Submit claim for reimbursement of Breastfeeding Peer Counseling Program costs on a monthly basis to the Department.

(7) Utilize remaining Infrastructure Grant funds and supplemental Nutrition Services Administration funds for facility renovations and associated costs at the Citronelle clinic site.
   a. Spending for this renovation should not exceed $513,370 in total, of which $17,901.56 was utilized during the preceding fiscal year. Therefore, $495,468.44 remains for the Citronelle renovation project ($210,670.44 to be funded with remaining Infrastructure Grant funds and $284,798 to be funded with Nutrition Services Administration funds). If there are additional costs, they must be absorbed by Mobile County Board of Health.
   b. Submit claim for reimbursement of renovations and associated costs on a monthly basis to the Department.
   c. The renovations should be completed by September 30, 2022.

Any program or activity for which the applicant received Federal financial assistance from the Department of Agriculture: MUST HEREBY GIVE ASSURANCE THAT it will immediately take any measures necessary to effectuate this Agreement.
THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use, Federal property or interest in such property, or the furnishing of services without consideration or at a nominal consideration, or at a consideration which is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be serviced by such sale, lease, or furnishing of services to recipient, or any improvements made with Federal financial assistance extended to the Sub-Recipient by the Department of Agriculture. This includes any Federal agreement, arrangement, or other contract which has as one of its purposes the provision of assistance such as food, food stamps, cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

BY ACCEPTING THIS ASSURANCE, the Sub-Recipient agrees to compile data, maintain records, and submit reports as required, to permit effective enforcement of Title VI and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with Title VI. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Services, shall have the right to seek judicial enforcement of this assurance on the behalf of the Sub-Recipient.

The Sub-Recipient operates at six sites: Teen/Women's Center Clinic, Keeler Clinic, Southwest Mobile Health Center, Citronelle Clinic, Semmes Clinic, and Eight Mile Clinic. The Sub-Recipient shall perform the services contained herein in accordance with the standards of performance governing the profession or occupation. The Sub-Recipient shall perform herein in a manner consistent with standards recognized in the industry.

Under no circumstances shall the maximum amount payable under this Grant exceed $3,209,198.44 for the Grant period, which includes the WIC budget allocation amount of $2,593,730.00, the Breastfeeding Peer Counselor Program amount of $120,000.00, and the remaining Citronelle renovation amount of $495,468.44. The State WIC Office reserves the right to reduce this Grant amount if caseload does not grow or is not maintained which causes the administrative cost per participant to be determined as excessive.

CONTINGENCY CLAUSE: Funding for the activities to be performed under this Grant has historically been provided through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, and the Department anticipates receipt of continued federal funding in cooperation with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children for the grant period October 1, 2021 to September 30, 2022, as in years previous.
Each and every part of this Agreement is dependent upon receipt of the federally appropriated funds. Failure of the Department to qualify for and receive said funds will render this Grant null and void.

FEDERAL DISCLOSURES CLAUSE. The Grant must meet the Federal requirements for pass-through entities in 2 C.F.R. § 200.331 (see also 45 C.F.R. § 75.352), which require the Department to notify Sub-Recipient of the following:

A. This Grant constitutes a subaward. The identification information required to be provided under the subaward is enumerated in 2 C.F.R. § 200.331(a)(1) (see also 45 C.F.R. § 75.352(a)(1)).

B. All requirements imposed by the Department on Sub-Recipient so that the Federal award is used in accordance with Federal statutes, regulations, and terms and conditions of the Federal award, as set forth below:

1. Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, but not necessarily limited to, all the previously listed requirements listed under the "Sub-Recipient shall" section, number two, items a-y.

2. Meet or exceed the monthly target caseload of 11,401.

3. Provide the current indirect cost rate agreement and cost allocation plan upon signing the grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

4. Submit an annual budget.

5. Submit itemized invoices monthly.

6. Participate in the WIC Breastfeeding Peer Counselor Program.
   a. Breastfeeding Peer Counselor Program spending will not exceed $120,000.
   b. Will have designated Breastfeeding Peer Counselor(s).
   c. Will be responsible for the management of the Breastfeeding Peer Counseling Program by providing ongoing supervision, following proper policies and procedures, monitoring program records, and submitting forms as requested to the State WIC Office.

7. Utilize Infrastructure Grant funds and supplemental Nutrition Services Administration funds for facility renovations and associated costs at the Citronelle clinic site.
   a. Spending for this renovation should not exceed $513,370 in total, of which $495,468.44 remains available during this grant period. If there are
additional costs incurred above the remaining amount of $495,468.44, they must be absorbed by MCBH.

b. The renovations should be completed by September 30, 2022.

C. Any additional requirements the Department imposes on Sub-Recipient for the Department to meet its own responsibility to the Federal awarding agency, including identification of any required financial and performance reports, as set forth below:

(1) Make all records related to the WIC Program, including medical records and financial statements, (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the agency to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the agency's most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

D. An approved federally recognized indirect cost rate negotiated between Sub-Recipient and the Federal Government, or, if no such rate exists, either a rate negotiated between the Department and Sub-Recipient (in compliance with 2 C.F.R. Part 200 and 45 C.F.R. Part 75), or a de minimis indirect cost rate, as defined in 2 C.F.R. § 200.414(f) (see also 45 C.F.R. § 75.414(f)), as set forth below:

(1) ADPH approved Indirect cost rate for Mobile is 31 percent.

E. Sub-Recipient must permit the Department, including the Office of Program Integrity, and auditors' access to Sub-Recipient's records and financial statements as necessary for the Department to meet the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75).

F. Additional terms and conditions concerning closeout of the subaward, as set forth below:

(1) Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.

G. Sub-Recipient's use of the subaward will be monitored by the Department for compliance with the conditions of the award, Federal law and regulations, and for achievement of performance goals. As part of its compliance monitoring, the Department must:

(1) Review financial and performance reports required by the Department;
(2) Follow up and ensure that Sub-Recipient takes timely and appropriate action on all deficiencies pertaining to the subaward detected through audits, onsite reviews, and other means.
(3) Issue a management decision for audit findings pertaining to the subaward, as required by 2 C.F.R. § 200.521 (see also 45 C.F.R. § 75.521).
H. Any additional specific subaward conditions imposed on Sub-Recipient by the Department, as described in 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), and as set forth herein, including, if applicable, the reasons for imposition of such conditions and any actions required by Sub-Recipient for their removal:

(1) Under no circumstances shall the maximum amount payable under this Grant exceed $3,209,198.44 for the Grant period, which includes the WIC budget allocation amount of $2,593,730.00, the Breastfeeding Peer Counselor Program amount of $120,000.00, and the remaining Citronelle renovation amount of $495,468.44.

(2) The State WIC Office reserves the right to reduce this contract amount if caseload does not grow or is not maintained which causes the administrative cost per participant to be determined as excessive.

I. Sub-Recipient’s failure to comply with the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) may result in the imposition of additional special conditions by the Department, as provided under 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), or additional remedies for non-compliance, as provided under 2 C.F.R. § 200.338 (see also 45 C.F.R. § 75.371).

The Department must also notify Sub-Recipient of the requirement to adhere to the Federal property standards in 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) for any equipment purchased with subaward funding, including the standards in 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all such equipment.

EQUIPMENT USE AND PROCUREMENT CLAUSE. The Sub-Recipient shall adhere to the requirements of 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all equipment purchased by Sub-Recipient with subaward funding, to include the following:

a. Use all equipment purchased with subaward funding for the project’s authorized purposes and in accordance with state laws and procedures;

b. Not encumber or dispose of the property without the written approval of the Department and the Federal awarding agency. Disposition of any equipment will be made in accordance with instructions provided by the Federal awarding agency;

c. Maintain property records that include a description of the property, a serial number, or other identification number, the source of funding, who holds title, the acquisition date, and cost of the property, percentage of Federal participation in the project cost, the location, use and condition of the property, and any ultimate disposition data, including the date of disposal and sale price of the property;

d. Physical inventory of the property must be taken, and the results reconciled with the property records at least once every two years;

e. Adequate safeguards to protect against loss, damage or theft of the property and investigation of any lost, damaged or stolen property;
f. Develop procedures to ensure program staff forward invoices for equipment purchases of $500 or more to Sub-Recipient’s employee in charge of maintaining records for equipment inventory tracking;

g. Recognize that title to materials and supplies, including computing devices, will vest in Sub-Recipient upon acquisition, subject to the requirements of 2 C.F.R. § 200.314 (see also 45 C.F.R. § 75.321) for compensation to the Federal awarding agency for residual inventory of unused supplies exceeding $5,000 in total aggregate value upon termination or completion of the project or program.

OFFICE OF INSPECTOR GENERAL EXCLUSION PROVISION. Section 6501 of the Patient Protection and Affordable Care Act ("PPACA") regarding exclusions from federal health care programs took effect on January 1, 2011. This Section of PPACA amends the Social Security Act to provide that State Medicaid agencies must exclude or terminate from participation any individual or entity excluded from participating in any Federal healthcare program, such that, if an individual or entity is excluded or terminated by Medicare or by Medicaid in any state, that individual or entity must be excluded from all other states’ Medicaid programs.

Pursuant to that provision, if the Contractor is entering into this agreement for a federal health care program, Contractor agrees to screen all employees and subcontractors against the OIG list of excluded individuals and entities upon engagement and at least monthly. This includes screening of former names and variations of names.

CLOSEOUT CLAUSE. Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.

PAYMENTS TO THE SUB-RECIPIENT. The Department shall pay the Sub-Recipient upon receipt of monthly itemized invoices by the Sub-Recipient. Invoices will not be processed if funds are utilized for any activities not specifically outlined unless prior approval is granted by the WIC Program Director.

ASSURANCE OF CIVIL RIGHTS The Sub-Recipient hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C.2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) as implemented by Department of Justice regulations at (28 CFR Parts 35 and 36); Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." (August 11, 2000), all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or
otherwise be subjected to discrimination under any program or activity for which the Sub-Recipient receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the Sub-Recipient agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant, or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with Federal financial assistance extended to the Program applicant by USDA. This includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

This assurance is binding on the Sub-Recipient, its successors, transferees, and assignees if it receives assistance or retains possession of any assistance from the Department. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the Sub-Recipient.

ANTI-DISCRIMINATION CLAUSE. Sub-Recipient will comply with Titles IV, VI, and VII of the Civil Rights Act of 1964, the Federal Age Discrimination in Employment Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all applicable Federal and State laws, rules and regulations implementing the foregoing statutes with respect to nondiscrimination on the basis of race, creed, color, religion, national origin, age, sex or disability, as defined in the above laws and regulations. Sub-Recipient shall not discriminate against any otherwise qualified disabled applicant for, or recipient of aid, benefits, or services or any employee or person on the basis of physical or mental disability in accordance with the Rehabilitation Act of 1973 or the Americans With Disabilities Act of 1990.

GOVERNOR'S PRORATION CLAUSE. It is agreed that the Department may terminate this Grant by providing thirty (30) days written notice to Sub-Recipient should the Governor of Alabama declare proration of the fund from which payment under this
Grant is to be made. This termination for cause is supplemental to other rights the Department may have under this Grant or otherwise to terminate this Grant.

TERMINATION CLAUSE. This Grant may be terminated by either party providing a thirty (30) day written notice to the other party.

AMENDMENT CLAUSE. This Grant may be amended only by mutual agreement in writing, signed by Department and Sub-Recipient, and processed through and approved by all necessary authorities.

STANDARD OF PRACTICE CLAUSE. Sub-Recipient agrees to observe and comply at all times with all Federal and State laws and rules in effect during the term of this Grant which in any manner affect performance under this Grant. Sub-Recipient agrees to perform services consistent with customary standard of practice and ethics in the profession.

WHISTLEBLOWER PROTECTION CLAUSE. Pursuant to 41 U.S.C. § 4712, an employee of a contractor, subcontractor, or grantee may not be discharged, demoted, or otherwise discriminated against as a reprisal for whistleblowing. The statute defines whistleblowing as making a disclosure that the employee reasonably believes is evidence of:

- Gross mismanagement of a Federal contract or grant;
- A gross waste of Federal funds;
- An abuse of authority relating to a Federal contract or grant;
- A substantial and specific danger to public health or safety; or
- A violation of law, rule, or regulation related to a Federal contract or grant.

To qualify under the statute, the employee’s disclosure must be made to:

- A Member of Congress or a representative of a Congressional committee;
- An Inspector General;
- The Government Accountability Office;
- A federal employee responsible for contract or grant oversight or management at the relevant agency;
- An official from the Department of Justice or other law enforcement agency;
- A court or grand jury; or
- A management official or other employee of the contractor, subcontractor, or grantee who has responsibility to investigate, discover or address misconduct.

ASSIGNMENT CLAUSE. The rights, duties, and obligations arising under the terms of this Grant shall not be assigned by any of the parties hereto without the written consent of all other parties.
ENTIRE AGREEMENT CLAUSE. This Grant contains the entire agreement of the parties and there are no other agreements, verbal or written, affecting this Grant that have not been incorporated herein or attached hereto.

SEVERABILITY CLAUSE. Each provision of this Grant is intended to be severable. If any term or provision of this Grant is illegal or invalid for any reason whatsoever, said illegality or invalidity shall not affect the legality or validity of the remainder of this Grant.

HEADINGS CLAUSE. Headings in this Grant are for convenient reference only and shall not be used to interpret or construe the provisions of this Grant.

DO NOT WORK CLAUSE. Sub-Recipient acknowledges and understands that this Grant is not effective until it has received all requisite State government approvals and Sub-Recipient shall not begin performing work under this Grant until notified to do so by the Department. Sub-Recipient is entitled to no compensation for work performed prior to the effective date of this Grant.

EMERGENCY CANCELLATION CLAUSE. Notwithstanding any other provision of this Grant, upon the issuance of a Declaration of Financial Necessity by the State Health Officer, this Grant may be canceled immediately upon notice of such cancellation being given in writing to the Sub-Recipient. Notwithstanding such cancellation, the Sub-Recipient shall be recompensed for work and labor performed and completed prior to the issuance of such notice on principles of quantum meruit.

FINANCIAL NECESSITY CLAUSE. All terms and conditions of this Grant notwithstanding, the parties agree that upon the issuance of a Declaration of Financial Necessity by the State Health Officer, the maximum amount payable under this Grant may be unilaterally reduced by the Department to an appropriate amount to be determined by the Department upon notice of such being given in writing to the Sub-Recipient. Notwithstanding such reduction, the Sub-Recipient shall be recompensed for work and labor performed and completed prior to the issuance of such notice on principles of quantum meruit.

DEBT OF STATE CLAUSE. It is agreed that the terms and commitments contained herein shall not be constituted as a debt of the State of Alabama in violation of Article X1, Section 213 of the Constitution of Alabama of 1901, as amended by Amendment Number 26. It is further agreed that if any provision of this Grant shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this Grant, be enacted, then that conflicting provision in the Grant shall be deemed null and void. The Sub-Recipient’s sole remedy for the settlement of any and all disputes arising under the terms of this Grant shall be limited to the filing of a claim with the Board of Adjustment for the State of Alabama.

TOBACCO SMOKE CLAUSE. Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not
be permitted in any portion of any indoor facility routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children’s services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to one-thousand dollars ($1000) per day and/or the imposition of an administrative compliance order on the responsible entity. By signing and submitting this Grant the Sub-Recipient certifies that it will comply with the requirements of the Act.

The Sub-Recipient further agrees that it will require the language of this certification be included in any sub-awards which contain provisions for the children’s services and that all Sub-Recipients shall certify accordingly.

**LOBBYING CLAUSE.** The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Grant, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal Grant, contract, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than ten-thousand dollars ($10,000) and not more than one-hundred-thousand dollars ($100,000) for each such failure.

**DEBARMENT, SUSPENSION CLAUSE.** For the purposes of this clause, “prospective lower tier participant” or “lower tier participant” refers to the Grantee or Sub-Recipient herein.
1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.
4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under sub-paragraph 5 above, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or
agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--Lower Tier Covered Transactions.

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

RECORD RETENTION. The Sub-Recipient is aware that it must retain all records pertinent to expenditure incurred under this Grant for a period of three (3) years after the termination of all activities funded under this Grant. Records for any displaced person must be kept three (3) years after he/she has received final payment. Notwithstanding the above, if there are litigation, claims, audits, negotiations or other actions that involve any of the records cited and that have started before the expiration of the three-year period, then such records must be retained until completion of the actions and resolutions of all issues, or the expiration of the three-year period, plus the current year whichever occurs later. See Department of Public Examiners for its record retention policy.

AVAILABILITY OF FINANCIAL STATEMENTS. All records and financial statements, to include a copy of the independent audit report, shall be made available to authorized personnel from the State or Federal Program Office, the Examiners of Public Accounts or their representatives, for audit and inspection purposes.

AUDIT REQUIREMENTS. A non-Federal Sub-Recipient that expends $750,000 in federal awards or more during the Sub-Recipient's fiscal year must have a single audit conducted in accordance with the Uniform Administrative Requirements, 2 CFR Part 200, Subpart F.

HIPAA CLAUSE. This clause is necessitated by the application of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). References to this clause are to the Code of Federal Regulations, hereinafter "CFR.*

The parties agree to use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health Information ("Privacy Rule"). The definitions set forth in the Privacy Rule are incorporated by reference into this Grant (45 C.F.R. §§ 160.103 and 164.501). The Parties likewise agree to take all necessary
precautions to protect the integrity of electronic protected health information (e-PHI) by complying with the HIPAA Security Rule.

INTERPRETATION CLAUSE. Where there is an apparent conflict among the Grant documents which cannot be resolved by interpretation, this document controls.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK.]
Sub-Recipient:
Mobile County Board of Health

Signed:
Bernard H. Etchold II, M.D., Dr. P.H.,
F.A.C.P
Health Officer

Date: 1/26/22

Address:
251 N Bayou St
Mobile, AL 36603-5827

Telephone: (251) 690-8827
Fax: (251) 432-4773

Sub-Recipient please type or print your email address: swcrawford@mchd.org

Social Security or FEIN: 63-6001641

DUNS NO: 877377440

Alabama Department of Public Health
This Grant has been reviewed as to content

Signed:
Nancy Johnson, D.M.D.
State Dental Director
Acting Bureau Director
Bureau of Family Health Services

Date: 2/4/22

APPROVED:
Alabama Department of Public Health

Signed:
Scott Harris, M.D., M.P.H.
State Health Officer

Date: 2/11/2022

APPROVED AS TO FORM AND COMPLIANCE WITH APPLICABLE RULES AND REGULATIONS DEPT. OF PUBLIC HEALTH

FEB 9 2022

P. Brumfield
OFFICE OF GENERAL COUNSEL
GRANT
BETWEEN
THE ALABAMA DEPARTMENT OF PUBLIC HEALTH
AND
POARCH BAND OF CREEK INDIANS

This Grant entered into by and between the Alabama Department of Public Health, hereinafter the "Department," and Poarch Band of Creek Indians, hereinafter "Sub-Recipieint," is effective October 1, 2021, or upon approval by the Governor, and terminates September 30, 2022.

WHEREAS, the purpose of this Grant, per Public Law 95-627, as amended, is to authorize the establishment of a Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program) within the State of Alabama.

WHEREAS, Code of Ala. 1975, § 22-12C-2 authorizes the State Board of Health to promulgate and adopt rules and procedures it deems necessary to carry out its responsibilities under the WIC Program.

WHEREAS, the Department is responsible for determining the anthropometrics of citizens obtaining health care benefits.

WHEREAS, funding for activities performed under this Grant is provided by the Department, Bureau of Family Health Services, WIC Division, through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, being grant number CFDA 10.557, 5AL700700, for the grant budget period October 1, 2021 through September 30, 2022. The program is authorized through the Child Nutrition Act.

WHEREAS, this Grant is awarded to Sub-Recipient as a sole source provider. No other goods or services that can meet the needs herein and no other vendor offers substantially equivalent goods or services that can accomplish the purpose for which the service is required.

NOW THEREFORE, in consideration of the mutual covenants herein below specified and other good and valuable consideration, the receipt of which is hereby acknowledged, the parties herein agree to the following:

The Department shall:
(1) Be responsible for assuring proper administration of WIC Programs funds granted under and pursuant to the WIC Program and for establishing performance policy for all aspects of the program, to include, but not necessarily limited to the following:
(a) Enter into Vendor Contracts with local grocery vendors.
(b) Provide supplies for food benefit issuance.
(c) Pay contract bank/e-WIC processor for food benefits redeemed.
(d) Reimburse the Sub-Recipient for nutrition services and actual approved administrative costs.

The Sub-Recipient shall:

(1) Meet or exceed the monthly target caseload of 196.
(2) Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, but not necessarily limited to the following:
   (a) Provide adequate insurance and bond to safeguard program assets. Prior to initiation of this Agreement, demonstrate proof of insurance and bond procurement with Department named as beneficiary, by delivering such proof to the WIC Program Director.
   (b) Accept applicants from designated service area.
   (c) Examine, evaluate and certify participants using State and Federally approved certification procedures. Maintain on file, have available for review and audit all criteria used for certification, including residence information, income standards or other standards used to determine eligibility for free or reduced cost health care and a list of the specific criteria used to determine nutritional need.
   (d) Sub-Recipient shall be held liable for food instruments issued and redeemed to participants not properly certified and documented. Sub-Recipient is also liable for over issuance of food instruments.
   (e) Make available appropriate health and nutritional education services to participants.
   (f) Ensure breast-feeding as the preferred and normal method for infant feeding and inform all participants of the benefits of breast-feeding for the mother and infant; thereby, allowing the participant to make an informed decision.
   (g) Ascertain that participants are not charged a fee as a requirement to participate in the WIC Program.
   (h) Use supplies provided by the Department to issue food benefits.
   (i) Issue food benefits following procedures from the Department.
   (j) Submit claim for reimbursement of administrative costs monthly to the Department. Reimbursement of travel in the performance of this agreement will not exceed the current State allowed rate for per diem and for mileage. Out of State travel must be approved in advance by the State WIC Office. Administrative costs must be broken out and reported in the following categories: Administration, Client Services, Nutrition Education, and Breastfeeding.
   (k) Submit required reports and Annual Nutrition Education Plan, timely or by due dates, to the Department.
(l) Maintain complete and accurate records ensuring that the WIC Program is administered in accordance with the State WIC Policy and Procedure Manual, Federal Regulations, and Interim State Office policy letters.

(m) Notify the Department, in advance, of any anticipated changes in accounting policies and procedures that may influence this agreement. Maintain complete, accurate, documented and correct accounting records of program funds allocated and expended. This includes time studies to document time worked on the WIC Program in accordance with 2 CFR Chapter 1, Chapter II, Part 200.

(n) The records and documents of the Sub-Recipient related to the WIC Program must be retained three years after the United States Department of Agriculture (USDA) notifies the Department that audits are closed and after all other pending matters are closed. The WIC Program records shall be subject to audit at any reasonable time and upon reasonable notice, by the State of Alabama, the Examiners of Public Accounts, USDA, the Comptroller General of the United States, or their duly appointed representatives. The Department may by written notice require longer retention of records deemed necessary for resolution of an audit or any litigation. Permission to dispose of any records must be in writing and approved by the WIC Program Director.

(o) Comply with Federal regulations that require agencies to meet the requirements of 2 CFR Chapter 1, Chapter II, Part 200. Make all records related to the WIC Program, including medical records and financial statements, (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the agency to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the agency's most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

(p) All purchases will be made in compliance with the "Common Rule", uniform administrative requirements for grants and cooperative agreements to State and Local Governments, and requirements of 2 CFR Chapter 1, Chapter II, Part 200 and 7 CFR Part 3016 and 3017 relating to government wide debarment and suspension (non-procurement). All equipment will be returned to the Department upon termination of the agreement, dissolution of the Sub-Recipient or disposal of the equipment. Ensures that all equipment purchased with WIC funds is used 100 percent for the WIC Program.

(q) Obtain prior written approval from the WIC Program Director for all equipment purchased (to include Advanced Data Processing).
(r) Inform participants of available health services. Health services means ongoing routine pediatric and obstetric care (such as infant and child care and prenatal and postpartum examinations) or referral for treatment.

(s) Maintain competent professional staff to perform certification and appropriate nutrition education services. Ensure that WIC employees attend all applicable training scheduled by the State WIC Office.


(u) Comply with the Clinical Laboratory Improvement Amendments (CLIA) of 1988 and provide the Department with the Sub-Recipient's CLIA number, as applicable.

(v) Comply with the National Voter Rights Act (NVRA) of 1993 requirements as set forth in the WIC Procedures Manual.

(w) Provide substance abuse information, screening and referral according to the WIC Substance Abuse Policy as set forth in the WIC Procedure Manual.

(x) All electronic patient data entered into Crossroads will be maintained in a secure manner to prevent inappropriate disclosures of confidential patient information.

(y) Monitor compliance with the Civil Rights requirements.

(3) Provide the current indirect cost rate agreement and cost allocation plan upon signing the grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email address, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

(4) Submit an annual budget.

(5) Submit itemized invoices monthly.

Any program or activity for which the applicant received Federal financial assistance from the Department of Agriculture: Must HEREBY GIVE ASSURANCE THAT it will immediately take any measures necessary to effectuate this Agreement.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use, Federal property or interest in such property, or the furnishing of services without consideration or at a nominal consideration, or at a consideration which is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be serviced by such sale, lease, or furnishing of services to recipient, or any improvements
made with Federal financial assistance extended to the Sub-Recipient by the Department of Agriculture. This includes any Federal agreement, arrangement, or other contract which has as one of its purposes the provision of assistance such as food, food stamps, cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

BY ACCEPTING THIS ASSURANCE, the Sub-Recipient agrees to compile data, maintain records, and submit reports as required, to permit effective enforcement of Title VI and permit authorized USDA personnel during normal working hours to review such records, books and accounts as needed to ascertain compliance with Title VI. If there are any violations of this assurance, the Department of Agriculture, Food and Nutrition Services, shall have the right to seek judicial enforcement of this assurance on the behalf of the Sub-Recipient.

The Sub-Recipient operates one site at Atmore, Alabama. The Sub-Recipient shall perform the services contained herein in accordance with the standards of performance governing the profession or occupation. The Sub-Recipient shall perform herein in a manner consistent with standards recognized in the industry.

Under no circumstances shall the maximum amount payable under this Grant exceed $70,000.00 for the Grant period.

CONTINGENCY CLAUSE: Funding for the activities to be performed under this Grant has historically been provided through a cooperative agreement with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children, and the Department anticipates receipt of continued federal funding in cooperation with the United States Department of Agriculture, Special Supplemental Nutrition Program for Women, Infants, and Children for the Grant period October 1, 2021 to September 30, 2022, as in years previous.

Each and every part of this Agreement is dependent upon receipt of the federally appropriated funds. Failure of the Department to qualify for and receive said funds will render this Grant null and void.

FEDERAL DISCLOSURES CLAUSE. The Grant must meet the Federal requirements for pass-through entities in 2 C.F.R. § 200.331 (see also 45 C.F.R. § 75.352), which require the Department to notify Sub-Recipient of the following:

a. This Grant constitutes a subaward. The identification information required to be provided under the subaward is enumerated in 2 C.F.R. § 200.331(a)(1) (see also 45 C.F.R. § 75.352(a)(1)).

b. All requirements imposed by the Department on Sub-Recipient so that the Federal award is used in accordance with Federal statutes, regulations, and terms and conditions of the Federal award, as set forth below:
(1) Be responsible for carrying out the program in accordance with existing laws, rules and regulations pertaining thereto, and policies and procedures established by Department's Family Health Services, WIC Program, to include, all previously listed requirements located under the "Sub-Recipient shall" section, number two, items a-y.

(2) Meet or exceed the target caseload of 196.

(3) Provide the current indirect cost rate agreement and cost allocation plan upon signing the grant. Changes to the indirect cost rate agreement and cost allocation plan during the grant period should be reported immediately to Allison Hatchett, WIC Program Director, by sending an electronic message to Allison Hatchett at the following email addresses, allison.hatchett@adph.state.al.us and a written letter to Allison Hatchett at the following address, Alabama Department of Public Health, Bureau of Family Health Services, WIC Division, 201 Monroe Street, Suite 1300, Montgomery, AL 36104.

(4) Submit an annual budget.

(5) Submit itemized invoices monthly.

c. Any additional requirements the Department imposes on Sub-Recipient for the Department to meet its own responsibility to the Federal awarding agency, including identification of any required financial and performance reports, as set forth below.

(1) Make all records related to the WIC Program, including medical records and financial statements, (to include a copy of the independent audit report), available to authorized personnel from the State or Federal Program Office, or their representatives, for audit inspection purposes. These records shall be made available at any reasonable time during normal business hours. Any irregularities found causing the misuse of funds may require the agency to reimburse the WIC Program. Audits may or may not be pre-announced. A copy of the agency's most recent completed independent audit report at fiscal year-end will be forwarded to the Department within 30 days of receipt by Sub-Recipient.

d. An approved federally recognized indirect cost rate negotiated between Sub-Recipient and the Federal Government, or, if no such rate exists, either a rate negotiated between the Department and Sub-Recipient (in compliance with 2 C.F.R. Part 200 and 45 C.F.R. Part 75), or a de minimis indirect cost rate, as defined in 2 C.F.R. § 200.414(f) (see also 45 C.F.R. § 75.414(f)), as set forth below:

(1) The indirect cost agreement as set forth in the Indian Organization Indirect Cost Negotiation Agreement will be a fixed carryforward rate of 18.59 percent.

e. Sub-Recipient must permit the Department, including the Office of Program Integrity, and auditors access to Sub-Recipient's records and financial statements related to the WIC Program as necessary for the Department to meet the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75);
f. Additional terms and conditions concerning closeout of the subaward, as set forth below:
   (1) Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.

g. Sub-Recipient's use of the subaward will be monitored by the Department for compliance with the conditions of the award, Federal law and regulations, and for achievement of performance goals. As part of its compliance monitoring, the Department must:
   (1) Review financial and performance reports required by the Department;
   (2) Follow up and ensure that Sub-Recipient takes timely and appropriate action on all deficiencies pertaining to the subaward detected through audits, onsite reviews, and other means;
   (3) Issue a management decision for audit findings pertaining to the subaward, as required by 2 C.F.R. § 200.521 (see also 45 C.F.R. § 75.521).

h. Any additional specific subaward conditions imposed on Sub-Recipient by the Department, as described in 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), and as set forth herein, including, if applicable, the reasons for imposition of such conditions and any actions required by Sub-Recipient for their removal:
   (1) Under no circumstances shall the maximum amount payable under this Grant exceed $70,000 for the Grant period.

i. Sub-Recipient’s failure to comply with the requirements of 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) may result in the imposition of additional special conditions by the Department, as provided under 2 C.F.R. § 200.207 (see also 45 C.F.R. § 75.207), or additional remedies for non-compliance, as provided under 2 C.F.R. § 200.338 (see also 45 C.F.R. § 75.371).

The Department must also notify Sub-Recipient of the requirement to adhere to the Federal property standards in 2 C.F.R. Part 200 (see also 45 C.F.R. Part 75) for any equipment purchased with subaward funding, including the standards in 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all such equipment.

EQUIPMENT USE AND PROCUREMENT CLAUSE. The Sub-Recipient shall adhere to the requirements of 2 C.F.R. § 200.313 (see also 45 C.F.R. § 75.320) for the use of all equipment purchased by Sub-Recipient with subaward funding, to include the following:

a. Use all equipment purchased with subaward funding for the project’s authorized purposes and in accordance with state laws and procedures;

b. Not encumber or dispose of the property without the written approval of the Department and the Federal awarding agency. Disposition of any equipment will be made in accordance with instructions provided by the Federal awarding agency;
c. Maintain property records that include a description of the property, a serial number, or other identification number, the source of funding, who holds title, the acquisition date, and cost of the property, percentage of Federal participation in the project cost, the location, use and condition of the property, and any ultimate disposition data, including the date of disposal and sale price of the property;

d. Physical inventory of the property must be taken, and the results reconciled with the property records at least once every two years;

e. Adequate safeguards to protect against loss, damage or theft of the property and investigation of any lost, damaged or stolen property;

f. Develop procedures to ensure program staff forward invoices for equipment purchases of $500 or more to Sub-Recipient’s employee in charge of maintaining records for equipment inventory tracking;

g. Recognize that title to materials and supplies, including computing devices, will vest in Sub-Recipient upon acquisition, subject to the requirements of 2 C.F.R. § 200.314 (see also 45 C.F.R. § 75.321) for compensation to the Federal awarding agency for residual inventory of unused supplies exceeding $5,000 in total aggregate value upon termination or completion of the project or program.

BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT.

By signing this grant, the parties affirm, for the duration of the grant, that they will not violate federal immigration law or knowingly employ, hire for employment, or continue to employ an unauthorized alien within the State of Alabama. Furthermore, a party found to be in violation of this provision shall be deemed in breach of the grant and shall be responsible for all damages resulting therefrom.

OFFICE OF INSPECTOR GENERAL EXCLUSION PROVISION. Section 6501 of the Patient Protection and Affordable Care Act ("PPACA") regarding exclusions from federal health care programs took effect on January 1, 2011. This Section of PPACA amends the Social Security Act to provide that State Medicaid agencies must exclude or terminate from participation any individual or entity excluded from participating in any Federal healthcare program, such that, if an individual or entity is excluded or terminated by Medicare or by Medicaid in any state, that individual or entity must be excluded from all other states’ Medicaid programs.

Pursuant to that provision, if the Contractor is entering into this agreement for a federal health care program, Contractor agrees to screen all employees and subcontractors against the OIG list of excluded individuals and entities upon engagement and at least monthly. This includes screening of former names and variations of names.

CLOSEOUT CLAUSE. Sub-Recipient acknowledges that all invoices or other demands for payment must be received by the Department by October 17, 2022. Invoices or demands for payment received after that date cannot be paid and are forfeited.
ANTI-DISCRIMINATION CLAUSE. In the administration of the WIC Program, and to the extent applicable to federally recognized Indian tribes, sub-Recipient will comply with Titles IV, VI, and VII of the Civil Rights Act of 1964, the Federal Age Discrimination in Employment Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and all applicable Federal and State laws, rules and regulations implementing the foregoing statutes with respect to nondiscrimination on the basis of race, creed, color, religion, national origin, age, sex or disability, as defined in the above laws and regulations. Sub-Recipient shall not discriminate against any otherwise qualified disabled applicant for, or recipient of aid, benefits, or services or any employee or person on the basis of physical or mental disability in accordance with the Rehabilitation Act of 1973 or the Americans With Disabilities Act of 1990.

ASSURANCE OF CIVIL RIGHTS COMPLIANCE. In connection with the employment of any employee directly engaged in the performance of work under this grant, the Sub-Recipient hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C.2000d et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C.794), Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.); Title II and Title III of the Americans with Disabilities Act (ADA) of 1990 as amended by the ADA Amendment Act of 2008 (42 U.S.C. 12131-12189) as implemented by Department of Justice regulations at (28 CFR Parts 35 and 36); Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." (August 11, 2000), all provisions required by the implementing regulations of the U.S. Department of Agriculture (7 CFR Part 15 et seq); and FNS directives and guidelines to the effect that no person shall, on the ground of race, color, national origin, age, sex, or disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination, under any program or activity for which the Sub-Recipient receives Federal financial assistance from FNS; and hereby gives assurance that it will immediately take measures necessary to effectuate this agreement.

By providing this assurance, the Sub-Recipient agrees to compile data, maintain records and submit records and reports as required to permit effective enforcement of the nondiscrimination laws, and to permit Department personnel during normal working hours to review and copy such records, books and accounts, access such facilities, and interview such personnel as needed to ascertain compliance with the non-discrimination laws. If there are any violations of this assurance, the Department of Agriculture shall have the right to seek judicial enforcement of this assurance.

This assurance is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants, and loans of Federal funds, reimbursable expenditures, grant, or donation of Federal property and interest in property, the detail of Federal personnel, the sale and lease of, and the permission to use Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration that is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or
furnishing of services to the recipient, or any improvements made with Federal financial assistance extended to the Program applicant by USDA. This includes any Federal agreement, arrangement, or other contract that has as one of its purposes the provision of cash assistance for the purchase of food, and cash assistance for purchase or rental of food service equipment or any other financial assistance extended in reliance on the representations and agreements made in this assurance.

This assurance is binding on the Sub-Recipient, its successors, transferees, and assignees as long as it receives assistance or retains possession of any assistance from the Department in connection with this grant. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the Sub-Recipient.

ANTI-BOYCOTT CLAUSE. Sub-Recipient represents that it is not currently engaged in, and will not engage in, the boycott of a person or an entity based in or doing business with a jurisdiction with which this state can enjoy open trade.

GOVERNOR’S PRORATION CLAUSE. It is agreed that the Department may terminate this Grant by providing thirty (30) days written notice to Sub-Recipient should the Governor of Alabama declare proration of the fund from which payment under this Grant is to be made. This termination for cause is supplemental to other rights the Department may have under this Grant or otherwise to terminate this Grant.

TERMINATION CLAUSE. This Grant may be terminated by either party providing a thirty (30) day written notice to the other party.

AMENDMENT CLAUSE. This Grant may be amended only by mutual agreement in writing, signed by Department and Sub-Recipient, and processed through and approved by all necessary authorities.

STANDARD OF PRACTICE CLAUSE. Sub-Recipient agrees to observe and comply at all times with all Federal and State laws and rules in effect during the term of this Grant which in any manner affect performance under this Grant. Sub-Recipient agrees to perform services consistent with customary standard of practice and ethics in the profession.

WHISTLEBLOWER PROTECTION CLAUSE. Pursuant to 41 U.S.C. § 4712, an employee of a contractor, subcontractor, or grantee may not be discharged, demoted, or otherwise discriminated against as a reprisal for whistleblowing. The statute defines whistleblowing as making a disclosure that the employee reasonably believes is evidence of:

Gross mismanagement of a Federal contract or grant;
A gross waste of Federal funds;
An abuse of authority relating to a Federal contract or grant;
A substantial and specific danger to public health or safety; or  
A violation of law, rule, or regulation related to a Federal contract or grant.

To qualify under the statute, the employee's disclosure must be made to:

A Member of Congress or a representative of a Congressional committee;  
An Inspector General;  
The Government Accountability Office;  
A federal employee responsible for contract or grant oversight or management at  
the relevant agency;  
An official from the Department of Justice or other law enforcement agency;  
A court or grand jury; or  
A management official or other employee of the contractor, subcontractor, or  
grantee who has responsibility to investigate, discover or address misconduct.

ASSIGNMENT CLAUSE. The rights, duties, and obligations arising under the  
terms of this Grant shall not be assigned by any of the parties hereto without the written  
consent of all other parties.

ENTIRE AGREEMENT CLAUSE. This Grant contains the entire agreement of  
the parties and there are no other agreements, verbal or written, affecting this Grant that  
have not been incorporated herein or attached hereto.

SEVERABILITY CLAUSE. Each provision of this Grant is intended to be  
severable. If any term or provision of this Grant is illegal or invalid for any reason  
whatsoever, said illegality or invalidity shall not affect the legality or validity of the  
remainder of this Grant.

HEADINGS CLAUSE. Headings in this Grant are for convenient reference only  
and shall not be used to interpret or construe the provisions of this Grant.

DO NOT WORK CLAUSE. Sub-Recipient acknowledges and understands that  
this Grant is not effective until it has received all requisite State government approvals  
and Sub-Recipient shall not begin performing work under this Grant until notified to do  
so by the Department. Sub-Recipient is entitled to no compensation for work performed  
prior to the effective date of this Grant.

EMERGENCY CANCELLATION CLAUSE. Notwithstanding any other provision  
of this Grant, upon the issuance of a Declaration of Financial Necessity by the State  
Health Officer, this Grant may be canceled immediately upon notice of such cancellation  
being given in writing to the Sub-Recipient. Notwithstanding such cancellation, the Sub-  
Recipient shall be recompensed for work and labor performed and completed prior to  
the issuance of such notice on principles of quantum meruit.
FINANCIAL NECESSITY CLAUSE. All terms and conditions of this Grant notwithstanding, the parties agree that upon the issuance of a Declaration of Financial Necessity by the State Health Officer, the maximum amount payable under this Grant may be unilaterally reduced by the Department to an appropriate amount to be determined by the Department upon notice of such being given in writing to the Sub-Recipient. Notwithstanding such reduction, the Sub-Recipient shall be recompensed for work and labor performed and completed prior to the issuance of such notice on principles of quantum meruit.

DEBT OF STATE CLAUSE. It is agreed that the terms and commitments contained herein shall not be constituted as a debt of the State of Alabama in violation of Article XI, Section 213 of the Constitution of Alabama of 1901, as amended by Amendment Number 26. It is further agreed that if any provision of this Grant shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this Grant, be enacted, then that conflicting provision in the Grant shall be deemed null and void. The Sub-Recipient’s sole remedy for the settlement of any and all disputes arising under the terms of this Grant shall be limited to the filing of a claim with the Board of Adjustment for the State of Alabama.

DISPUTES. In the event of any dispute between the parties, senior officials of both parties shall meet and engage in a good faith attempt to resolve the dispute. Should that effort fail and the dispute involves the payment of money, a party’s sole remedy is the filing of a claim with the Board of Adjustment of the State of Alabama. For any and all other disputes arising under the terms of this contract which are not resolved by negotiation, the parties agree to utilize appropriate forms of non-binding alternative dispute resolution including, but not limited to, mediation. Such dispute resolution shall occur in Montgomery, Alabama, utilizing where appropriate, mediators selected from the roster of mediators maintained by the Center for Dispute Resolution of the Alabama State Bar.

MERIT SYSTEM CLAUSE. Sub-Recipient shall not be entitled to receive any benefits under this Grant that merit system employees receive by virtue of their status or employment, nor may Sub-Recipient nor any of its officers, agents, servants or employees be employed as a merit system employee during the term of this Grant. Any such employment automatically voids this Grant.

HOLD HARMLESS CLAUSE. Sub-Recipient hereby holds harmless the State of Alabama and the Department and their officers, agents, servants, and employees from any and all claims arising out of acts or omissions committed by the Sub-Recipient or any agent, servant, or employee of Sub-Recipient while in performance hereunder.

TOBACCO SMOKE CLAUSE. Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor facility routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care,
education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to one-thousand dollars ($1000) per day and/or the imposition of an administrative compliance order on the responsible entity. By signing and submitting this Grant the Sub-Recipient certifies that it will comply with the requirements of the Act. The Sub-Recipient further agrees that it will require the language of this certification be included in any sub-awards which contain provisions for the children's services and that all Sub-Recipients shall certify accordingly.

LOYIBING CLAUSE. The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Grant, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal Grant, contract, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all sub-recipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than ten-thousand dollars ($10,000) and not more than one-hundred-thousand dollars ($100,000) for each such failure.

DEBARMENT, SUSPENSION CLAUSE. For the purposes of this clause, "prospective lower tier participant" or "lower tier participant" refers to the Grantee or Sub-Recipient herein.

1. By signing and submitting this proposal, the prospective lower tier participant is
providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to whom this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under sub-paragraph 5 above, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or
agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Certification Regarding Debarment, Suspension, Ineligibility an Voluntary Exclusion--Lower Tier Covered Transactions.

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

RECORD RETENTION. The Sub-Recipient is aware that it must retain all records pertinent to expenditure incurred under this Grant for a period of three (3) years after the termination of all activities funded under this Grant. Records for any displaced person must be kept three (3) years after he/she has received final payment. Notwithstanding the above, if there are litigation, claims, audits, negotiations or other actions that involve any of the records cited and that have started before the expiration of the three-year period, then such records must be retained until completion of the actions and resolutions of all issues, or the expiration of the three-year period, plus the current year whichever occurs later. See Department of Public Examiners for its record retention policy.

AVAILABILITY OF FINANCIAL STATEMENTS. All records and financial statements related to the administration of the WIC Program, to include a copy of the independent audit report, shall be made available to authorized personnel from the State or Federal Program Office, the Examiners of Public Accounts or their representatives, for audit and inspection purposes.

AUDIT REQUIREMENTS. A non-Federal Sub-Recipient that expends $750,000 in federal awards or more during the Sub-Recipient's fiscal year must have a single audit conducted in accordance with the Uniform Administrative Requirements, 2 CFR Part 200, Subpart F.

HIPAA CLAUSE. This clause is necessitated by the application of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). References to this clause are to the Code of Federal Regulations, hereinafter "CFR."

The parties agree to use and disclose Protected Health Information in compliance with the Standards for Privacy of Individually Identifiable Health Information ("Privacy Rule").
The definitions set forth in the Privacy Rule are incorporated by reference into this Grant (45 C.F.R. §§ 160.103 and 164.501). The Parties likewise agree to take all necessary precautions to protect the integrity of electronic protected health information (e- PHI) by complying with the HIPAA Security Rule.

INTERPRETATION CLAUSE. Where there is an apparent conflict among the Grant documents which cannot be resolved by interpretation, this document controls.

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK.]
Sub-Recipient:
Poarch Band of Creek Indians

Signed: D. Timothy Speegle, CFO

Date: 10/27/2021

Address:
5811 Jack Springs Road
Atmore, Alabama 36502-5025

Telephone: (251) 368-9136
Fax: (251) 368-4502

Sub-Recipient please type or print your email address:

Social Security or FEIN: 63-0705119

DUNS NO: 086543469

APPROVED AS SOLE SOURCE

Michael A. Jones
State Purchasing Director

Date: 11/18/21

Alabama Department of Public Health
This Grant has been reviewed as to content

Signed: Grace H. A. Thomas, M.D., F.A.C.O.G
Medical Officer
Bureau of Family Health Services

Date: 11-10-21

APPROVED:
Alabama Department of Public Health

Signed: Scott Harris, M.D., M.P.H.
State Health Officer

Date: 12/2/21

APPROVED: State of Alabama

Signed: Kay Ivey
Governor

Date: 12/4/2021

APPROVED AS TO FORM AND COMPLIANCE WITH APPLICABLE RULES AND REGULATIONS DEPT. OF PUBLIC HEALTH

NOV 30 2021

Page 17 of 17

OFFICE OF GENERAL COUNSEL
<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE / FAX</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>011 - Autauga</td>
<td>Prattville</td>
<td>219 North Court St. Prattville, AL 36067</td>
<td>334-361-3743/361-3718</td>
<td>M-F 7:30-5:00</td>
<td>Darlene Hicks, RDN</td>
</tr>
<tr>
<td>061 - Bullock</td>
<td>Union Springs</td>
<td>674 Hicks Industrial Blvd, Union Springs, AL 36089</td>
<td>334-738-3030/738-3008</td>
<td>M-F 8:00-5:00</td>
<td>Tracey Johnson, NA/Morgan Sikes, RDN</td>
</tr>
<tr>
<td>092 - Chambers</td>
<td>Valley</td>
<td>5 North Medical Park Dr., Valley, AL 36854</td>
<td>334-756-0758/756-0765</td>
<td>M-F 8:00-5:00</td>
<td>Vivian Nellom, ASA/Miclah Hood, RDN</td>
</tr>
<tr>
<td>261 - Elmore</td>
<td>Wetumpka</td>
<td>6501 Hwy, 231 No., Wetumpka, AL 36092</td>
<td>334-567-1171/567-1186</td>
<td>M-F 8:00-5:00</td>
<td>Jessica N. Smith, NA/Darlene Hicks, RDN</td>
</tr>
<tr>
<td>411 - Lee</td>
<td>Opelika</td>
<td>1801 Corporate Drive, Opelika, AL 36801</td>
<td>334-745-5765/745-9830</td>
<td>M-F 8:00-5:00</td>
<td>Adriane Lawrence, ASA/Morgan Sikes, RDN</td>
</tr>
<tr>
<td>433 - Lowndes</td>
<td>Hayneville</td>
<td>507 E. Tuskeena St., Hayneville, AL 36744</td>
<td>334-548-2564/548-2566</td>
<td>M-F 8:00-5:00</td>
<td>Pamela Foster, ASA/Darlene Hicks, RDN</td>
</tr>
<tr>
<td>441 - Macon</td>
<td>Tuskegee</td>
<td>812 Hospital Rd., Tuskegee, AL 36083</td>
<td>334-727-1800/727-7100</td>
<td>M-F 8:00-5:00</td>
<td>Tracey Johnson, NA/Kelly Wiggins, RDN</td>
</tr>
<tr>
<td>511 - Montgomery</td>
<td>Montgomery</td>
<td>3060 Mobile Hwy., Montgomery, AL 36108</td>
<td>334-293-6450/293-6404</td>
<td>M-F 7:30-5:00</td>
<td>Darlene Hicks, RDN</td>
</tr>
<tr>
<td>514 - Montgomery Training Clinic</td>
<td>Montgomery</td>
<td>401-A Coliseum Blvd., Montgomery, AL 36109</td>
<td>334-270-9263/271-1114</td>
<td>M-F 7:30-4:30</td>
<td>Call State WIC Office</td>
</tr>
<tr>
<td>517 - Health Services, Inc. (Main)</td>
<td>Montgomery</td>
<td>2905 East South Blvd. Montgomery, AL 36116</td>
<td>334-834-5811/356-1487</td>
<td>M-F 7:30-4:30</td>
<td>Alicia Rodrigo-Miller/Cassie Hooks, RDN</td>
</tr>
<tr>
<td>519 - HSI/Chisholm</td>
<td>Montgomery</td>
<td>100 Vandiver Blvd., Montgomery, AL 36110</td>
<td>334-832-4338/832-9971 ext. 6</td>
<td>W,F 7:30-4:30</td>
<td>Alicia Rodrigo-Miller/Cassie Hooks, RDN</td>
</tr>
<tr>
<td>571 - Russell</td>
<td>Phenix City</td>
<td>1850 Crawford Rd., Phenix City, AL 36867</td>
<td>334-297-0251/291-5478</td>
<td>M-F 7:30-5:00</td>
<td>Kourtni M Baker, NA/Miclah Hood, RDN</td>
</tr>
<tr>
<td>621 - Tallapoosa</td>
<td>Dadeville</td>
<td>220 Lafayette Street, Dadeville, AL 36853</td>
<td>256-825-9230/329-1798</td>
<td>M-F 8:00-5:00</td>
<td>Kalana Hammonds, ASA/Kelly Wiggins, RDN</td>
</tr>
<tr>
<td>622 - Tallapoosa</td>
<td>Alexander City</td>
<td>2078 Sportplex Blvd., Alexander City, AL 35010</td>
<td>256-329-0531/825-6546</td>
<td>M-F 8:00-5:00</td>
<td>Tanya Adkins, OM/Kelly Wiggins, RDN</td>
</tr>
</tbody>
</table>

Darlene.Hicks@adph.state.al.us
<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE / FAX</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>373 - Jefferson Western</td>
<td>Western Health Center</td>
<td>631 Bessemer Super Hwy, Midfield, AL 35228</td>
<td>205-213-8801/241-5235</td>
<td>M-F 7:45-4:30</td>
<td>Morgan Massey, RDN (205-715-6130)</td>
</tr>
<tr>
<td>375 - Jefferson Eastern</td>
<td>Eastern Health Center</td>
<td>601 West Blvd, Birmingham, AL 35206</td>
<td>205-527-7263/838-4394</td>
<td>M-F 7:45-4:30</td>
<td>Micah Madsen RDN (205-510-3404)</td>
</tr>
</tbody>
</table>

Jefferson Administration

|  |  | 1400 6th Ave., So., Birmingham, AL 35233 | 205-930-1482/930-1328 |  | Natalie Clements or Marie Hughey (205-930-1536) |

Natalie.Clements@adph.state.al.us
Natalie.Clements@jcdh.org
Marie.hughey@jcdh.org

Phone line for participants to call:
205-558-2144
1 = Central
3 = Eastern
5 = Western

e-mail: wic@jcdh.org
### MOBILE DISTRICT

Claris Perkins, RDN  
Mobile County Health Dept.  
P.O. Box 2567, Mobile, AL 36652  
251-410-5775  
Fax-251-405-4530  
251-690-8967 Aimee Walton-Jackson

<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE / FAX</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>492 - Mobile</td>
<td>Teens/Women's Center</td>
<td>248 Cox Street, Mobile, AL 36604</td>
<td>251-690-8942/694-9324</td>
<td>M-F 7:30-4:30</td>
<td>Gina Clark, NA/Virginia Stabler, RDN</td>
</tr>
<tr>
<td>493 - Mobile</td>
<td>Keeler</td>
<td>251 N. Bayou St. Mobile, AL 36603</td>
<td>251-690-8829/431-9018</td>
<td>M-F 7:30-4:30</td>
<td>Dhvani Patel, NA/Margaret McCulloch, RDN</td>
</tr>
</tbody>
</table>
| 494 - Mobile       | Southwest Mobile  
Formerly Tillman's Corner | 5580 Inn Road, Mobile, AL 36619 | 251-602-8451/666-7471 | M-F 7:30-4:30 | LaDina Hudson, NA/Margaret McCulloch, RDN |
| 495 - Mobile       | Citronelle | 19255 Main St., Citronelle, AL 36522 | 251-866-5940/866-9121 | T, Th 8:00-3:00 | Tammy Zan, RDN/Margaret McCulloch, RDN |
| 498 - Mobile       | Semmes | 3810 Wulff Road East, Semmes, AL 36575 | 251-445-0581/649-6708 | M-F 8:00-4:30 | Kimbe Hawthorne/Virginia Stabler, RDN |
| 499 - Mobile       | Eight Mile | 4547 St. Stephens Rd., Eight Mile, AL 36613 | 251-457-4186/456-8340 | M-F 7:30-4:30 | Tammy Zan, RDN/Virginia Stabler, RDN |

clperkins@mchd.org  
mmcculloch@mchd.org  
vstabler@mchd.org
## NORTHEASTERN DISTRICT

### Contact Information

**Reba Brannan, MPH, RDN**
P.O. Box 846, Pelham, AL 35124  
Fax 205-664-4148

**Amy Minish, RD**
3400 McClellan Blvd, Anniston, AL 36201  
Fax 256-741-3679

---

### Clinic Locations

<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>Phone</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>051  - Blount</td>
<td>Oneonta</td>
<td>1001 Lincoln Ave, Oneonta, AL 35121</td>
<td>205-274-2120/274-2210</td>
<td>M-F 7:30-5:00</td>
<td>Heidi Marsh, ASA/Jennifer Kujan, RDN</td>
</tr>
<tr>
<td>081  - Calhoun</td>
<td>Anniston</td>
<td>3400 McClellan Blvd, Anniston, AL 36204</td>
<td>256-237-7523/741-3679</td>
<td>M-F 7:30-5:00</td>
<td>Megan McKinney, RDN</td>
</tr>
<tr>
<td>101  - Cherokee</td>
<td>Centre</td>
<td>833 Cedar Bluff Road, Centre, AL 35960</td>
<td>256-927-3132/927-2809</td>
<td>M-F 8:00-5:00</td>
<td>Regina Majors, ASA/Megan McKinney, RDN</td>
</tr>
<tr>
<td>141  - Clay</td>
<td>Lineville</td>
<td>86892 Hwy 9, Lineville, AL 36854</td>
<td>256-396-6421/396-9172</td>
<td>M-F 8:00-5:00</td>
<td>Jenny Adams, RDN</td>
</tr>
<tr>
<td>151  - Cleburne</td>
<td>Heflin</td>
<td>90 Brockford Road, Heflin, AL 36264</td>
<td>256-463-2296/463-2772</td>
<td>M-F 8:00-5:00</td>
<td>Christina Clemons, ASA/Jenny Adams, RDN</td>
</tr>
<tr>
<td>251  - Dekalb</td>
<td>Ft. Payne</td>
<td>2401 Calvin Dr., SW, Ft Payne, AL 35967</td>
<td>256-845-1931/845-2967</td>
<td>M-F 8:00-5:00</td>
<td>Mary Elizabeth Meadows, RDN</td>
</tr>
<tr>
<td>281  - Etowah</td>
<td>Gadsden</td>
<td>709 E. Broad Street, Gadsden, AL 35903</td>
<td>256-547-6311/549-1579</td>
<td>M-F 8:00-5:00</td>
<td>Lauren Davenport, RDN</td>
</tr>
<tr>
<td>561  - Randolph</td>
<td>Roanoke</td>
<td>320 Main Street, Roanoke, AL 36274</td>
<td>334-863-8981/863-8975</td>
<td>M-F 8:00-5:00</td>
<td>Carol Brown, ASA/Jenny Adams, RDN</td>
</tr>
<tr>
<td>581  - St. Clair</td>
<td>Asheville</td>
<td>31675 US Hwy 411, Asheville, AL 35953</td>
<td>205-594-4919/594-7134</td>
<td>2nd &amp; 4th Th</td>
<td>Jennifer Kujan, RDN</td>
</tr>
<tr>
<td>582  - St. Clair</td>
<td>Pell City</td>
<td>1175 23rd St. No., Pell City, AL 35125</td>
<td>205-338-3357/338-4863</td>
<td>M-F 8:00-5:00</td>
<td>Jennifer Kujan, RDN</td>
</tr>
<tr>
<td>592  - Shelby</td>
<td>Pelham</td>
<td>2000 County Services Dr. Pelham, AL 35124</td>
<td>205-685-4197/664-3164</td>
<td>M-F 7:30-5:00</td>
<td>Reba Brannan, RDN/Juanita Wooley, RDN</td>
</tr>
<tr>
<td>611  - Talladega</td>
<td>Talladega</td>
<td>1004 South St. East, Talladega, AL 35160</td>
<td>256-362-2593/362-0529</td>
<td>M-F 8:00-5:00</td>
<td>Anna Keith, RDN</td>
</tr>
<tr>
<td>612  - Talladega</td>
<td>Sylacauga</td>
<td>311 North Elm Ave., Sylacauga, AL 35170</td>
<td>256-249-3807/245-0169</td>
<td>M-F 8:00-5:00</td>
<td>Blair Sims, NA/Anna Keith, RDN</td>
</tr>
</tbody>
</table>

Reba.Brannan@adph.state.al.us  
Amy.Minish@adph.state.al.us
<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE / FAX</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>171 - Colbert</td>
<td>Tuscumbia</td>
<td>1000 S. Jackson Hwy., Sheffield, AL 35660</td>
<td>256-383-1231/314-6435</td>
<td>M-F 7:30-5:00</td>
<td>Irina Flannagin, RN/Danna Rutz, RDN</td>
</tr>
<tr>
<td>221 - Cullman</td>
<td>Cullman</td>
<td>601 Logan Ave., S.W., Cullman, AL 35055</td>
<td>256-734-1030/737-9646</td>
<td>M-F 7:00-5:00</td>
<td>Judith Lucas ASA/Kendra Whitley, RDN</td>
</tr>
<tr>
<td>301 - Franklin</td>
<td>Russellville</td>
<td>801 Hwy 48, Russellville, AL 35654</td>
<td>256-332-2700/332-1563</td>
<td>M-F 8:00-5:00</td>
<td>Kim Wooten, RN/Danna Rutz, RDN</td>
</tr>
<tr>
<td>360 - Jackson</td>
<td>Scottsboro</td>
<td>204 Liberty Lane, Scottsboro, AL 35769</td>
<td>256-259-4161/574-5691</td>
<td>M-F 8:00-5:00</td>
<td>Candace Fennell, ASA/Lauren Jett, RDN</td>
</tr>
<tr>
<td>391 - Lauderdale</td>
<td>Florence</td>
<td>4112 Chisholm Road, Florence, AL 35630</td>
<td>256-764-7453/764-4185</td>
<td>M-F 8:00-5:00</td>
<td>Jennifer Tolbert, RN/Danna Rutz, RDN</td>
</tr>
<tr>
<td>401 - Lawrence</td>
<td>Moulton</td>
<td>13299 Alabama Hwy 157, Moulton 35650</td>
<td>256-974-1141/974-5350</td>
<td>M-F 8:00-5:00</td>
<td>Misty Appleton, ASA/Danna Rutz, RDN</td>
</tr>
<tr>
<td>421 - Limestone</td>
<td>Athens</td>
<td>20371 Clyde Mabry Dr., Athens, Al 35611</td>
<td>256-232-3200/232-6632</td>
<td>M-F 8:00-5:00</td>
<td>LeAnn Barron, NA/Geraldine Remisse, RDN</td>
</tr>
<tr>
<td>450 - Madison</td>
<td>Max Luther</td>
<td>301 Max Luther Dr. NW, Huntsville, AL 35811</td>
<td>256-533-0826/533-1570</td>
<td>M-F 7:30-5:00</td>
<td>Madeline Godwin, ASA/Kashera Sims, MS, RDN</td>
</tr>
<tr>
<td>451 - Madison</td>
<td>New Hope</td>
<td>156 Church Ave, New Hope, AL 35760</td>
<td>256-723-4199/533-1570</td>
<td>Friday 9:00-4:00</td>
<td>Kashera Sims, MS, RDN</td>
</tr>
<tr>
<td>454 - Madison</td>
<td>Huntsville Hosp</td>
<td>Huntsville Hospital, Huntsville, AL</td>
<td>256-265-4961/533-1570</td>
<td>M-F 8:00-5:00</td>
<td>Valerie Tabor, MS, RDN/Kashera Sims, MS, RDN</td>
</tr>
<tr>
<td>455 - Madison</td>
<td>Redstone</td>
<td>3443 Aerobee Road, Huntsville, AL 35808</td>
<td>256-876-2798/533-1570</td>
<td>Wed-1st,3rd,5th 8-12</td>
<td>Sheryl Gilbreath, NA/Kashera Sims, MS, RDN</td>
</tr>
<tr>
<td>471 - Marion</td>
<td>Hamilton</td>
<td>2448 Military St. So., Hamilton, AL 35570</td>
<td>205-921-3118/921-7954</td>
<td>M-F 8:00-5:00</td>
<td>Paige Taylor, RN/Danna Rutz, RDN</td>
</tr>
<tr>
<td>482 - Marshall</td>
<td>Guntersville</td>
<td>150 Judy Smith Drive, Guntersville, AL 35796</td>
<td>256-582-3174/582-3548</td>
<td>M-F 8:00-5:00</td>
<td>Kimberlyn Rudolph, NA/Lauren Jett, RDN</td>
</tr>
<tr>
<td>521 - Morgan</td>
<td>Decatur</td>
<td>3821 US Hwy 31 South, Decatur, AL 35603</td>
<td>256-560-6574/355-0345</td>
<td>M-F 8:00-5:00</td>
<td>Kisha Franklin, NA/Geraldine Remisse, RDN</td>
</tr>
<tr>
<td>671 - Winston</td>
<td>Double Springs</td>
<td>110 Legion Road, Double Springs, AL 35553</td>
<td>205-489-2101/489-2634</td>
<td>M-F 8:00-5:00</td>
<td>Janet Baughn, RN/Kendra Whitley, RDN</td>
</tr>
</tbody>
</table>

Jessie.Simmons@adph.state.al.us
**SOUTHEASTERN DISTRICT**

Angela Stevens  
1781 E. Cottonwood Road  
Dothan, AL 36302  
Office 334-678-5858/334-678-2800  
Fax 334-678-5307

<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE / FAX</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>032 - Barbour</td>
<td>Eufaula</td>
<td>634 School St., Eufaula, AL 36027</td>
<td>334-687-4808/687-6470</td>
<td>M-F 8:00-5:00</td>
<td>Angela Stevens, RDN</td>
</tr>
<tr>
<td>071 - Butler</td>
<td>Greenville</td>
<td>350 Airport Road, Greenville, AL 36037</td>
<td>334-382-3154/382-3530</td>
<td>M-F 7:30-5:00</td>
<td>Elaine Womack, ASA/Jody Lee, RDN</td>
</tr>
<tr>
<td>161 - Coffee</td>
<td>Enterprise</td>
<td>2841 Neal Metcalf Rd., Enterprise, AL 36017</td>
<td>334-347-9574/347-7104</td>
<td>M-F 8:00-5:00</td>
<td>LaKresha Tucker, RN/Jody Lee, RDN</td>
</tr>
<tr>
<td>201 - Covington</td>
<td>Andalusia</td>
<td>23989 Alabama Hwy 55, Andalusia, AL 36420</td>
<td>334-222-1175/222-1560</td>
<td>M-F 8:00-5:00</td>
<td>Vivian Burnette, ASA/Jody Lee, RDN</td>
</tr>
<tr>
<td>211 - Crenshaw</td>
<td>Luverne</td>
<td>15 Hospital Dr., Luverne, AL 36049</td>
<td>334-335-2471/335-3795</td>
<td>M-F 8:00-5:00</td>
<td>Patty Rushing, RN/Jody Lee, RDN</td>
</tr>
<tr>
<td>231 - Dale</td>
<td>Ozark</td>
<td>532 W. Roy Parker Rd., Ozark, AL 36360</td>
<td>334-774-5146/774-2333</td>
<td>M-F 8:00-5:00</td>
<td>Angela Stevens, RDN</td>
</tr>
<tr>
<td>311 - Geneva</td>
<td>Hartford</td>
<td>300 Co. Rd., 41 Hartford, AL 36344</td>
<td>334-684-2257/684-3970</td>
<td>M-F 8:00-5:00</td>
<td>Linda Owens, ASA/Angela Stevens, RDN</td>
</tr>
<tr>
<td>341 - Henry</td>
<td>Abbeville</td>
<td>505 Kirkland St., Abbeville, AL 36310</td>
<td>334-585-2660/585-3036</td>
<td>M-F 8:00-5:00</td>
<td>Stacy Anderson, RN/Angela Stevens, RDN</td>
</tr>
<tr>
<td>351 - Houston</td>
<td>Dothan</td>
<td>1781 E. Cottonwood Rd., Dothan, AL 36302</td>
<td>334-678-2800/678-5307</td>
<td>M-F 8:00-5:00</td>
<td>Jennifer Hicks, NA/Angela Stevens RDN</td>
</tr>
<tr>
<td>551 - Pike</td>
<td>Troy</td>
<td>900 S. Franklin Dr., Troy, AL 36081</td>
<td>334-566-5744/566-8534</td>
<td>M-F 8:00-5:00</td>
<td>Jody Lee, RDN</td>
</tr>
</tbody>
</table>

Angela.Stevens@adph.state.al.us  
Jody.Lee@adph.state.al.us
<table>
<thead>
<tr>
<th>CLINIC # / COUNTY</th>
<th>CITY</th>
<th>ADDRESS</th>
<th>PHONE / FAX</th>
<th>HOURS</th>
<th>CONTACT / WIC COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>021 - Baldwin</td>
<td>Bay Minette</td>
<td>312 Courthouse Sq., Bay Minette, AL 36507</td>
<td>251-937-6935/580-4767</td>
<td>M-F 8:00-5:00</td>
<td>Stephanie Atkins, ASA/Stacy Lewis, MS, RDN</td>
</tr>
<tr>
<td>025 - Baldwin</td>
<td>Robertsdale</td>
<td>23280 Gilbert Dr., Robertsdale, AL, 36567</td>
<td>251-946-8040/946-8080</td>
<td>M-F 8:00-5:00</td>
<td>Lisa Bowman, ASA/Stacy Lewis, MS, RDN</td>
</tr>
<tr>
<td>026 - Baldwin</td>
<td>Foley</td>
<td>8158 Hwy 59, Unit 108, Foley, AL 36535</td>
<td>251-943-7260/943-7280</td>
<td>M-F 8:00-5:00</td>
<td>Maria Clarke, ASA/Liane Martin, RDN</td>
</tr>
<tr>
<td>121 - Choctaw</td>
<td>Butler</td>
<td>1001 South Mulberry Ave. Butler, AL 36904</td>
<td>205-459-4026/459-4027</td>
<td>M-F 8:00-5:00</td>
<td>Lisa Lockett, ASA/Rachel Todd, RDN</td>
</tr>
<tr>
<td>131 - Clarke</td>
<td>Grove Hill</td>
<td>22600 Hwy 84 E., Grove Hill, AL 36451</td>
<td>251-275-3772/275-4253</td>
<td>M-F 8:00-5:00</td>
<td>Kelly Boykin, ASA/Rebecca Stewart, RDN</td>
</tr>
<tr>
<td>181 - Conecuh</td>
<td>Evergreen</td>
<td>102 Wild Avenue, Evergreen, AL 36401</td>
<td>251-578-1952/578-5566</td>
<td>M-F 8:00-5:00</td>
<td>Julie Salter, ASA/Rachel Todd, RDN</td>
</tr>
<tr>
<td>241 - Dallas</td>
<td>Selma</td>
<td>100 Sam O. Moseley Dr., Selma, AL 36701</td>
<td>334-877-2809/875-7960</td>
<td>M-F 8:00-5:00</td>
<td>Rachel Owens, ASA/Rebecca Stewart, RDN</td>
</tr>
<tr>
<td>271 - Escambia</td>
<td>Brewton</td>
<td>1115 Azalea Place, Brewton, AL 36426</td>
<td>251-867-5765/867-5179</td>
<td>M-F 8:00-5:00</td>
<td>Rhonda Hall, ASA/Liane Martin, RDN</td>
</tr>
<tr>
<td>272 - Escambia</td>
<td>Atmore</td>
<td>8600 Hwy 31 N., Atmore, AL 36502</td>
<td>251-368-9188/368-9186</td>
<td>M-F 8:00-5:00</td>
<td>Rhonda Hall, ASA/Liane Martin, RDN</td>
</tr>
<tr>
<td>273 - Escambia</td>
<td>Poarch</td>
<td>5811 Jack Springs Rd, Atmore, AL 36502</td>
<td>251-368-9136/368-1329</td>
<td>M-F 8:00-5:00</td>
<td>Amy Hoven, ASA/Jill Lee, DTR</td>
</tr>
<tr>
<td>460 - Marengo</td>
<td>Linden</td>
<td>303 Industrial Drive, Linden, AL 36748</td>
<td>334-295-4205/295-0124</td>
<td>M-F 8:00-5:00</td>
<td>Angelia Stabler, ASA/Rebecca Stewart, RDN</td>
</tr>
<tr>
<td>501 - Monroe</td>
<td>Monroeville</td>
<td>416 Agriculture Dr. Monroeville, AL 36460</td>
<td>251-575-3109/575-7935</td>
<td>M-F 8:00-5:00</td>
<td>Jennifer Perryman, ASA/Rachel Todd, RDN</td>
</tr>
<tr>
<td>650 - Washington</td>
<td>Chatom</td>
<td>14900 St. Stephens, Ave, Chatom, AL 36518</td>
<td>251-847-2245/847-3480</td>
<td>M-F 8:00-5:00</td>
<td>Shannon Mitchell, ASA/Stacy Lewis, MS, RDN</td>
</tr>
<tr>
<td>661 - Wilcox</td>
<td>Camden</td>
<td>107 Union Street, Camden, AL 36726</td>
<td>334-682-4515/682-4796</td>
<td>M-F 8:00-5:00</td>
<td>Donna McGraw, ASA/Rachel Todd, RDN</td>
</tr>
<tr>
<td>CLINIC # / COUNTY</td>
<td>CITY</td>
<td>ADDRESS</td>
<td>PHONE / FAX</td>
<td>HOURS</td>
<td>CONTACT / WIC COORDINATOR</td>
</tr>
<tr>
<td>-------------------</td>
<td>------</td>
<td>---------</td>
<td>-------------</td>
<td>-------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>041 - Bibb</td>
<td>Centreville</td>
<td>281 Alexander, Ave., Centerville, AL 35042</td>
<td>205-926-9702/926-6536</td>
<td>M-F 8:00-5:00</td>
<td>Sandy Wilson, NA/LeeAnn Wagner, RDN</td>
</tr>
<tr>
<td>111 - Chilton</td>
<td>Clanton</td>
<td>301 Health Center Dr., Clanton, AL 35045</td>
<td>205-755-1287/755-2027</td>
<td>M-F 8:00-5:00</td>
<td>Amy Cleckler, NA/LeeAnn Wagner, RDN</td>
</tr>
<tr>
<td>291 - Fayette</td>
<td>Fayette</td>
<td>215 1st. Ave., N.W., Fayette, AL 35555</td>
<td>205-932-5260/932-3532</td>
<td>M-F 8:00-5:00</td>
<td>Brittney Stallworth, NA/LeeAnn Colvin, RDN</td>
</tr>
<tr>
<td>321 - Greene</td>
<td>Eutaw</td>
<td>412 Morrow Avenue, Eutaw, AL 35462</td>
<td>205-372-9361/372-9283</td>
<td>M-F 8:00-5:00</td>
<td>Dorinda Jones, NA/Laura Griffin, RDN</td>
</tr>
<tr>
<td>331 - Hale</td>
<td>Greensboro</td>
<td>670 Hall Street, Greensboro, AL 36744</td>
<td>334-624-3018/624-4721</td>
<td>M-F 8:00-5:00</td>
<td>Jane Neill, RDN</td>
</tr>
<tr>
<td></td>
<td>Moundville</td>
<td>2nd, 4th Tues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>381 - Lamar</td>
<td>Vernon</td>
<td>300 Springfield Rd, Vernon, AL 35592</td>
<td>205-695-9195/695-9214</td>
<td>M-F 8:00-5:00</td>
<td>Brittney Stallworth, NA/Leigh Ann Colvin, RDN</td>
</tr>
<tr>
<td>531 - Perry</td>
<td>Marion</td>
<td>1748 S. Washington St., Marion, AL 36756</td>
<td>334-683-6155/628-3010</td>
<td>M-F 8:00-5:00</td>
<td>Jane Neill, RDN</td>
</tr>
<tr>
<td>532 - Perry</td>
<td>Uniontown</td>
<td>54 Hamburg-Duncan Rd, Untiontown, AL Mail goes to 531 Perry/Marion</td>
<td>334-628-6226/628-3010</td>
<td>T-Thur 8:30-4:00</td>
<td>Jane Neill, RDN</td>
</tr>
<tr>
<td>541 - Pickens</td>
<td>Carrollton</td>
<td>80 Hospital Drive, Carrollton, AL 35447</td>
<td>205-367-8157/367-8374</td>
<td>M-F 8:00-5:00</td>
<td>Dorinda Jones, NA/Sailaja Reddy, RDN</td>
</tr>
<tr>
<td>601 - Sumter</td>
<td>Livingston</td>
<td>1121 N Washington St., Livingston, 35470</td>
<td>205-652-2320/6527919</td>
<td>M-F 8:00-5:00</td>
<td>Dorinda Jones, NA/Jane Neill, RDN</td>
</tr>
<tr>
<td>631 - Tuscaloosa</td>
<td>Tuscaloosa</td>
<td>2350 Hargrove Rd., E. Tuscaloosa, AL 35405</td>
<td>205-562-6900/562-6902</td>
<td>M-F 8:00-5:00</td>
<td>Sailaja Reddy, RDN</td>
</tr>
<tr>
<td>635 - Tuscaloosa</td>
<td>Maude Whatley</td>
<td>2731 M.L. King Jr. Blvd., Tuscaloosa, AL 35403</td>
<td>205-614-6139/345-3993</td>
<td>M, TU, TH, F 8:00-4:00</td>
<td>Sandy Wilson, NA/Laura Griffin, RDN</td>
</tr>
<tr>
<td>641 - Walker</td>
<td>Jasper</td>
<td>705 20th Ave E., Jasper, AL 35501</td>
<td>205-221-9775/221-8810</td>
<td>M-F 7:30-5:00</td>
<td>Leigh Ann Colvin, RDN</td>
</tr>
</tbody>
</table>

Laura.Griffin@adph.state.al.us
Chapter V

Nutrition Services and Administration (NSA) Expenditures
V. NUTRITION SERVICES AND ADMINISTRATION (NSA) EXPENDITURES

(Please indicate) State Agency: Alabama for FY 2023

NSA expenditures involve the process of allocating, documenting and monitoring the distribution of administrative funds to local agencies, including the monitoring of nutrition education costs, and State and local agency direct/indirect costs.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation,” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO

A. Funds Allocation-246.4(a)(13); (14)(ix): describe the policies and procedures used to allocate administrative funds to local agencies, including start-up funds, and conversion of food funds to NSA funds.

B. Local Agency Budgets/Expenditure Plans-246.4(a)(2): describe the policies and procedures for preparing and submitting local agency budgets and expenditure plans and the services that are entirely supported by WIC Program funds.

C. State and Local Agency Access to Funds-246.4(a)(13): describe the procedures and method(s) of distribution/ reimbursement of NSA funds to local agencies.

D. Reporting and Reviewing of State and Local Agency Expenditures-246.4(a)(11)(iv); (12); and (13): describe the policies and procedures used to report, monitor, and review State and local agencies’ expenditures, including the documentation of staff time, local agency report forms, on-site reviews of local agencies’ NSA expenditures, and in-kind contributions.

E. Nutrition Education Costs-246.4(a)(9)and 246.14(c)(1): describe the plans and procedures used to meet the nutrition education expenditure requirements, including monitoring activities, local agency reports, and assurances that the special nutrition education needs of migrant farmworkers and their families, Indians, and homeless persons are met.

F. Indirect Costs-246.4(a)(12): describe the policies and procedures used to document and monitor indirect cost rates and services at the State and local level.
A. Funds Allocation

1. Allocation Process

a. The State agency has established and provided written procedures to local agencies describing the process for allocation of NSA funds among local agencies.

☒ Yes    ☐ No    ☐ Not applicable, State agency does not have separate local agencies. (Proceed to A. 2. Conversion of Food Funds to NSA Funds)

b. Local agencies were involved in developing these procedures via:

☐ Task force/committee of selected local agencies
☒ Comment on proposals made available to all local agencies
☐ Other (describe):

c. The State agency allocates NSA funds to local agencies through the use of:

☐ A negotiated budget    ☒ Flat cost per participant Statewide
☐ Formula (variable)    ☐ Other method (describe):

d. The allocation procedure takes the following factors into account (check all that apply):

☐ Staffing needs
☒ Number of participants
☐ Population density
☐ Cost-containment initiatives
☐ Availability of administrative support from other sources
☒ Other (specify): Availability of funding

e. The State agency methodology for funds allocations to local agencies includes a mechanism for reallocation.

☒ Yes    ☐ Monthly    ☐ Quarterly    ☐ Semiannually
☐ No
☒ Other (specify): As additional funds are received from USDA.


2. Conversion of Food Funds to NSA Funds

a. The State agency converts food funds to NSA funds:

☐ Based on a plan submitted to FNS to reduce average food costs per participant and to increase participation above the FNS-projected level for the State agency.

☐ The State agency achieves, through acceptable measures, increases in participation in excess of the FNS-projected level for the State agency.

☒ Describe measures used to increase participation; Media, WIC website, digital media, local outreach, advisory councils, various outreach materials, WIC smart phone app (AL WIC App), food package changes.
3. The State’s Fiscal Year runs from 10/01/2022 to 09/30/2023

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

B. Local Agency Budgets/Expenditures Plans

1. Local Agency Budgets/Expenditure Plans

☐ Not applicable, State agency does not have separate local agencies.

(Proceed to C. State and Local Agency Access to Funds.)

a. The State agency requires its local agencies to prepare and submit administrative budgets.

☒ Yes ☐ No

If yes, the State agency requires that local agency budgets include the same cost categories as those used for State-level budget preparation.

☒ Yes ☐ No

b. Local agencies’ budgets are broken out by (check all that apply):

☒ Line items
☐ Accounting ☐ Maintenance and repair
☐ ADP services ☐ Materials and supplies
☐ Breastfeeding aids ☐ Memberships, subscriptions, and professional activities
☐ Capital expenditures ☐ Printing and reproduction
☐ Clinic/lab services ☐ Training and education
☐ Communications ☐ Transportation
☒ Employee salaries ☐ Travel
☒ Employee fringe benefits ☒ Other (specify): Local agency budgets also include indirect costs. (PLA) Private local agency budgets include salary, fringe benefits, indirect costs, supplies, travel, and utilities.
☐ Lease or rental of space ☐ Breastfeeding promotion/support (e.g., breastfeeding aids)
☐ Functions ☐ Client services
☐ General administration/Other (specify):
☐ Program management
☐ Food Delivery
☐ Certification
☐ Nutrition education
☐ Other (specify):

C. The State agency has an established formal process for local agencies to follow when requesting amendments or modifications to their budgets.
Yes ☐ No

d. To prepare the federally required WIC administrative budget, the State agency:

☐ Uses local agency budgets or prior year expenditures
☐ Uses a state agency information system to collect and compile expenditure and cost data
☒ Extracts or consolidates data reported under other State or local agency systems to group costs under the federal line items and functions
☐ Other (describe):


C. State and Local Agency Access to Funds

1. The State Agency manages its NSA Grant on a/an:

☒ Cash basis ☐ Accrual basis
☐ Other (specify):

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

2. Reimbursement/Provision of Funds to Local Agencies

a. The State agency provides local agencies with funds in advance.

☐ Yes (state conditions):
☒ No
☐ Not Applicable (Proceed to next section.)

If yes, advances must be reconciled to incoming claims. Local agency claims are submitted:

☐ Monthly ☐ Quarterly

b. In order to qualify for payment, an expenditure must be (check all that apply):

☒ At or below the level of its approved budget line item
☒ Supported by appropriate documentation (e.g., check or receipt)
☒ A reasonable and necessary expense for WIC
☐ Other (specify):

c. If an expenditure exceeds the budget provided for that particular line item, the State agency requires the local agency to (check all that apply):

☐ Submit a supplemental request
☒ Provide a justification for exceeding the budget line item
☐ Make an offsetting adjustment to another line item in its budget
☐ Request approval of a budget modification
☐ Other (explain):

d. Local agencies receive payment via:
Electronic funds transfer ☒ State treasury check/warrant
☐ Other (specify):

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

D. Reporting and Reviewing of State and Local Agency Expenditures

1. Documentation of Staff Time
   a. How does the State agency determine the percentage of staff time devoted to WIC tasks to document allowable staff costs under the WIC Program (check all that apply):

   At SA ☒ At LA ☒
   ☒ 100 percent reporting
   ☐ Random moment sampling
   ☐ Periodic time studies:
   ☐ 1 week/month
   ☐ 1 month/quarter
   ☐ Other (specify):

   b. The State agency last evaluated its time documentation protocol on (specify date). If available, please attach a copy of the protocol to this section or cite Procedure Manual reference.

   ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation): See attached Employee Time Report and Timesheet Summary. Cost accounting for ADPH employees is completed electronically through the TimeTrac system.

2. Please indicate below the services that are entirely supported by WIC funds:
   ☒ Anthropometric measurements
   ☒ Nutrition counseling/education
   ☒ Breastfeeding promotion/support
   ☒ Immunization status assessments
   ☒ Referrals to health and/or social services
   ☒ Hematological assessments
   ☐ Other (specify):

   ADDITIONAL DETAIL: SA/LA Spending Plan Appendix and/or Procedure Manual (citation):

3. Local Agency Report Forms
   a. The State agency specifies standard forms and/or procedures for local agencies to use in reporting monthly local-level expenditures.

   ☒ Yes ☐ No ☐ Not Applicable (Proceed to next section)

   ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

4. On-Site Review of Local Agencies' Administrative Expenditures
   a. The State agency conducts on-site reviews of local agency administrative expenditures:

   ☐ Annually ☒ Every two years ☐ Every three years
b. The State agency utilizes a standard format/guide to review local agencies’ NSA expenditures.

☐ Yes ☒ No

If yes, the standard review guide includes the following procedures (check all that apply):

☐ Verification of at least one monthly billing/claim/expenditure report against source
☐ Documents
☐ Tracking written approval of procurements
☐ Requesting records of ordering, receipt, billing, and payment
☐ Determination that costs were necessary, reasonable and appropriate
☐ Determination that costs were properly allocated among WIC and other programs
☐ Determination that personnel costs charged to WIC were appropriate
☐ Determination that local agencies’ indirect costs were appropriately charged
☐ Other (specify):

c. If available, please attach a copy of the State agency’s NSA expenditure review guide.

d. The State agency notifies local agencies of findings and establishes claims for unallowable costs, as appropriate.

☒ Yes ☐ No

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation): See attached Alabama WIC NSA Funding Narrative

5. The State agency requires local agencies to document the sources and values of in-kind contributions.

☐ Yes ☒ No

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

E. Nutrition Education Costs

1. The State agency documents that it meets its nutrition education and breastfeeding promotion expenditure requirements per 7 CFR 246.14(c)(1) via:

☐ Activity reports ☒ Time studies ☐ Itemizing expenditures
☐ Other (specify):

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

2. The State agency monitors expenditures for the following activities related to breastfeeding
promotion and support at the State and/or local level (check all that apply):

<table>
<thead>
<tr>
<th>Service</th>
<th>At SA</th>
<th>At LA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breastfeeding promotion coordinator’s salary</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Written educational materials</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Participant education/counseling</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Staff training</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Breastfeeding promotion activities</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Direct support costs</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Breastfeeding aids and equipment (e.g., breast pumps purchased with NSA funds)</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

(If other, specify): State Breastfeeding Coordinator and State BFPC Coordinator’s salaries at the SA level.

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

3. In the event that the State agency uses funds from other sources in meeting minimum expenditure requirements for nutrition education (NE) and breastfeeding promotion and support (BFPS), please provide below the source of these funds, the amount, and the method the State agency will use to document the use of these NE and BFPS funds. (Federal WIC food funds used to purchase/rent breast pumps, and expenditures from breastfeeding peer counseling funds, cannot be counted toward the nutrition education and breastfeeding expenditure requirement.)

☒ Does not apply. (Proceed to E. 4. Local agencies report nutrition education and breastfeeding promotion and support costs.)

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
</table>

Method(s):

☐ Activity reports   ☐ Time studies   ☐ Itemizing expenditures

☐ Other (specify):

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

4. Local agencies report nutrition education and breastfeeding promotion and support costs:

☐ Does not apply

☒ When they report routine NSA costs

☐ Through a different system (specify):

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

F. State and Local Agency Indirect Costs

1. Indirect Cost Rate and Services
a. Please list below indirect cost/cost allocation agreements in which the State agency is included:
   Department of Health and Human Services State and Local Indirect Cost Rate.

b. The State agency’s indirect cost rate(s) is [ ] (%) and is based on:

   □ [ ] [ ] [ ] [ ] [ ] [ ] [ ]
   □ [ ] [ ]

   If applicable, cite the effective date of the State agency’s executed cost allocation plan for indirect cost: 10/01/2018.
   If applicable, cite the expiration date of the State agency’s most recent executed indirect cost allocation plan: 09/30/2023.

d. The State agency receives the following types of services under the indirect cost rate agreement(s):

   ☒ Budgeting/accounting  ☒ Personnel/payroll
   ☒ ADP  ☒ Space usage/maintenance
   ☒ Communication/phone/mail  ☒ Central supply
   ☒ Legal services  ☒ Procurement/contracting
   ☒ Printing/publication  ☒ Audit services
   ☒ Equipment usage/maintenance  ☒ Other (specify): All other services

e. The State agency allows local agencies to report indirect costs.
   ☒ Yes  ☐ No  ☐ Not Applicable

   ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):

2. Review of Indirect Cost Documentation

a. The State agency and local agencies ensure that services received and paid for through indirect costs benefit WIC, and are not also charged directly to WIC by comparing direct charges by line item to a listing of services paid by funds collected through the application of the indirect cost rate:
   ☒ Done for State agency level indirect costs (frequency):
   ☒ Done for local agency level indirect costs (frequency):
   ☐ Not done at either level.

b. State and local agency WIC management have access to and review the following documents as applicable to ensure that indirect cost services are not also charged directly to WIC (check all that apply):

   Indirect cost agreements/plans  At SA  At LA
   The accounting mechanism used to ensure the propriety of indirect cost charges  ☒  ☐
   A copy of the cost allocation plan  ☐  ☒
   A list of all services paid from indirect costs  ☒  ☐
   Other documentation related to the establishment and charging of indirect costs  ☐  ☐
c. When the State agency reviews the local agencies' indirect cost rate agreements, the review includes (check all that apply):

☒ Required submission of indirect cost agreement by the local agency to the State agency
☐ Assessment of how the rate or method is applied (correct time period, percentage, and base)
☐ Verification that the State agency had previously approved the local agency to negotiate such an agreement
☒ Post-review or audit to ensure the rate was applied correctly
☐ Other documentation related to the establishment and charging of indirect costs (list):
☐ Not applicable

ADDITIONAL DETAIL: NSA Expenditures Appendix and/or Procedure Manual (citation):
Funds Allocation

The method for allocating Nutrition Services Administration funds (NSA) among the State/Local agencies begins with determining an estimate of funds that will be available. Usually, this process starts with the NSA/Food/Rebate funds received in the previous fiscal year, adjusted for any probable factors at the time the budget is established. The allocation process begins with removing the State Office Women, Infants, and Children (WIC) Program budget from the estimated administrative funds, taking into consideration any factors that may affect this calculation. The State Office WIC budget is usually based on previous fiscal year expenditures. After removing the State Office WIC budget, the net administrative funds are available for distribution to the counties.

The allocation process continues with determining the estimated food available number which is divided by the targeted caseload to establish the cost per participant. Cost per participant is the rate that is used to distribute the funds based on projected target caseload for a county. Projected participation is determined using the average monthly caseload calculated from the total of previous closed months’ caseload with each county receiving a proportional share of the total caseload. Each county caseload is annualized and multiplied by the cost per participant establishing the projected administrative fund for the fiscal year. The same method that is used to determine projected participation is used to allocate any subsequent increases or decreases in the Federal allocation. Alabama’s WIC program does not do any conversion of funds until the fiscal year closes.

These funds pay for only personnel costs (salary, fringe, and indirect) at the county level. The State Office budget includes WIC personnel costs (salary, fringe, and indirect), travel, supplies, WIC Crossroads data system, banking voucher processing, printing and nutrition education, and breastfeeding, etc.

Local Agency Budgets/Expenditure Plans

Prior to the start of a new fiscal year, each District Administrator presents and defends their budget at a hearing attended by the State Health Officer, Health Budget and Finance, county and WIC State Office personnel. The State Health Officer has final approval of all budgets. Alabama is separated into eight Public Health Districts with each District Administrator responsible for a defined number of counties. County budgets include all Programs administered by the State, including WIC. These budgets include line items: salaries, benefits, travel, supplies, indirect and other typical categories. As previously mentioned, WIC funds are only used for personnel costs which includes salary, fringe, and indirect cost.

Any revisions to the budgets (WIC) are limited to increases or decreases in federal funding, changes in State/Federal law regulations or policy or special requests received from a county. These changes/requests are processed by the Bureau Administration Division, approved by the WIC Director, and reviewed by the Administrative Division Director/Assistant Director, then forwarded to Health Finance for final distribution to the counties.

Employees of the Department are required to maintain monthly time and attendance records that indicate the cost centers on which that employee’s time was expended on a daily basis. These cost centers are used to capture costs related to specific programs. All time sheets are reviewed and
approved by each employee’s immediate supervisor prior to input into ADPH’s cost accounting time system, TimeTrac. Once approved by the employee’s immediate supervisor, the employee’s time is also entered into the State of Alabama’s payroll system, GHRS, and programmatically integrates to the State of Alabama Accounting and Resource System (STAARS) accounting system. These monthly time records are sufficient certifications that the employee worked on the federal program. The Bureau of Financial Services also produced a Timesheet Summary Report which is issued on TimeTrac.

The following cost centers capture time charged to the WIC Program:

1. 034 - WIC Breastfeeding Promotion
2. 035 - WIC Certification
3. 036 - WIC Administration
4. 037 - WIC Nutrition Education
5. 039 - WIC Food Instrument Issuance

Direct salaries and fringe benefits are charged to programs through journal vouchers automatically generated during the semi-monthly payroll cycle. Direct salaries include paid absences (annual, sick, military leave, etc.). All hours for paid absences are charged to cost center 010 and are classified as nonproductive time. Gross salary is then allocated to programs based on an individual’s percentage of actual time charged to that program to the total productive time.

Indirect costs charged to the program are determined by applying a federally approved indirect cost rate to direct salaries charged to each program. The indirect cost rates have been approved by the Department of Health and Human Services. The Department’s Indirect Cost Rate Agreement includes a predetermined rate applied to direct salaries charged to each program. The allocation base (direct salaries) does not include fringe benefits, which are charged individually as direct costs and include FICA, retirement, unemployment and health insurance. The Department’s indirect cost rate agreement does not include Jefferson and Mobile counties because they negotiate their own indirect cost rates. Provisional rates are used until final rates are determined. Current approved provisional rates for the period beginning October 1, 2018 through September 30, 2021 are:

1. 27.20 percent - State
2. 75.30 percent - County
3. 7.50 percent - Area Groups (i.e., Public Health Districts)

The cost accounting system charges expenditures for supplies, utilities, etc. directly to programs. The indirect cost rate agreement also includes charges for depreciation to buildings and equipment.

Various STAARS infoAdvantage and Cost Accounting System reports are used to monitor programs. This financial data is compiled monthly in an Excel spreadsheet that enables the comparison of prior year cost and full-time employees (FTEs) to current year-to-date cost and FTEs. A WIC grant review is scheduled monthly for financial/program management to discuss the spreadsheet and other factors that could affect the calculations necessary to project total State/Local expenditures and funds availability.
The review process allows the program to make timely decisions involving the availability of funds to accomplish objectives, adjusting working FTEs and efficiency standards.

**Property/Procurement**

**Property**

All equipment with a purchase price over $500 purchased by the Department is on the Inventory Tracking Electronic Management System (I.T.E.M.S.). With each purchase, a copy of the purchase order is sent to the Department’s Logistics Division. Logistics then issues an identification tag to be placed on the newly purchased item. This tag number is entered into I.T.E.M.S. by Logistics, and then it is sent to the division to be placed on the item. Once the equipment has been received, the tag is placed directly on the item. The division that is responsible for the new property then updates the record in I.T.E.M.S. to include the serial number, property location, and the person responsible for the property. An inventory audit is conducted every year and a state audit is conducted every other year. All equipment must be accounted for during this period.

When property is no longer of use to the Department, it is sent to surplus. The Division Property Manager contacts Logistics to ask for the property to be picked up. Logistics picks up the item, and the record in I.T.E.M.S. is updated to reflect that the property is in surplus.

**Procurement**

The purchasing process starts with the requesting bureau (end user) preparing an internal requisition (HF-10). The requisition provides a description of the item, estimated cost, funding information and signed approval by the program or bureau director. The requisition is submitted to the Department’s Finance Procurement Officer for further processing. Equipment shared by multiple programs is prorated based upon time coded to each program.

**Sources for purchases:**

1. **Contract Vendors.** State Division of Purchase awards purchasing contracts based on a competitive bid process.
2. **Purchases Less than $15,000 (State Bid Law).** At least two quotes are obtained for commodities/services not on state purchasing contracts and less than $15,000. Quotes are usually obtained by the requesting bureau and attached to the internal requisition.
3. **Purchases Greater than $15,000 (State Bid Law).** Items not available on state contracts and estimated total cost is $15,000 or more require a formal bid process through State Division of Purchasing.
4. **Sole Source.** The purchases commodities/services that are available from only one vendor are considered sole source and formal bid process is not required. To satisfy the requirements for sole source purchases the following are provided: (a) Quote from the sole source vendor, (b) Letter from the vendor stating they are sole source and/or do not sell through distributors, and
(c) Letter signed by ADPH State Health Officer indicating the uniqueness of the item/service, how it is used by ADPH and state the vendor is sole source.

The Department’s Finance Procurement Officer will process the internal requisition by entering pertinent data into State Purchasing data system referred to as SNAP. This will cause a new external requisition to print and will be forwarded to State Purchasing. A copy of this is also sent to the requesting bureau for their records. State Purchasing will process, issue, and send a purchase order to the vendor and a copy back to Department.

If a formal bid process is required, State Purchasing will send out an invitation to bid (ITB) to registered vendors. State Purchasing will receive the ITBs, and send copies to the Department for review. The Department will determine the lowest responsible bidder meeting all specifications, terms, and conditions of the ITB. The Department’s Procurement Officer will send a memo recommending award to this vendor. After due process, State Purchasing will issue a purchase order to that vendor. Vendor payments will appear on a Detail Voucher List that is available to programs for monitoring expenditures.

After goods are received, the invoice is reviewed and approved for payment by the requesting bureau. The invoice is then sent to the Department’s Finance Division to initiate the payment voucher.

Purchases under $1,000 can be bought directly from the vendor, excluding equipment. Most telephone and over-the-counter orders are handled this way. The requesting program fills out the BH form for the items to be purchased, price, and vendor. The request must be approved by the Program Director (WIC) and then forwarded to Bureau Administration Division staff to verify whether it is allowable (OMB Circular A-87, 7 CFR Part 3016), has correct fund codes, and is mathematically accurate. The request is reviewed by the Administrative Division Director/Assistant Director for final approval. A BH number is then assigned by the Administrative staff accountant and returned to the requesting program to place the order with the vendor. After the order has been received, a material receipt is prepared and submitted with the invoice to the Health Finance Procurement Division to process for payment to the vendor. Vendor payments will appear on a Detail Voucher List that is available to programs for monitoring expenditures.

Financial Management Reviews

The Office of Program Integrity (OPI) conducts financial management reviews of the local agencies at least once every two years with at least 20 percent of the sites being monitored as required by United State Department of Agriculture (USDA) guidelines. Local agencies are defined as private contract agencies providing WIC services on behalf of the department, and the eight public health districts within ADPH. Site visits include an examination of selected WIC protocols to include WIC income eligibility guidelines; internal control procedures over formula and food instruments, including security and issuance procedures; and accountability of expenditures, particularly personnel costs through the examination of cost accounting records. Additional subrecipient monitoring procedures are applied to the private contract agencies as well as Jefferson and Mobile counties. Mobile and Jefferson are treated as subrecipients to the department since they were established as separate, legal entities prior to the creation of the State Department of Public Health. For these subrecipients, independent audit reports
are reviewed to verify compliance with the requirements of OMB Circular A-133, as required. Findings presented in these audits affect the way audits are conducted by Program Integrity staff.

Management’s corrective action plan to audits conducted by OPI are reviewed by the Director of OPI and a Nutrition Consultant with the State WIC division. As part of the corrective action plan, management must identify a review or follow-up plan that will occur in 6 months to determine whether the corrective actions identified are effective. This 6-month follow-up is documented and forwarded to the State WIC division Nutrition Consultant for review. Finally, any findings identified in the independent audit reports for the subrecipients (as identified in number 1 above) that are directly related to the WIC program require a Management Response Letter from the State WIC Director. The Director of OPI works with the State WIC Director to ensure the letter is prepared timely, in accordance with the requirements of OMB Circular A-133. Any required recoupment of funds are either adjusted during the current fiscal year, if appropriate, or returned to USDA, FNS as required.

**FNS 798 Report**

Estimated Adjusted Gross Obligations (Line 1) are calculated from the number of estimated participants for future months times the average food cost per participant. Estimations are made using the most recent food package costs for closed out months adjusted for inflation. Estimated Participation is based on comparison of historical participation and monthly patterns of redemption. These estimates are adjusted for future months on subsequent reports.

Estimated Rebates (Line 2) historical participation and formula redemption data are used to determine the future rebates to be received. Reports used are the Monthly Infant Formula Invoice and the Formula Purchased by WIC Participants.

Net Federal Obligations (Line 3) is the difference of Adjusted Gross Obligations minus Estimated Rebates (Line 1 – Line 2).

Total Participation prior to month closeout (Line 18) is determined utilizing the maximum caseload that can be supported by the food funding available, and is determined during the Annual Budget Process for the WIC Program. The monthly projected participation for each month is multiplied by an average monthly food package cost which should not exceed the available food funds. Historical participation and seasonality are used to develop trends.

Gross Outlays and Unliquidated Obligations (Lines 4 and 6) - WIC transactions are recorded daily into the Department’s automated STAARS accounting system. Food expenses are recorded daily based on funding requirements received from the department’s electronic WIC (e-WIC) processor, Conduent. Administration expenses are approved by appropriate program staff and processed through STAARS. Receipts as well as encumbrances are also entered into STAARS.

Food outlays as reported on the FNS-798 are taken from the Department’s WIC Crossroads system. A financial status report is generated monthly from Crossroads that captures when and what was redeemed.
State level administration expenses as well as encumbrances are taken from reports that are processed through the Department’s STAARS system.

Vendor and participant collections are receipted in STAARS and recorded as program income on the FNS-798.

Federal Participation (Lines 15 to 18) - Federal participation numbers are produced by the Department’s WIC County Operations Network (Crossroads) system. The State Agency receives participation counts for all Local Agencies and Clinics from Crossroads, through the monthly Enrollment/Participation Report. The Enrollment/Participation Report is provided by Crossroads in 3 forms:

1. Statewide (Attachment A)
2. District/Local Agency (Attachment B)
3. Clinic (Attachment C)

A copy of each is attached. The Enrollment/Participation Report bases the participation counts on the number of persons issued food or food instruments (computer generated and manual); the number of fully breastfed infants who receive no food instruments or food instruments, but are breastfed by participating women; and the number of women who receive no food or food instruments, but are partially breastfeeeding a participating 6 to 12 month old infant.

All forms of the Enrollment/Participation Report are produced by Crossroads at the State level and then distributed to the Clinic and District (Local Agency) levels on a monthly basis. Enrollment/Participation Reports provide the number of participants enrolled and participating by category and priority. Reports also include other participant characteristic data. Priority level is automatically assigned by Crossroads based on the nutritional risk criteria. The report provides participation data by District (Local Agency) to measure breastfeeding performance.

Enrollment and participation numbers are also monitored monthly by District level staff and a monitoring report is submitted to the State WIC Office on a quarterly basis by the District level staff. The monitoring reports are reviewed by the State WIC Director. Strategies are developed by District level staff to address caseload concerns, when needed.

**Letter of Credit**

ADPH finance determines, on a daily basis, if any federal draws are necessary. All WIC transactions are recorded on a daily fund balance report.

This report shows the Department’s balance on hand for both Food and NSA and is used to ensure that any federal draws are not in excess of immediate cash needs.

**Food Draws**

ADPH runs a report out of the Conduent Administrative Terminal detailing daily food costs to determine what our funding requirement is for that day. The amount, if any, drawn from the Department’s Letter
of Credit will be the difference between the updated Food Balance on the Department’s daily fund balance report and the daily food costs detailed on the Conduent report. This process is altered when monthly formula rebates are received from Mead Johnson Nutritionals, Alabama’s contracted formula manufacturer. Once the rebate deposit is recorded in STAARS, foods draws are stopped until the rebate is completely exhausted.

**NSA Draws**

Per the Cash Management Improvement Act Agreement (CMIA) [Section 6.2.4 - Scheduled Draws Funding] between The State of Alabama and The Secretary of the Treasury, United States Department of the Treasury, the State will draw Federal Funds for administrative cost-payroll, administrative costs-other, and indirect cost on a pro-rata basis to coincide with the semi-monthly payroll cycle (24 times per year) in accordance with 31 CFR 205.18(a). At the beginning of a quarter, a STAARS infoAdvantage report is run off the previous quarter’s expenditures. The total expenditure amounts are divided by 6 (bimonthly) to calculate an estimated administration amount that will be drawn on or around each payday. The day’s WIC Administration Fund Balance amount is then added to or subtracted from this calculated draw amount. If the Administration Fund Balance is a positive amount, then this amount will be subtracted from the calculated draw amount. If the Administration Fund Balance is a negative amount, then this amount will be added to the calculated draw amount. This total is the amount drawn from the administration account in the WIC Letter of Credit rounded to the nearest dollar.

**Monitoring Fiscal Operations at the Local Level**

The WIC Director and Bureau of Family Health Services Financial Administrator meet monthly with the Department’s Finance staff to review the status of WIC grant expenditures at the Clinic, District, and State level. Finance produces a spreadsheet with the status of expenditures to date at the time of the grant review for each District (Local Agency) and rolls this up to a statewide total. Districts that are over budget are contacted for adjustment, as needed. District Administrators are allowed to reallocate funds between clinics as long as the District total is not exceeded to better maximize caseload and funding.

**Subgrantee Claims**

Subgrantee claims may be assessed based upon subgrantee financial management reviews. If a claim is assessed during the fiscal year, subgrantees are required to reduce the next monthly invoice by the claim amount. If a claim occurs at the end of the fiscal year, subgrantees are required to pay back funds.

**Payments to Subgrantees**

All subgrantees submit their signed monthly invoices with back-up data for processing. The WIC account technician examines and verifies the accuracy of the invoice and supporting documents. The Director of the Bureau of Family Health Services Administration branch examines and approves the invoice for payment. The invoice is then paid by the WIC grant accountant within the Bureau of Financial Services.
## Requisition

**For Finance Use Only**

**Ship Code:**

**Bill Code:**

**Requesting Unit:**

**Ship To Address:**

**City State Zip:**

**Date:**

<table>
<thead>
<tr>
<th>Fund</th>
<th>Agency</th>
<th>Organ.</th>
<th>Object</th>
<th>Quantity Ordered</th>
<th>Unit Measure</th>
<th>Commodity Code/Description</th>
<th>Unit Cost</th>
<th>Extended Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total** $0.00

---

**State Health Officer**

**Authorized Program Approval**

ADPH-F-HF-10/REV. 1-95
Chapter VI

Food Funds Management
VI. FOOD FUNDS MANAGEMENT

(Please indicate) State Agency: Alabama for FY: 2023

Food funds management involves monitoring cost containment measures and procedures related to infant formula and other authorized food items, the monitoring and management of State agency funding sources, and the accurate reporting of participation figures.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO

A. Cost Containment Measures - 246.4(a)(14)(xi), 246.4(a)(14)(xvii), 246.16a(a): describe the policies and procedures used to implement cost containment measures as they relate to infant formula contracts, their approval and the processing of infant formula and/ or other rebates, and food package cost containment practices.

B. Funds Monitoring/Reporting - 246.4(a)(2); (a)(12); and (a)(14): describe the State agency’s funding sources, how food obligations are calculated to allow for inflation, rebate cash management, and monthly closeout monitoring activities.

C. Participation Reporting - 246.4(a)(11): describe the methods used to accurately document and monitor participation at the State and local level, and methods for monitoring changes in participation by priority.
VI. FOOD FUNDS MANAGEMENT

A. Cost Containment Measures

1. The State agency seeks FNS approval related to infant formula cost containment measures (check one):
   □ For a waiver of the requirement for a single-supplier competitive system. State agency must complete a cost comparison projecting food cost savings in the single-supplier competitive system based on the lowest monthly net price or highest monthly rebate [as required in Section 246.16a(d)(2)(i) through (d)(2)(iii) and savings under an alternative cost containment system, Section 246.16a(d)(2)(B)]
   □ To issue an infant formula bid solicitation that evaluates bids by highest rebate. A State agency must demonstrate to FNS' satisfaction that the weighted average retail prices for different brands of infant formula in the State vary by 5% or less [as required in Section 246.16a(c)(5)(iii)].
   ○ Not applicable

   Please attach in the Appendix supporting documentation for requests for FNS approval.

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

2. Cost Containment Contracts for Infant Formula

a. The State agency acquires infant formula through the following food delivery systems:

   i. Non-exempt infant formula (check all that apply):
      □ Home food delivery system
      □ Direct distribution food delivery system
      ○ Retail food delivery system
      ○ Other (specify): Infant formula purchased directly from the manufacture or wholesaler

   ii. Exempt infant formula (check all that apply):
       □ Home food delivery system
       □ Direct distribution
       ○ Retail food delivery system
       □ Other (specify): Infant formula purchased directly from the manufacture or wholesaler

   iii. WIC-eligible nutritionals (check all that apply):
       □ Home food delivery system
       □ Direct distribution system
       ○ Retail food delivery system
       ○ Other (specify): Infant formula purchased directly from the manufacture or wholesaler

b. The State agency has a rebate contract/agreement for infant formula.

   ○ Yes
     If yes, attach contract in Appendix
   □ No
     If no, check which applies:
     □ Granted waiver
     □ ITO with participation under 1,000 as of April (Proceed to question A.4. Cost Containment for Other Foods)
c. For a single-supplier system or multi-supplier: Date contract/agreement: 10/01/2021

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>Original Term Began</th>
<th>Original Term Expires</th>
<th>Extension Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mead Johnson Nutritionals</td>
<td>10/01/2021</td>
<td>09/30/2024</td>
<td>2 one year extensions</td>
</tr>
</tbody>
</table>

*If contract expires during the fiscal year see sections 3 and 4

d. Current fiscal year rebates and current net price per unit paid (note the price should reflect current prices rather than original contract prices and rebate amounts):

My rebate price sheet is available and attached as Appendix: Chapter VI. Infant Formula Rebate Price Sheet (Proceed to A. 3. Infant Formula Issuance.)

<table>
<thead>
<tr>
<th>Product/Unit Size</th>
<th>Manufacturer</th>
<th>Rebate/Unit</th>
<th>Net price/Unit</th>
<th>% WS Discount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liquid Concentrate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milk-Based</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Soy-based*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Powder</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milk-based</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Soy-based*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ready to Feed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Milk-Based</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Soy-based*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exempt Formula (if applicable)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*If uncoupled/separate contracts for milk- and soy-based infant formula.

3. Infant Formula Issuance.

a. Does the State agency issue the Primary Contract Infant Formula as the first choice of issuance (by physical form), with all other infant formulas issued as an alternative? (Section 246.16a(c)(8) & 246.10(e)(1)(iii))

☒ Yes ☐ No

b. The percent of infants receiving each type of formula is estimated at:

Contract 85 percent
Non-contract 15 percent

Exempt infant formula 15 percent
Non-exempt infant formula

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

4. Cost Containment for Other Foods

a. Rebates are also obtained on other WIC foods.

☐ Yes (specify foods and attach contract in Appendix):
☒ No
VI. FOOD FUNDS MANAGEMENT

b. The State agency intends to pursue rebates on other authorized foods.
   ☐ Yes (specify):
   ☒ No

c. To contain food costs, the State agency has limited authorized foods/container sizes/types, etc.
   ☒ Yes (If yes, note such limitations on the following table)
   ☐ No

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

<table>
<thead>
<tr>
<th>Specific brands are designated Disallowed</th>
<th>Only certain container sizes are allowed</th>
<th>Allowable types are limited</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exempt formula for women, infants &amp; children</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Infant cereal</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Infant Fruit/Veg/Meat</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Whole fresh fluid milk</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Lowfat fresh fluid milk</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Skim fresh fluid milk</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Fresh milks (e.g., Lactaid, cultured buttermilk, goat milk) (specify):</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Shelf-stable milk (e.g., evaporated milk, UHT, whole/low fat/nonfat dry milk)</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Cheese</td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Yogurt</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Soy-based beverage</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Tofu</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fresh eggs</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Dried egg mix</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hot cereal</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Cold cereal</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Single strength fruit/vegetable juice</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Concentrated fruit/vegetable juice</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Whole wheat bread</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Other whole grains</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Peanut butter</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
VI. FOOD FUNDS MANAGEMENT

| Dry beans/peas | X | X |
| Canned Fish    | X | X |
| Canned beans/peas | X | X |

B. Funds Monitoring/798 Reporting

1. The State agency has procedures to assure that the requirements are met regarding the nonprocurement of food in bulk lots, supplies, equipment, and other services from entities that have been debarred or suspended.
   ☒ Yes      □ No

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

2. Food Cost Obligations
   a. The State agency calculates food obligations based on the following data (check one):
      ☒ Number of expected participants and average food cost per participant
      □ Number of expected participants by category (e.g., pregnant woman, infant, etc.) and average food cost per participant category
      □ Number of expected redemptions by food instrument type and cash-value voucher type and average value per food instrument type and cash-value voucher type
      □ Other (specify):
   b. The State agency estimates the impact of inflation on food costs through the use of the following inflation escalators:
      □ Inflation factor used in Federal funding formula
      □ State-generated estimates of inflation based on State market basket of foods
      ☒ Best guess by food item based on economic reports or other sources
      □ Other (specify):
   c. The State agency Management Information System automatically produces a monthly obligation amount
      □ Yes
      ☒ No, data are pulled from various sources and an estimated amount is calculated manually or with a PC spreadsheet
      □ Other (specify):
   d. The State agency system (in-house or contracted) provides the following data on food instrument and cash-value voucher redemptions at specific (daily, weekly, monthly, as needed) frequencies (check all that apply and provide frequency):
      | Frequency | Data                                                   |
      |-----------|--------------------------------------------------------|
      | D/W/M     | ☒ Food instruments and cash-value vouchers paid for issue month |
      |           | ✔ Food instruments and cash-value vouchers outstanding for issue month |
      |           | □ Food instruments and cash-value vouchers that have expired |
      |           | □ Food instruments and cash-value vouchers that are void/unclaimed |
VI. FOOD FUNDS MANAGEMENT

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

3. Rebate Cash Management
   a. The State agency has a billing system in place that ensures rebate invoices for all authorized food, including infant formula, under competitive bidding, provide a reasonable estimate, or actual count of the number of units purchased by participants during WIC transactions (Section 246.16a(k)).
      ☑️ Actual count of units purchased
      ☐ Estimate of units purchased (attach methodology)
      ☐ Other (describe):
   b. The State agency uses a food instrument that enables it to identify the type and brand of infant formula redeemed.
      ☑️ Yes, for all formula types, brands, and physical forms
      ☐ Yes, for exempt infant formulas
      ☐ No
   c. The invoice to the formula manufacturer is issued by:
      ☑️ The WIC unit
      ☐ The State agency fiscal unit
      ☐ Other (specify):
   d. Monthly invoices are submitted with supporting data.
      ☑️ Yes ☐ No

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

4. Closeout of Report Month Outlays
   a. The State agency allows the food vendor (and farmer if any) the following number of days to submit food instruments and cash-value benefits for payment (provide the number of days):
      N/A Days from the participant's first valid date
   b. The State agency is generally able to close out a report month completely within:
      ☐ 90 days
      ☐ 120 days
      ☑️ Other (specify number of days): 30 days

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

5. Indicate the method used to reimburse vendors (and farmers if any) for redeemed food instruments and cash-value vouchers or other services and specify the entity responsible for making payment:

<table>
<thead>
<tr>
<th>State WIC</th>
<th>State FM</th>
<th>Other (Specify)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>By check directly to vendor or farmer</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>By check directly to vendor’s or farmer’s bank</td>
</tr>
<tr>
<td>☑️</td>
<td>☐</td>
<td>eWIC (Conduent) By electronic transfer to vendor’s or farmer’s bank</td>
</tr>
</tbody>
</table>
VI. FOOD FUNDS MANAGEMENT

☐ ☐ Other (specify):

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

C. Participation Reporting

1. Participation Counting
   a. The State agency counts an enrollee who received at least one food instrument/food package (or who received no food instrument/food package, but was either a fully-breastfed infant of a participating breastfeeding woman or a woman partially breastfeeding a participating 6 to 12 month old infant) as a participant during:
      ☒ The calendar month
      ☐ The computer system cycle month
      ☐ Other (specify):

   b. The State agency receives participation counts from:
      ☒ The State agency computer system based on the number of persons issued food or food instruments (manual and automated food instruments), the number of fully-breastfed infants who receive no food or food instruments, but are breastfed by participating breastfeeding women, and the number of women who receive no food or food instruments, but are partially breastfeeding a participating 6 to 12 month old infant.
      ☐ Counts reported from local agencies based on issuance records
      ☐ Other (specify):

   c. If State funds are present, the State agency differentiates between Federal-supported and State-supported participants by:
      ☐ Special code on food instrument
      ☐ Special areas of State designated as State-supported areas
      ☐ Pro rata allocation based on proportion of Federal to State funds spent
      ☐ Other (specify):
      ☒ N/A

   d. When local agencies are chronically late in furnishing food instrument and/or certification data needed for participation counts, the State agency:
      ☐ Sends warnings
      ☐ Applies financial sanctions
      ☐ Requires manual reporting
      ☒ Other (specify): N/A

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):

2. Participation by Priority
   a. Priority level is a critical data field in the State agency’s computer system.
      ☒ Yes ☐ No

   b. The State computer system automatically assigns priority level based on the enrollee’s nutritional risk condition.
VI. FOOD FUNDS MANAGEMENT

☒ Yes ☐ No

c. The State agency's computer system revises the priority level determination when a participant changes category (e.g., infant becomes child and receives a child's food package).
☒ Yes ☐ No

d. The State agency has an “unknown” priority category for VOC transfers where priority is unknown.
☐ Yes ☒ No

3. Participation by Local Agency

The State agency's computer system supports its requirement to report participation data by local agency to measure breastfeeding performance.
☒ Yes ☐ No ☐ N/A

ADDITIONAL DETAIL: Food Funds Management Appendix and/or Procedure Manual (citation):
Chapter VII

Caseload Management
VII. CASELOAD MANAGEMENT

(Please indicate) State Agency: Alabama for FY: 2023

Caseload management involves identifying the target population and special populations within it, implementing strategies to enroll the potential population, and utilizing caseload effectively to reach the desired populations. Describe the procedures in place to implement these strategies.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO

A. No-Show Rate - 246.4(a)(11)(i): describe the procedures used by the State agency to monitor potential and current participants’ utilization of program services.

B. Allocation of Caseload - 246.4(a)(5)(i) and (13): describe how the State agency assigns and manages local agency caseload allocations.

C. Caseload Monitoring - 246.4(a)(5)(i): describe the information and procedures used by the State agency to monitor caseload.

D. Benefit Targeting - 246.4(a)(5)(i); (6), (7), (19), (20), (21), and (22): describe the plans and procedures for ensuring that WIC benefits reach the highest risk participants and persons in special need such as migrants, homeless, and institutionalized persons; pregnant women in their early months of pregnancy; and applicants who are employed or who reside in rural areas.

E. Outreach Policies and Procedures - 246.4(a)(5)(i), (ii); (6), (7), (19), and (20): describe the types of outreach materials used, where these materials are directed, special agreements with other service organizations and how special populations are addressed. Also, provide data on unserved and underserved areas.

F. Waiting List Management - 246.4(a)(11)(i); 246.7(f)(1),(2): describe the policies and procedures used for processing applicants.
VII. CASELOAD MANAGEMENT

A. No-Show Rate

1. Policies and Procedures for Missed Certification Appointments and Food Instrument/Cash Value Voucher Pick-Up (No-Shows)

a. The State agency has specific policies and procedures to ensure follow-up of no-shows for (check all that apply):
   ☒ Initial certification for any potential participant
   ☒ Subsequent certifications for high-risk participants
   ☒ Subsequent certification for current participants
   ☒ Food instrument/cash value voucher pick-up
   ☒ Food instrument/cash value voucher/cash value benefit non-redemption
   ☐ State agency has no specific policies and procedures for no-show follow-up

b. The local agency or State agency, when the State agency has no separate local agencies, attempts to contact each pregnant woman who misses her first appointment to apply for participation in the Program to reschedule the appointment. Such procedures include (check all that apply):
   ☒ At the time of initial contact, the local agency obtains the pregnant woman's mailing and/or email address and telephone number
   ☒ If the applicant misses her first certification appointment, an attempt is made to contact her by:
      ☒ Telephone
      ☒ Mail
      ☒ Email
      ☐ Text
      ☐ Mobile App
   ☒ If contact is established, she is offered one additional certification appointment.
   ☐ If she cannot be reached, the local agency follows-up with a request for the applicant to contact the local agency for a second appointment by sending her a:
      ☐ Postcard
      ☐ Letter
      ☐ Email
      ☐ Text
      ☒ A second appointment is provided upon request from the applicant.
      ☐ Other

2. Monitoring No-Show Rates

a. The State agency has (check all that apply):
   ☒ Standards defining acceptable no-show rates
   ☒ Policies and procedures designed to assist local agencies to improve no-show rates; Please attach
   ☐ Sanctions that may be applied to local agencies that have chronically unacceptable no-show rates; Please attach
   ☒ Provides regular feedback to local agencies concerning no-show rates
   ☐ Reports to address appropriate follow-up of no-shows
   ☐ No specific policies or procedures concerning local agency no-show rates

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
VII. CASELOAD MANAGEMENT

AL WIC Procedure Manual Ch. 1 Program Administration, Ch. 2 Certification, Ch. 3 Nutrition Education.

b. As a matter of standard procedure, the State agency monitors no-show rates through (check all that apply):

☐ State agency does not monitor local agency no-show rates
☐ Local agency reviews
☒ Automated reports
☐ Local agency reports on no-show rates
☐ Other (specify):

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 9 Reports.

B. Allocation of Caseload

☐ DOES NOT APPLY (EXPLAIN WHY AND PROCEED TO NEXT SECTION)

1. The State agency considers the following factors in its initial allocation of caseload to local agencies in a program year (check all that apply):

☐ Percent of target population served by local agency’s service area
☐ Analysis of no-show, void, non-redemption rates by local agencies
☐ Participation by priority and category
☐ Special population pockets
☐ Waiting lists
☒ Staffing/ability of local agencies to serve caseload
☒ Prior year caseload
☒ Food package costs per person
☐ Special projects
☐ Other (identify):

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

2. The State agency has a written procedure for allocation of caseload to local agencies.

☒ Yes ☐ No

If yes, attach written procedure in the Caseload Management Appendix or specify location in the Procedure Manual below.
If no, what guidelines does the State agency use for caseload allocation? (Describe in Caseload Management Appendix)

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
FY 2022 Quarterly Monitoring Report Example, FY 2023 WIC District Budget Allocations, FY 2023 Projected Statewide Participation

3. The State agency has a procedure in place to ensure that current/prior year caseload levels are maintained.

☒ Yes ☐ No

If yes, attach procedure in the Caseload Management Appendix.
VII. CASELOAD MANAGEMENT

4. If it appears that during the course of the program year all funds will not be spent, the State agency may reallocate caseload on the basis of the following factors (check all that apply):

☐ The State agency does not reallocate caseload mid-year
☒ Same basis as for initial allocation of caseload
☒ Local agency participation levels
☐ Local agency high priority participation
☐ Waiting lists
☐ Successful special projects
☐ Other (specify):

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
See attached FY 2023 Projected Statewide Participation

5. The State agency has written procedures for local agencies to follow in situations of overspending:

☐ Yes  ☒ No

If a written procedure is available, provide in the Caseload Management Appendix or specify location in the Procedure Manual below.

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
Local agencies must develop a budget based upon the target caseload allocated by the State Agency. Expenditures are monitored by program and financial staff to ensure local agencies are not overspending.

C. Caseload Monitoring

1. The State agency’s caseload monitoring process includes the review of the following data (check all that apply):

☒ Participation levels/rates  ☐ High-risk participant levels/rates
☒ No-show rates  ☐ Food costs per participant
☒ Food costs by area  ☒ Other (specify): Quarterly Monitoring Reports submitted by District Nutrition Directors.

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 1 Program Administration, Attachment Quarterly Monitoring Reports.

2. The State agency uses the following methods to monitor the above areas (check all that apply):

☐ Manual reports submitted by local agencies
☐ MIS-generated reports (If utilized please attach a description of each report and how they are used)
☒ On-site reviews
☒ Other (specify): Quarterly Monitoring Reports submitted by District Nutrition Directors.

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
FY 2022 Quarterly Monitoring Report Example, FY 2023 Projected Statewide Participation

3. Local agency caseload utilization, by any method, is reviewed by the State agency at least:

☐ Monthly
VII. CASELOAD MANAGEMENT

☒ Quarterly
☒ Other (specify): monthly when necessary
☐ Not applicable

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
Alabama Procedure Manual Chapter 1 Program Administration Attachment 1-2 Quarterly Monitoring Report

D. Benefit Targeting

1. Development and Monitoring of State Agency Targeting Plans

a. The State agency has a plan to inform the following classes of individuals of the availability of Program benefits (check all that apply):

☒ Pregnant women, with special emphasis on pregnant women in the early months of pregnancy
☐ High-risk postpartum women (e.g., teenagers)
☐ Parents/Caregivers of Priority I & II infants
☐ Migrants
☐ Homeless persons/families
☐ Incarcerated pregnant women
☐ Institutionalized persons
☐ Other (specify): See Alabama WIC Procedure Manual Chapter 14 Outreach Attachment 14-2 Local Agencies/Partners.

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 14 Outreach

b. The local agency or State agency, when the State agency has no separate local agencies, contacts the following organizations to provide WIC Program information to eligible infants and children:

☒ Foster care agencies
☒ Protective service agencies
☒ Child welfare authorities
☒ Other (specify): See Alabama WIC Procedure Manual Chapter 14 Outreach Attachment 14-2 Local Agencies/Partners.

b. The local agency or State agency, when the State agency has no separate local agencies, contacts the following organizations to provide WIC Program information to eligible infants and children:

c. The State agency ensures that benefits are targeted to those at greatest risk by limiting the use of regression as a nutrition risk criterion to only once after a certification period.

☒ Yes ☐ No

d. In addition to, or in lieu of, State-developed plans, the State agency encourages/permits local agencies to develop their own targeting plans.

☒ Yes ☐ No ☐ Not Applicable

e. If yes, the State agency assures the appropriateness/quality of local agency targeting plans by:

☒ Requiring local agencies to submit plans for State agency approval
☒ Review plans during local agency reviews
☐ Other (specify):

f. The State agency monitors benefit targeting through (check all that apply):

☒ Automated reports developed by State agency
VII. CASELOAD MANAGEMENT

☐ Manual reports submitted by local agencies
☒ Local agency reviews
☐ Other (specify):

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
FY 2022 Participation Characteristics Report

E. Outreach Policies and Procedures

1. Outreach Policies, Procedures and Materials
   a. To administer outreach activities, the State agency (check all that apply):
      ☒ Issues a standard set of outreach materials for use by all local agencies
      ☒ Requires local agencies to develop outreach plans
      ☒ Reviews outreach plans developed by local agencies
      ☒ Reviews and approves any outreach materials developed by local agencies
      ☒ Utilizes broadcast media for outreach activities
      ☒ Other (specify): Social media posts, AL WIC app for smartphone notifications.

   b. Availability of Program benefits is publicly announced at least annually via:
      
      | State Agency | Local Agency |
      |--------------|--------------|
      | ☒ Newspapers | ☒ Newspapers |
      | ☐ Radio       | ☐ Radio       |
      | ☒ Posters     | ☒ Posters     |
      | ☒ Letters     | ☐ Letters     |
      | ☒ Brochures/pamphlets | ☒ Brochures/pamphlets |
      | ☐ Television  | ☒ Television  |
      | ☒ Social Media (Twitter, Facebook, etc.) | ☒ Social Media (Twitter, Facebook, etc.) |
      | ☒ Other (specify): Radio and television media are utilized when funds are available or through public service announcements, Social Media, AL WIC app, or ADPH website. |

   c. Outreach materials are available in the following languages (check all that apply):
      ☒ English
      ☒ Spanish
      ☐ Vietnamese
      ☐ Tribal Language(s)
      ☐ Other (specify):

   d. Outreach materials are distributed to (check all that apply):
      ☒ Health and medical organizations
      ☒ Hospitals and clinics
      ☒ Welfare and unemployment offices or social service agencies
      ☐ Migrant farmworker organizations
      ☒ Indian and tribal organizations
      ☐ Homeless organizations
VII. CASELOAD MANAGEMENT

- Faith-based and community organizations in low-income areas
- Shelters for victims of domestic violence
- Food Banks
- Head Start Centers
- Other (specify): local businesses and community organizations

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

When an ITO State agency operates as both the State and local agency "All" should be checked.

2. Accessibility to Special Populations
   a. The State agency requires [all, some, none] local agencies to implement the following to meet the special needs of employed applicants/participants.

   All      Some      None
   ☒        ☐         ☐  Early morning/evening clinic hours by appointment
   ☐        ☐         ☐  Early morning/evening clinic hours, walk-in basis
   ☐        ☐         ☐  Weekend hours, by appointment
   ☐        ☐         ☐  Weekend hours, walk-in basis
   ☒        ☐         ☐  Priority appointment scheduling during regular clinic operations
   ☐        ☐         ☐  Food instrument/cash value voucher mailing procedures specifically designed for working participants
   ☐        ☐         ☐  Expedited clinic procedures for working participants
   ☐        ☐         ☐  Evening/weekend nutrition education classes
   ☒        ☐         ☐  Other (specify): Some clinics offer early morning/evening or Saturday clinics where staffing allows.

   b. The State agency requires/authorizes [all, some, none] local agencies to implement the following to meet the special needs of rural participants (check all that apply):

   All      Some      None
   ☐        ☐         ☐  Special clinic hours to accommodate travel time to clinic sites
   ☐        ☐         ☐  Use of mobile clinics to rural areas
   ☐        ☐         ☐  Food instrument/cash value voucher mailing procedures specifically designed for rural participants
   ☐        ☐         ☐  Special appointment/scheduling procedures for rural participants who do not have access to public transportation
   ☐        ☐         ☐  Special food instrument/cash value voucher issuance cycles for rural participants (check one): ☐ 2 months issuance, ☒ 3 months issuance
   ☒        ☐         ☐  Other (specify): Multiple Local Agencies offer special clinic hours; low risk participants receive 3 months food benefit issuance to reduce travel to clinics.

   c. The State agency requires/authorizes [all, some, none] local agencies to implement the following to meet the special needs of migrant families (check all that apply):

   All      Some      None
   ☐        ☐         ☐  Formal coordination with rural/migrant health centers
VII. CASELOAD MANAGEMENT

☐ ☐ ☐ ☐ Special outreach activities aimed at migrants
☐ ☐ ☐ ☐ Special clinic hours/locations to service migrant populations
☐ ☐ ☐ ☐ Expedited appointment procedures to accommodate migrant families
☐ ☐ ☐ ☐ Special food instrument/cash value voucher issuance cycles for migrant families (check one): ☐ 2 months issuance; ☒ 3 months issuance
☒ ☐ ☐ ☐ Other (specify): Clinics work with local agencies/groups to promote WIC services to migrants.

d. The State agency has in place formal agreements with one or more contiguous States to facilitate service continuity to migrants (exclusive of normal verification of certification procedures):
☐ Yes (If yes, please identify the State agencies ☒ No with whom formal agreements exist):

☒ ☐ ☐ ☐ No current unserved areas (check if applicable)

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Ch. 2 Certification.

3. Unserved Geographical Areas

a. State agency's definition of an unserved geographic area (specify): A geographic area of the state where a WIC clinic is located, and the clinic is not accessible by residents of the geographic area.

b. Please list unserved geographic areas or attach a list to appendix:
☒ No current unserved areas (check if applicable)

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

4. Underserved Geographic Areas

a. State agency's definition of an underserved geographic area and a discussion of how the State prioritizes areas in descending order (specify):
VII. CASELOAD MANAGEMENT

See definition 3.a. No one geographic area of the state takes priority over the other in regards to being accessible to WIC services.

☒ No current underserved areas (check if applicable)

b. The State agency has a list on file of served and/or underserved geographic areas including the number of newly potential applicants, the priority level currently being served, and participation.

☐ Yes  ☒ No

c. The names and addresses of all local agencies found in the last FNS-648 Report, reflect all local agencies currently in operation.

☒ Yes  ☐ No, an update list is provided in the Appendix  ☐ N/A, State agency has no local agencies

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

5. The State agency has a plan to:

☐ Inform potential local agencies of the Program and the availability of technical assistance in implementation

☐ Describes how State agencies will take all reasonable actions to identify potential local agencies.

☐ Encourage potential and existing local agencies to implement or expand operations in the neediest one-third of all areas unserved or partially served.

☒ The State agency does not have local agencies and does not plan to have local agencies. Explanation of how underserved and/or partially served areas are addressed is below.

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation) AND/OR State agency/ITO explanation of how the State agency without local agencies addresses underserved or partially served areas:

AL has 67 counties with more than 90 clinics providing WIC services. There is no geographic area of the state without access to WIC services.

F. Waiting List Management and Procedures

1. The State agency has specific policies/procedures for the establishment and maintenance of waiting lists, which are used by all local agencies.

☒ Yes  ☐ No

2. Waiting list procedures are uniform throughout the State.

☒ Yes  ☐ No, but State agency approves all exceptions

☐ No, local variation allowed without State agency approval

3. The State agency routinely monitors waiting lists.

☐ Yes  ☐ No  ☒ No, for the current Fiscal Year, the State agency does not have a waiting list.

4. The State agency requires/permits subprioritization of waiting lists by (check all that apply):

☒ No subprioritization permitted  ☐ Income

☐ Nutrition risk  ☐ Age

☐ Point system

☐ Special target populations (specify):
VII. CASELOAD MANAGEMENT

☐ Other (specify):

5. The State agency requires pre-screening for certification of individuals prior to placement on waiting lists.
   ☒ Yes
   ☐ No, only categorical eligibility established
   ☐ No, only categorical and income eligibility established
   ☐ No, local agency variation
   ☐ Other (specify):

6. Waiting lists are maintained:
   ☐ Manually
   ☒ Automated system linked to State agency’s central system
   ☐ Automated system, stand alone at some/all local agencies

7. Telephone requests for placement on the waiting list are accepted.
   ☒ Yes ☐ No

8. The State agency requires all local agencies to maintain waiting lists (telephone and/or pre-certification) with the following information (check all that apply):
   ☒ Name
   ☒ Address
   ☒ Phone number(s)
   ☒ Date placed on waiting list
   ☒ Category
   ☒ Priority
   ☒ Nutritional risk
   ☒ Income eligibility status
   ☒ Method of application
   ☒ Date applicant notified of placement on the waiting list
   ☒ Other (specify): Crossroads (MIS) allows the State Agency to define a waiting list and complete the certification process. However, if the participant meets the defined wait list requirements, they are added to the waiting list maintained by Crossroads and no food benefits are issued.

9. The State agency requires local agencies to provide information on other food assistance programs to applicants who are placed on a waiting list. If the State agency has no local agencies, it provides the information.
   ☐ Yes ☒ No

ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
Alabama Women, Infants and Children (WIC) Program

FY 2023 Projected Statewide Participation

Chapter VII. Section C. Caseload Monitoring

FY 2023 Projected Statewide Participation

Total = 107,968 (Year to date average May 2022 caseload)

Women = 24,394 (22.6 percent)

Infants = 28,514 (26.4 percent)

Children = 55,060 (51.0 percent)
Chapter VIII

Certification, Eligibility and Coordination of Services
VIII. CERTIFICATION, ELIGIBILITY & COORDINATION OF SERVICES

(Please indicate) **State Agency: Alabama** for FY **2023**

The review of certification, eligibility and coordination of services involves the process of determining and documenting participant eligibility (income eligibility as well as nutritional risk determination, standards, and criteria), and the coordination of certification activities with other health services.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, "Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation." was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

A. **Eligibility Determination and Documentation - 246.7(c)(1); 246.7(d)(1); 246.7(v)(B):** describe the policies and procedures for determining and documenting eligibility including the application process, residency requirements, identity requirements, documented physical presence or valid exception; proof of categorical eligibility, income limits, income eligibility documentation, determination of special populations and a definition of and policy toward the economic unit.

B. **Nutrition Risk Determination, Documentation, and Priority Assignment - 246.4(a)(11)(i):** describe the policies and procedures for determining and documenting nutritional risk and priority assignments. Include a copy of the nutritional risk criteria the State agency plans to use with the appropriate documentation.

C. **Health Care Agreements, Referrals, and Coordination - 246.4(a)(6); 246.7(c)(1); 246.7(d)(1); 246.7(j)(2):** describe the procedures for coordinating agreements and services with other health care providers at the State and local agency level including procedures to ensure that benefits are provided to persons with special needs.

D. **Processing Standards - 246.4(a)(11)(i); 246.7(j)(2):** describe the State agency's processing procedures to ensure that the required standards and timelines are met.

E. **Certification Periods - 246.4(a)(11)(i); 246.7(g):** describe the policies and procedures used to establish certification periods for participants and the autonomy (if applicable) granted to local agencies in determining eligibility time periods.

F. **Transfer of Certification - 246.4(a)(6); (11)(i); and 246.7(k):** describe the State agency's procedures for the transfer of certification and VOC cards ensuring that vital participant and program information is included.

G. **Dual Participation, Participant Rights and Responsibilities, Fair Hearing Procedures, and Sanction System - 246.4(a)(11)(i); 127; 167 and 18; 246.7(h); 246.7(j)(10); 246.7(j); 246.7(l):** describe the procedures used to detect and prevent dual participation at the State and local level, the procedures for ensuring participants are notified of their rights and responsibilities, and the procedures regarding participant fair hearings and sanction system.
A. Eligibility, Determination, and Documentation

1. Application Process
   a. The State agency requires all local agencies to use a standardized application process for all persons applying for the WIC Program
      ☒ Yes ☐ No

   b. The State agency shares ☐ Statewide or ☐ at local agency (check one), a common income application or certification form with (check all that apply):
      ☒ No other benefit programs ☐ Medicaid
      ☐ TANF ☐ SNAP
      ☐ Maternal and Child Health (MCH) ☐ Other reduced-price health care program(s)
      ☐ Other (specify):
      ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

2. Residency, Identity and Physical Presence Requirements
   a. The State agency requires documentation of residency
      ☒ Yes
      ☒ Signed statement that documentation of residency information is not available and why (e.g., homeless, theft, fire) ☐ No (Specify why, e.g., ITOs and Alaska natives who are exempt from this requirement):

   b. The State agency has reciprocal agreements concerning residency with other State agencies
      ☐ Yes; list States:
      ☒ No
      Describe any reciprocal agreements:

   c. The State agency has special residency policies and procedures for how the following special categories should be treated (check all that apply):
      ☒ Homeless applicants ☒ Institutionalized applicants
      ☒ Migrants ☐ Indian Tribal Organizations
      ☐ None ☐ Other (specify):

   d. The State agency allows the following as proof of identity; please select all that apply.
      ☒ Driver’s license
      ☒ Passport
      ☒ State issued identification card
      ☒ Employer issued identity card
      ☐ Documentation from participation in a means-tested program.
      ☒ Other (please list all that are accepted) Please see attachment 2-1 Proof Documentation List for Income Assessment (AL WIC Procedure Manual Ch. 2 Certification).
e. The State agency requires physical presence of the applicant or a valid exception to be documented:

☒ Yes except for the following condition(s):

☒ Applicant or parent/caretaker is an individual with disabilities which prevent him/her from being physically present at the WIC clinic (e.g., medical equipment, bedrest or serious illness exacerbated by coming into clinic).

☒ Applicant is an infant or child receiving documented ongoing health care from any health care provider, including the local agency; being physically present would pose an unreasonable barrier; and the infant or child was present at his/her initial WIC certification.

☒ Applicant is an infant under 8 weeks of age who cannot be present at the time of certification (for a reason determined appropriate by the local agency) and for whom all necessary certification information is provided.

☐ Applicant is an infant or child who was present at his/her initial certification; was present at certification within the one-year period of the most recent determination; and is under the care of one or more working parent, or under the care of primary working caretakers whose status presents a barrier to bringing the infant or child in to the WIC clinic.

3. The State agency requires applicants to submit proof of categorical eligibility for (check all that apply):

☐ All pregnant women  ☒ Pregnant women not visibly pregnant

☒ Postpartum women  ☒ Children

☒ Infants  ☐ Other (specify):

4. Income Limits for Eligibility

a. The State agency gross income limit for income eligibility is 185% of the federal income guidelines

☒ Yes, with no local agency exceptions

☐ Yes, with local agency variation

☐ No, with no local agency exceptions
  (specify State maximum percent of poverty:  %)

☐ No, with local agency variation
  (specify State maximum percent of poverty:  %)

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

b. The State agency implements income eligibility guidelines concurrently with Medicaid

☒ Yes  ☐ No

ADDITIONAL DETAIL: Please attach a copy of the income guidelines in the Appendix or the appropriate citation in the Procedure Manual. Certification and Eligibility Appendix and/or Procedure Manual (citation): See attached WIC Income Guidelines.

c. The State agency requires documentation of an applicant's, or certain family members' eligibility to receive benefits in the following means-tested programs that confer adjunctive income eligibility for WIC, as set forth in 246.7(d)(2)(vi):

  Poverty Level
TANF (specify State "percent of poverty") %
SNAP %
Medicaid (specify State "percent of poverty" for each) 146%
- Pregnant women and infants 146%
- Children 146%
- Other categorically eligible women 146%

The State agency uses documented eligibility for participation in other means-tested programs to establish automatic WIC income eligibility (check all that apply, and the poverty levels used for each):

**Poverty Level**

- Free or Reduced-Price School Meals %
- Supplemental Security Income (SSI) %
- Other State-provided health insurance (specify State "percent of poverty" maximum %)
- Food Distribution Program on Indian Reservations (FDPIR) %
- Other (specify):

Individuals are required to document that they or a family member are certified as eligible to receive TANF, Medicaid, or SNAP benefits or, under the State option, certified as eligible to receive benefits in State-administered programs by providing:

- Program ID card (only if it includes dates of eligibility) or notice of current eligibility
- Documentation of participation in State-administered programs (and such programs require documentation of income and have income guidelines at or below WIC’s income guideline of 185% of poverty).

(Program[s]: )

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

5. Income Eligibility Documentation

a. For WIC applicants whose income eligibility is not based on adjunctive or automatic income eligibility in another means-tested program, the State agency requires (check all that apply):

- Documentation of income information
- Signed statement that documentation of income information is not available and why
- Notation in the participant record if the applicant declares no income and why
- Other (specify):

b. Exceptions to income documentation are made for the following:

- The necessary information is not available
- The income documentation presents an unreasonable barrier to participation as determined by the State agency
- Those applicants with no income
- Those applicants who work for cash
☒ Other (specify): Victims of disaster or applicants who work for cash and the employer refuses to provide a letter of support.

c. If the applicant does not supply the necessary documentation at the certification appointment, local agencies are generally instructed to do the following:
☐ Certification process is terminated, and no food instruments/cash-value vouchers are provided; appointment rescheduled
☐ Temporary certification (not to exceed 30 days) for applicants that have one qualifying nutrition risk and are able to present at least two of the three required documents (identification, residency, and income) during a certification appointment is completed and food instruments are provided. However, if applicant does not provide documentation within 30 days, certification expires, and a new eligibility determination must be conducted.
☐ Other (specify):

d. The State agency requires ☒ State-wide, or ☐ at local agency discretion (check one), the verification of applicant income information, if determined necessary
☐ No
☒ Yes (check all sources required, as appropriate):
☒ Employer
☐ Public assistance offices
☒ State employment offices (wage match, unemployment)
☒ Social Security Administration
☐ School districts/offices
☐ Collateral contacts
☐ Other (specify): AL WIC Procedure Manual Ch. 2 Certification Attachment Guide to Determining WIC Income Eligibility.

e. The State agency has specific policies that define actions to be taken at a mid-certification appointment if a participant’s income changes.
☒ Yes; Please specify When there is knowledge of a change in income or adjunctive eligibility status – AL WIC Procedure Manual Ch. 2 Certification.
☐ No

f. The State agency allows documentation of alternate income procedures for Indian or Indian Health Service (IHS) operated local agencies.
☐ Yes ☒ No ☐ Not Applicable

g. The State agency has a specific policy that addresses income from benefits provided by a State-administered programs.
☒ Yes ☐ No

h. The State agency has a specific policy to ensure that certain types of income, such as combat pay or Family Subsistence Supplemental Allowance (FSSA) payments for households that include service members, are excluded from consideration in the WIC income eligibility determination, as provided by law and regulation.
☒ Yes ☐ No
6. In determining an applicant's income eligibility for WIC, the State agency excludes basic allowance for housing received by military services personnel residing off military installations and in privatized housing, whether on- or off-base.
   ☒ Yes, State-wide  ☐ No

7. The State agency excludes cost-of-living allowances for military personnel on duty outside of the contiguous 48 States (OCONUS COLA) from applicant income for purposes of WIC income determination.
   ☒ Yes, State-wide  ☐ No

8. In determining an applicant's income eligibility for WIC, the State agency excludes payments given to deployed military service members. These payments are in accordance with Chapter 5 of Title 37 of the U.S.C.
   ☒ Yes, State-wide  ☐ No

9. In determining an applicant's income eligibility for WIC, the State agency calculates multiple income sources received by an applicant's household at different frequencies in accordance with WIC Policy Memo 2011-7 and compares the sum to the established WIC IEGs.
   ☒ Yes, State-wide  ☐ No

10. The State agency defines the economic unit in accordance with WIC Policy Memo 2013-3.
    ☒ Yes  ☐ No (if no, why not):

    Provide the definition of an economic unit used by the State agency in the Appendix or the appropriate citation in the Procedure Manual.

11. The State agency has specific policies or lists examples concerning the determination of the economic unit for (check all that apply):
    ☒ Foster children
    ☒ Divorced/legally separated parents; step parents
    ☒ Absentee spouse (military hardship tours, etc.)
    ☒ Cohabitation
    ☒ Institutionalized applicants (including incarcerated applicants)
    ☒ Homeless applicants

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

AL WIC Procedure Manual Ch. 2 Certification
Minors ("emancipated" minors)
☐ Separate economic units under the same roof
☐ Striker/unemployed
☐ Students away at school
☐ Self-employed applicants
☐ Other (specify):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

12. Mid-Certification Disqualifcation

a. The State agency ensures that local agencies are required to stipulate that an individual is not automatically disqualified mid-certification since she/he no longer participates in one or more of the Programs for which they were originally determined adjunctively/automatically income eligible.

☐ Yes ☐ No

b. WIC regulations specify that when income eligibility is reassessed mid-certification, State/local agencies are required to reevaluate the Programs for which the individual could be determined adjunctively/automatically income eligible. If the individual cannot qualify based on eligibility for one of these Programs, eligibility must be determined based on WIC income guidelines and disqualification made only after all options are exhausted. The State agency ensures its policy and procedures comply with this requirement:

☐ Yes ☐ No

B. Nutrition Risk Determination, Documentation and Priority Assignment

1. Nutrition Risk Determination and Documentation

a. Professionals authorized by the State agency as Competent Professional Authorities (CPAs) to determine nutritional risk include (check all that apply):

<table>
<thead>
<tr>
<th>Qualification Priorities</th>
<th>Can certify for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>RD or Masters Level Nutritionist</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Bachelor's Level Nutritionist</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Physician</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Physician Assistant</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Registered Nurse</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Licensed Practical Nurse</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Home Economist</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Paraprofessional</td>
<td>Priorities I-III ☐</td>
</tr>
<tr>
<td>Other (Specify): Dietetic Technician, Registered (DTR)</td>
<td>☑</td>
</tr>
</tbody>
</table>

b. The State agency authorizes local agencies to (check all that apply):

☐ Conduct ☒ Anthropometric and ☑ Hematological measurements
Use medical referral data for Anthropometric and Hematological measurements

☐ Conduct measurements only when medical referral data are unavailable

☐ Use data from a state Health Information Exchange (including access to medical referral data via a participant/physician portal)

c. The State agency uses only FNS-approved nutrition risk criteria, as referenced in Policy Memorandum #2011-5, WIC Nutrition Risk Criteria, and transmittal memorandum (dated December 17, 2020) that list the revised risk criteria requiring implementation by 10/1/2022, published on the FNS PartnerWeb, to document nutrition risk.
☐ Yes ☐ No

Please append a copy of the revised nutrition risk criteria in its entirety to this State Plan.

See attached: AL WIC Program Request for Extension of Implementing FY 2023 Risk Codes_Email approval 07.28.2022

d. The State agency modifies nutrition risk criteria such that criteria definitions are more restrictive than nationally established definitions.
☐ Yes (list criteria):
☐ No

e. Hematological risk determination:

The State agency requires (check one of the following):

☐ Bloodwork data to be collected at the time of certification (Statewide).
☐ Bloodwork data to be collected within 90 days of certification, so long as the participant is determined to have at least one qualifying nutritional risk at the time of certification (Statewide), and the State has implemented procedures to ensure receipt of data.

The State agency ensures that hematological assessment data are current and reflective of participant status, to include a bloodwork periodicity schedule that conforms to the requirements as described in 246.7(e)(1)(ii)(B).
☐ Yes ☐ No

The State agency allows local agencies the option of obtaining bloodwork on children ages 2-5 annually if prior certification results were normal.
☐ Yes ☐ No

f. Anthropometric risk determination:

The State agency allows (check one):

☐ Anthropometric data for certification to be no older than 60 days (Statewide)
☐ A shorter (less than 60 days) limit on age of anthropometric data for certification

g. Nutrition assessment:

(i) Local agencies are required to perform a complete nutrition assessment (as described in the Value Enhanced Nutrition Assessment [VENA] Guidance) for all participants.
☐ Yes ☐ No (explain):

(ii) Local agencies are required to perform a mid-certification nutrition assessment (as described in the Guidance for Providing Quality Nutrition Services during Extended Certification Periods) for all participants with and extended certification period.
Yes □ Not Applicable: (The State agency does not utilize the extended certification option for any participant category)

(iii) The State agency policy requires that nutrition assessment intake information be collected on a State agency mandated form or Management Information System (MIS).

☐ Yes □ No
If yes, attach mandated forms (or MIS screen shots) or specify location in the procedure manual and reference below.
If no, the State agency assures quality of nutrition assessment by:
☐ Requiring local agencies to submit forms for approval
☐ Annually monitoring the locally developed forms during local agency review
☐ Other (specify):

(iv) Dietary assessment is based on professionally recognized guidelines (e.g., Dietary Guidelines for Americans, My Plate Food Guide, American Academy of Pediatrics)

☐ No (explain):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (cite):

See attached MIS screen shots for nutrition assessment intake information.

2. Documentation
a. The State agency requires documentation in the applicant’s case file for all nutrition risk criteria used to establish WIC eligibility (check one) (as described in FNS Policy Memorandum #2008-4, WIC Nutrition Services Documentation):

☑ Yes, supported by a written "exceptions" policy (e.g., policies to direct clinic staff in situations in which documentation is unavailable)
☐ Yes, with CPA discretion when to waive documentation requirement (no written policy)
☐ No (explain):

b. As a matter of policy, the State agency requires the documentation of nutritional risk criteria on a participant's certification form in the following manner:

☑ All identified risk criteria are recorded
☐ A set number of criteria is recorded (maximum number is 10 criteria)
☐ Local agency personnel decide how many and which criteria are recorded
☐ Other (specify):

3. Priority Assignments
a. Participants certified for regression

☑ Remain in the same priority in which they were previously assigned
☐ Are assigned to Priority VII, regardless of their initial priority at first certification
☐ Other (specify):
b. The State agency requires verification for all nutrition risk criteria that require a physician’s diagnosis.
   □ Yes       ☒ No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (cite):

c. Participants may be certified for regression (check all that apply):
   □ A single six-month period
   ☒ One time following a certification period
   □ No policy, local agency discretion


d. High risk postpartum women are assigned to the following priority:
   ☒ Priority III
   □ Priority IV
   □ Priority V
   □ Priority VI


e. Participants certified solely due to homelessness/migrancy are assigned to the following priority:

<table>
<thead>
<tr>
<th>Category</th>
<th>IV</th>
<th>V</th>
<th>VI</th>
<th>VII</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant Women</td>
<td>☒</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breastfeeding Women</td>
<td></td>
<td>☒</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Postpartum Women</td>
<td></td>
<td></td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>Infants</td>
<td></td>
<td>☒</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children</td>
<td></td>
<td>☒</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

f. Attach a copy of any nutrition risk criteria that will be added, modified, or deleted during the coming fiscal year. For each criterion, indicate:
   Applicable participant category
   Applicable priority level(s)
   Whether a physician’s diagnosis is required
   SA code number which conforms to list of codes provided by USDA for Participant Characteristics data collection

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
   See attached Nutrition Risk Criteria Changes FY 2023

C. Health Care Agreements, Referrals, and Coordination

1. State Agency Referral Agreements and Coordination of Services

a. The State agency has written formal agreements that permit the sharing of participant information with the following programs/providers (indicate whether information is shared manually (M) or through ADP (A) by placing either an M or A in front of the appropriate service):

<table>
<thead>
<tr>
<th>Program/Provider</th>
<th>Manual</th>
<th>ADP</th>
</tr>
</thead>
<tbody>
<tr>
<td>SNAP</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>Rural/migrant health centers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TANF</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>Hospitals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicaid</td>
<td>A</td>
<td></td>
</tr>
<tr>
<td>Childhood immunization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SSI</td>
<td></td>
<td>A</td>
</tr>
<tr>
<td>Immunization registries</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
b. **Formal agreements for coordination of services include:**

- Responsibilities of each party
- Assurance that information is used only for program eligibility and/or outreach
- Assurance that information will remain confidential and not be shared with a third party

**c. The State agency requires local agencies to coordinate services with, and/or develop referral systems for, the following (check all that apply):**

- SNAP
- TANF
- SSI
- Medicaid
- CHIP
- IHS facilities
- MCH (clinics/facilities)
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT)
- Family planning
- Prenatal care
- Postnatal care
- Immunization
- Dental services
- Private physicians
- Hospitals
- Well-child programs
- Other (specify):
- Children with special health care needs
- Schools
- Expanded Food and Nutrition Education Program (EFNEP)
- Other food assistance program (TEFAP, FDPIR, CSFP, etc.)
- Breastfeeding promotion
- Child protective services
- Head Start
- Early Head Start
- Healthy Start
- Substance abuse program
- Child abuse counseling
- Foster care agencies
- Homeless facilities
- Mental health services
- Rural/migrant health centers

**ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):**

2. **Local Agency Referral Procedures**

a. The State agency ensures that local agencies make available to all adults applying or re-applying for the WIC Program for themselves or on behalf of others the following types of information:
- State Medicaid Program, including presumptive eligibility determinations, where available
- Child support services
- SNAP
- Substance abuse counseling/treatment programs
- TANF, including presumptive eligibility determinations, where available
- Other State-funded medical insurance programs (specify):
- Other nutrition services (specify):
- EPSDT Program
- Children’s Health Insurance programs (s)
- Other (specify):

b. The referral methods used by local agencies to other health and social service programs include (check all that apply and indicate the primary method of referral using the checkbox on the right):

<table>
<thead>
<tr>
<th>Method</th>
<th>Primary</th>
</tr>
</thead>
<tbody>
<tr>
<td>State agency-developed referral forms</td>
<td>☒️</td>
</tr>
<tr>
<td>Local agency-developed referral form</td>
<td>☐️</td>
</tr>
<tr>
<td>Telephone call to referring agency</td>
<td>☐️</td>
</tr>
<tr>
<td>Verbal referral to participants</td>
<td>☒️</td>
</tr>
<tr>
<td>Automated client/participant information exchange</td>
<td>☐️</td>
</tr>
<tr>
<td>Written literature on referral programs</td>
<td>☐️</td>
</tr>
<tr>
<td>Follow-ups by staff to monitor</td>
<td>☐️</td>
</tr>
<tr>
<td>Maintain a list of local resources for drug and other harmful substance abuse</td>
<td>☐️</td>
</tr>
<tr>
<td>Counseling</td>
<td>☐️</td>
</tr>
<tr>
<td>Other (specify):</td>
<td>☐️</td>
</tr>
</tbody>
</table>

c. Methods used by other health and social service programs to refer clients to the WIC Program include (check all that apply and indicate the primary method of referral using the checkbox on the right):

<table>
<thead>
<tr>
<th>Method</th>
<th>Primary</th>
</tr>
</thead>
<tbody>
<tr>
<td>WIC Program referral form</td>
<td>☐️</td>
</tr>
<tr>
<td>Health/social program referral form</td>
<td>☐️</td>
</tr>
<tr>
<td>Telephone call</td>
<td>☒️</td>
</tr>
<tr>
<td>Verbal referral</td>
<td>☒️</td>
</tr>
<tr>
<td>Automated client/participant information exchange</td>
<td>☐️</td>
</tr>
<tr>
<td>Written literature on the WIC Program</td>
<td>☐️</td>
</tr>
<tr>
<td>Other (specify):</td>
<td>☐️</td>
</tr>
</tbody>
</table>

d. The State agency has a system in place to monitor the extent to which WIC participants are using other health or social services (check all that apply):

- Yes (check): Medicaid  TANF  MCH  SNAP
- Yes, other (specify):
- No

e. The State agency requires local agencies to monitor referrals to determine the extent of health
or social services utilization in addition to State monitoring systems.

☐ Yes ☒ No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

f. To facilitate referrals to the Medicaid Program, the State agency provides each local agency a chart showing the maximum income limits, according to family size, applicable to pregnant women, infants, and children up to age 5 under the Medicaid Program.

☐ Yes ☒ No

g. The State agency assures that each local agency operating the Program within a hospital, and/or that has a cooperative arrangement with a hospital, advises potentially eligible individuals that receive inpatient or outpatient prenatal, maternity, or postpartum services, or that accompany a child under the age of 5 who receives well-child services, of the availability of Program services.

☒ Yes ☐ No

h. The State agency ensures that, to the extent possible, local agencies provide an opportunity for individuals who may be eligible to be certified within the hospital for participation in WIC.

☒ Yes ☐ No

i. The State agency ensures that when WIC is at maximum caseload, local agencies make referrals to:

☐ Food banks
☐ Food pantries
☐ Soup kitchens or other emergency meal providers
☐ SNAP
☐ The Emergency Food Assistance Program (TEFAP)
☐ Food Distribution Program on Indian Reservations (FDPIR)
☒ Other (specify): Local Agency Staff make referrals when appropriate and not necessarily based on caseload.

j. The State agency ensures that when WIC is at maximum caseload, local agencies notify the State agency of any waiting lists established.

☒ Yes ☐ No

k. The State agency ensures that when WIC is at maximum caseload, the State agency notifies FNS of any waiting lists established.

☒ Yes ☐ No

l. The State agency ensures that when the WIC participant's family has immediate needs for food beyond what WIC might provide, local agencies make referrals to:

☒ Food banks
☒ Food pantries
☒ Soup kitchens
☒ SNAP
☒ The Emergency Food Assistance Program (TEFAP)
☐ Food Distribution Program on Indian Reservations (FDPIR)
☒ Other (specify): Medicaid – if the participant is receiving an exempt formula and the needs are in excess of WIC maximum allowances.
m. **Immunization Screening and Referral**

The State agency assures that each local agency is meeting the requirements of WIC Policy Memorandum #2001-7, August 30, 2001: Immunization Screening and Referral, as follows:

☐ Screening children under the age of two using a documented immunization history:

☐ Using the minimum screening protocol; or

☒ Using a more comprehensive means, (specify): **Screenings and referrals are completed for all WIC infants and children.**

☐ Using another program or entity to screen and refer WIC children using a documented immunization history; (specify): ; or

☐ Implementing the minimum screening protocol is unnecessary because immunization coverage rates of WIC children by 24 months are 90% or greater; or

☐ The State agency has been unable to formalize a coordination agreement with the State Immunization Program. Provide explanation of extenuating circumstances:

The State agency’s policy and procedure manual has been updated to include the above immunization screening and referral protocol.

☒ Yes ☐ No

D. **Processing Standards**

1. **Notification Standards**

   a. The State agency defines special nutritional risk applicants who are to be notified of their eligibility within 10 days of the date of the first request (at the local agency) for program benefits as the following (check all that apply):

      ☒ Pregnant women eligible as Priority I ☒ High-risk infants (optional)
      ☒ Migrant farmworkers/family members ☒ Homeless (optional)
      ☐ Optional; please specify:

   b. The State agency requires local agencies to follow special policies and procedures to ensure timely certification of:

      ☐ Rural applicants ☒ Employed applicants
      ☐ No special policies/procedures

   c. The State agency’s policy allows it to authorize an extension of the notification period up to 15 days for special nutritional risk applicants when local agencies provide a written request with justification.

      ☐ Yes ☒ No

   d. Policies and procedures are in place to assure all other applicants are notified of eligibility within 20 days of first request (at the local agency) for Program benefits.

      ☒ Yes ☐ No

   ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

   Crossroads (AL MIS) captures appointments made outside processing standards and creates a Pending List. Staff are instructed to work the Pending List in Crossroads to meet Federal Regulations.
2. Processing Standards
   a. Processing standards begin when the applicant (check all that apply):
      ☒ Telephones the local agencies to request benefits
      ☒ Visits the local agency in person
      ☒ Makes a written request for benefits

   b. The State agency requires the local agency to have a monitoring system in place to ensure processing standards are being met for all categories of applicants.
      ☒ Yes ☐ No

   ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): AL WIC Procedure Manual Ch. 2 Certification, Ch. 9 Reports.

E. Certification Periods

1. Certification Period Standards
   a. (i) The State agency authorizes local agencies to certify infants under six months of age for a period extending up to the first birthday provided the quality and accessibility of health care services are not diminished:
      ☒ Yes, at all local agencies
      ☐ Yes, at selected local agencies
      ☐ No

   (ii) The State agency authorizes local agencies to certify children for a period of up to one year provided that participant children receive required health and nutrition services:
      ☒ Yes, at all local agencies
      ☐ Yes, at selected local agencies
      ☐ No

   (iii) The State agency authorizes local agencies to certify breastfeeding mothers for a period extending up to the infant's first birthday or until breastfeeding is discontinued (whichever comes first), if there is no decrease in health and nutrition services that the participant would otherwise receive during a shorter certification period:
      ☒ Yes, at all local agencies
      ☐ Yes, at selected local agencies
      ☐ No

   (iv) The State agency ensures that health care and nutrition services are not diminished for participants certified for longer than six months:
      ☐ No ☒ Yes (describe): A mid-certification visit is required at approximately six (6) months within the twelve (12) month period. This appointment includes updating participant's anthropometric measurements, follow-up on nutrition assessment and care plan developed at certification, providing appropriate nutrition education and making referrals as needed.

   b. Extended certification is an option for the following (check all that apply):
      ☒ Priority I infants ☒ Priority II infants ☒ Priority IV infants
      ☒ Priority III Children ☒ Priority V Children
      ☒ Priority I Breastfeeding Women ☒ Priority IV Breastfeeding Women
c. The State agency authorizes local agencies to shorten or extend the certification period up to 30 days in certain circumstances.

☐ Yes  (If yes, provide citation indicating circumstances): ☒ No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

2. The State agency authorizes local agencies to disqualify an individual in the middle of a certification period for the following reasons (check all that apply):

☒ Participant volunteers the information that they are over income
☒ Participant abuse
☒ Family member found income ineligible at recertification
☒ Failure to pick up food instruments/cash-value vouchers for 2 consecutive issuances  ☒ Other (specify): Dual participation; Pregnant women who are not visibly pregnant and fail to provide proof of pregnancy; Priority II infants who have not been evaluated by CPA by eight (8) weeks of age.

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

F. Transfer of Certification

1. Procedures for Transfer of Certification and Verification of Certification (VOC)

a. The State agency has procedures in place that are used by all local agencies for transfers of certification within the State agency (intra-State), between State agencies (inter-State), and to the WIC Overseas Program (WICO):

<table>
<thead>
<tr>
<th>Intra-State</th>
<th>Inter-State</th>
<th>WIC Overseas</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

b. A participant ID card/folder is provided which also serves as a VOC:

☐ Yes  ☒ No

c. The State agency requires all local agencies to use a standardized VOC:

☒ Yes  ☐ No

d. VOCs are issued to the following (check all that apply):

☒ All participants
☒ Migrants
☐ Homeless
☒ Participants relocating during certification period
☒ Persons affiliated with the military who are transferred overseas
☒ Other (specify): Upon request of any participant.

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
2. The State agency requires all local agencies to include the following information on the VOC (check all that apply):

☒ Name of participant
☒ Date certification performed
☒ Date income eligibility last determined
☒ Nutritional risk condition of the participant
☒ Date certification period expires
☒ Signature/printed or typed name of certifying local agency official
☒ Name/address/phone number of certifying local agency
☒ Identification number or some other means of accountability
☒ Other (specify): Nutrition risk 803, if Migrant; Food benefit data (first day to spend, last day to spend); and food prescription.

3. The State agency requires all local agencies to accept as valid all VOCs from both the domestic WIC Program and the WIC Overseas Program that contain the following essential elements:

☒ Participant name
☒ Name and address of the certifying agency
☒ Date the current certification period expires

4. The State agency honors the one-year certification period for transferring participants (infants, children, and breastfeeding women) even if it certifies participants every six months.

☒ Yes ☐ No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

G. Dual Participation, Rights and Responsibilities, Fair Hearings, Sanctions

1. Dual Participation

a. The State agency has written procedures to prevent and detect dual participation within each local agency and between local agencies:

☒ Yes (Please attach any descriptions of policy in Appendix or cite appropriate section(s) of the Procedure Manual): AL WIC Procedure Manual Ch. 12 Program Abuse, Ch. 9 Reports.

☐ No

b. The State agency has a written agreement with the Indian State agency(ies) or other geographic State agencies in proximity for the detection and prevention of dual participation (attach a copy of each applicable agreement or provide a citation of where a copy is located):

☒ Yes ☐ No ☐ Not applicable

c. The State agency has established procedures to handle participants found in violation due to dual participation:

☒ Yes (Please attach any descriptions of policy in Appendix or cite appropriate section(s) of the Procedure Manual): AL WIC Procedure Manual Chapter 12 Program Abuse Attachments 12-1 Participants Sanction for Program Abuse and 12-2 Agreements between AL WIC/ADPH and surrounding State WIC Programs.
ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

2. Participant Rights and Responsibilities

a. The State agency has uniform notification procedures that are used by all local agencies statewide:
   ☒ Yes  ☐ No

b. The State agency requires all local agencies to inform applicant/participant of his/her rights and responsibilities in written form, and must be read by or to the applicant, parent, or caretaker:
   ☒ Yes  ☐ No

c. The State agency has implemented a policy of disqualifying participants for not picking up food instruments:
   ☒ Yes  ☐ No  ☐ Not applicable

   If yes, the policy is communicated to participants in the participant rights and responsibilities materials:
   ☒ Yes  ☐ No  ☐ Not applicable

d. The State agency has implemented a policy to specifically inform participants that they are not allowed to sell WIC food benefits, including online:
   ☒ Yes  ☐ No; explain:

e. The State agency has policies and procedures to identify attempted sales of WIC food benefits in their WIC State Plan:
   ☒ Yes  ☐ No; explain:

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

f. The State agency has developed special notification policies and procedures for the following:
   ☒ Applicant/participant who cannot read
   ☒ Applicant/participant who speaks in a language other than English
   ☐ Homeless
   ☐ Migrants
   ☒ Persons with disabilities
   ☐ Other (specify):

g. The State agency requires all local agencies to provide notification of participant rights and responsibilities in the following situations:
   ☒ Eligibility at each certification
   ☒ Ineligibility at initial certification
   ☒ Mid-certification disqualification
   ☒ Expiration of a certification period
   ☒ Waiting list status
   ☐ Other (specify):
ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

3. Fair Hearing and Sanction System
   a. The State has a law or regulation governing participant appeals:
      ☒ Yes    ☐ No
   b. The State agency has established statewide fair hearing procedures:
      ☒ Yes; attach fair hearing procedures for participants or specify the location in the Procedure Manual and reference in additional detail section below.
      ☐ No
   c. State or local agency actions against participants include (check all that apply):
      ☒ Reclaiming the value of improperly received benefits
      ☒ Disqualification from the Program for up to one year
      ☐ Suspension from the Program mid-certification
      ☐ Other (specify):
   d. Appeal hearings are held at:
      ☐ WIC State agency parent agency
      ☐ Other State agency or hearing board (specify):
      ☒ Local WIC agency
      ☐ Other (specify):
   e. Statewide fair hearing procedures include (check all that apply):
      ☒ Request for hearing
      ☒ Local agency responsibilities
      ☒ Denial or dismissal of request
      ☒ Continuation of benefits
      ☒ Rules of procedure
      ☒ Responsibilities of hearing official
      ☐ Fair hearing decision
      ☐ Other (specify):
      ☐ Judicial review
   f. State agency procedures require written notification for (check all that apply):
      ☒ Appeal rights
      ☒ Request for hearing
      ☒ Denial or dismissal of request
      ☒ Notice of hearing
      ☒ Termination within certification period
      ☒ Fair hearing decision
      ☐ Judicial review
      ☐ Other (specify):
   g. The State agency has established timeframes to govern each step of the hearing process:
      ☒ Yes    ☐ No
   h. The State agency requires all local agencies to document any notification/correspondence in the participant's file:
      ☒ Yes    ☐ No
   i. The State agency has a written sanction policy for participants:
☒ Yes (If yes, provide appropriate citation below)
☐ No

j. The State agency has established procedures which determine the type and levels of sanctions to be applied against participants:
☒ Yes ☐ No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
AL WIC Procedure Manual Chapter 13 Administrative Appeals
# Alabama Women, Infants and Children (WIC) Program

## Income Eligibility Guidelines

Effective June 1, 2022 to June 30, 2023

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Federal Poverty Level (FPL) Annual Income (100 percent FPL)</th>
<th>WIC Program - 185 percent FPL (gross income before taxes are withheld)</th>
<th>Annual</th>
<th>Monthly</th>
<th>Twice per month</th>
<th>Every two weeks</th>
<th>Weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$13,590</td>
<td>$25,142 $2,096 $1,048 $967 $484</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>$18,310</td>
<td>$33,874 $2,823 $1,412 $1,303 $652</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>$23,030</td>
<td>$42,606 $3,551 $1,776 $1,639 $820</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>$27,750</td>
<td>$51,338 $4,279 $2,140 $1,975 $988</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>$32,470</td>
<td>$60,070 $5,006 $2,503 $2,311 $1,156</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>$37,190</td>
<td>$68,802 $5,734 $2,867 $2,647 $1,324</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>$41,910</td>
<td>$77,534 $6,462 $3,313 $2,983 $1,492</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>$46,630</td>
<td>$86,266 $7,189 $3,595 $3,318 $1,659</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Each additional family member</td>
<td>Add $4,720</td>
<td>Add $8,732 Add $728 Add $364 Add $336 Add $168</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: This institution is an equal opportunity provider.

Income eligibility for the WIC program is determined using income standards as prescribed under section 9(b) of the Richard B. Russell National School Lunch Act (42 U.S.C. 1758(b)). The income limit is 185 percent of the Federal poverty guidelines, as adjusted.

The revised WIC income eligibility guidelines are to be used in conjunction with the WIC regulations at 7 CFR 246.7(d).


For a pregnant woman, count each unborn baby in the family size. For example, a single mom with no other children who is pregnant with twins counts as a family of 3.

For each additional family member above a family size of 8, add the amount specified to the total gross household income. For example, maximum gross household income for a family size of 10 paid every 2 weeks is calculated as follows:

\[
3,318 \text{ (family size 8)} + 336 \text{ (family member 9)} + 336 \text{ (family member 10)} = 3,990.
\]
Chapter IX

Food Delivery and Food Instrument (FI) Accountability and Control
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

(Please indicate) State Agency: Alabama for FY 2023

Food delivery and food instrument (FI) (Food instrument means a voucher, check, electronic benefits transfer card (EBT), coupon or other document which is used by a participant to obtain supplemental foods) accountability and control involve the production, issuance, redemption, and monitoring of automated and manual food instruments through retail systems and the delivery of WIC Program foods by non-retail methods, i.e., home delivery and direct distribution.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

Electronic Benefit Transfer (EBT) Implementation and Management

A. Electronic Benefit Transfer (EBT): 246.4(a)(1), (a)(14)(xix), (a)(14)(xx), (a)(19), 246.12(h)(3), (w)-(bb): describe the policies and procedures the State agency is using to implement and operate EBT

Retail Food Delivery Systems

B. Food Instrument Control Overview - 246.4(a)(11)(iii), (a)(14)(i), (a)(14)(vi), and (a)(14)(xii): describe the policies and procedures used by the State agency in producing, monitoring and accounting for the use of food instruments.

C. Food Instrument Pick-up and Transaction - 246.4(a)(11)(iii) and (a)(14)(vi): describe the State agency's procedures for issuing food instruments to participants, including procedures for verification, prorating food packages, training and proxy policies.

D. Food Instrument Redemption and Disposition - 246.4(a)(14)(vi): describe the procedures used to reconcile food instruments as either issued or voided, and as either redeemed or unredeemed, and redeemed food instruments as either validly issued, lost/stolen/damaged, expired, duplicate, or not matching issuance records.

E. Manual Food Instruments - 246.4(a)(11)(iii), (a)(14)(i), (a)(14)(vi) and (a)(14)(ix): describe the procedures for issuing and accounting for manual food instruments, including the procedures for documentation and disposition.

F. Special Food Instrument Issuance Accommodations - 246.4(a)(11)(iii), (a)(14)(i), (a)(14)(vi), (a)(14)(ix), (a)(14)(xiv) and (a)(21): describe alternatives to participant food instrument pick-up for issuance (e.g., mail or electronic issuance) and how the integrity of program services and fiscal accountability is ensured.

G. Vendor Cost Containment System Certification - 246.4(a)(14)(xv), 246.12(a)(4)(vi): describe the competitive pricing and reimbursement methods that the State agency will implement 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.

Non-Retail Food Delivery Systems

H. Home Food Delivery Systems - 246.4(a)(11)(iii), 246.4(a)(14)(i), (a)(14)(vi), (a)(14)(vii) and (a)(14)(xii): describe how the State agency's home delivery system operates including but not limited to the types of authorized home food delivery contractors, the frequency of deliveries, and the procedures for documenting deliveries and ensuring safe food delivery of WIC foods, if applicable.
I. Direct Distribution Food Delivery Systems - 246.4(a)(11)(iii), (a)(14)(i), and (a)(14)(vi), (a)(14)(vii), and (a)(14)(xii): 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 food safety, as applicable.
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

A. Electronic Benefit Transfer (EBT)

1. Is EBT implemented statewide?
   ☒ Yes (Proceed to question 2)
   ☐ No (Continue to 1.a.)

a. Does the State agency have an active EBT Project as of July 31, 2016?
   ☐ Yes ☐ No

b. Does the State agency follow APD requirements for EBT management and reporting?
   ☒ Yes ☐ No

2. What is the State agency policy for permitting replacement cards and transfer of balances per 7 CFR 246.12(bb)(2)?
   The State Agency permits replacement of e-WIC cards. Under normal operating procedures, participants are required to come to the local agency for the replacement card.

3. What are the State agency procedures for providing customer service during non-business hours for EBT cards per 7 CFR 246.12(bb)(3)?
   The State Agency has a customer service line that is available 24 hours a day.

4. Does the State agency use the formula for EBT terminal minimum lane coverage in 7 CFR 246.12(z)?
   ☒ Yes ☐ No

   a. If no, please provide the date of the approval of the approved alternative installation formula as required per 7 CFR 246.12(z)(2).

B. Food Delivery and Food Instrument Control Overview

1. Food Instruments (i.e., vouchers, checks, EBT cards, coupons or related documents) - General

   a. The State agency uses the following types of FIs (check all that apply):

      ☒ EBT cards
      ☐ Paper food instruments
         ☐ Automated-point of certification
         ☐ Manual-individual prescription
         ☐ Pre-printed manual-standard prescription
         ☐ Automated-central generation
      ☐ Mobile Payment
      ☐ Other (specify):

   b. The State agency conducts FI inventories (Place an S=[State agency] or L=[Local agency] under the appropriate column to designate primary responsibility):

      | Automated - EBT Cards | Physical - Paper FIs |
      |-----------------------|----------------------|
      | L Daily/perpetually   | Daily                |
      | Other (Specify):      | Weekly               |
      |                       | Monthly              |
      |                       | Other (specify):     |
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

c. The FI contains/allows for the following information (check all that apply):

☒ Not applicable
☐ Local agency identifier
☐ Participant WIC ID number
☐ Vendor/farmer endorsement
☐ Countersignature for participant/proxy
☐ Authorized supplemental foods
☐ First date of use
☐ Last date of use
☐ Redemption period
☐ Serial number
☐ Purchase price
☐ Signature space

Provide a facsimile of FI in Appendix or cite Procedure Manual:

d. The EBT system allows for the following (check all that apply):

☒ A unique and sequential number benefit issuance identifier
☒ Each EBT purchase is matched to an authorized vendor, farmer, or farmers' market prior to authorizing payment per 7 CFR 246.12(x)(3)
☒ System contains authorized supplemental foods
☒ System contains first and last dates of use for electronic benefits

e. The State agency provides a toll-free number for participant/vendor/farmer inquiries on:

☐ Paper Food Instrument ☐ Cash-value voucher ☒ EBT Card/Sleeve ☐ None

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): Procedure Manual, Chapter 8, Food Benefit Delivery, Section 8.2.A

2. Food Instrument Accountability

a. FIs are delivered to local agencies by:

☐ State agency staff
☐ Local agency staff
☐ US Postal Service
☐ On-demand printing
☒ Contracted service (e.g., UPS, Purolator, etc.)
☐ Other (specify):

b. FIs (blank stock and preprinted ready for issuance) are delivered to the local agency (check all that apply):

<table>
<thead>
<tr>
<th>Blank</th>
<th>Preprinted</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Not applicable</td>
<td>☒ Not applicable</td>
</tr>
<tr>
<td>☐ Weekly</td>
<td>☐ Weekly</td>
</tr>
<tr>
<td>☐ Twice a month</td>
<td>☐ Twice a month</td>
</tr>
<tr>
<td>☐ Once a month</td>
<td>☐ Once a month</td>
</tr>
<tr>
<td>☐ Once every two months</td>
<td>☐ Once every two months</td>
</tr>
<tr>
<td>☐ Other (specify):</td>
<td>☐ Other (specify):</td>
</tr>
</tbody>
</table>
Blank Specify:
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

Preprinted Specify:

c. The State agency uses the following procedures to ensure that unclaimed paper FIs are not being used fraudulently (check all that apply):

☑ Not Applicable
☐ Signatures on the documentation of receipt are compared for similarities in writing style implying one person signed for multiple participants
☐ Local agencies conduct an initial review to void food instruments for participants known to have been terminated from the Program
☐ Inventories of food instruments are not conducted by the same local agency staff responsible for issuing/voiding food instruments
☐ Procedures are in place to ensure the proper disposal of unused/duplicate/voided FIs
☐ Other (specify):

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

3. The State agency has established food delivery procedures in cases of natural disaster and emergencies for the following (check all that apply):

☐ Manual issuance ☑ Automated issuance
☐ Mailing ☐ Home food delivery
☐ Direct distribution ☐ Remote issuance
☐ Other (specify):

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): Procedure Manual, Chapter VIII, Food Benefit Delivery, Section 8.4.C.4

C. Food Instrument Pick-up and Transaction

1. Food Instrument Pick-Up Policy and Procedures

a. Food instruments are issued by (check all that apply):

<table>
<thead>
<tr>
<th></th>
<th>All Locals</th>
<th>Most Locals</th>
<th>Some Locals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local agency director</td>
<td>☑</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Local agency nutritionist</td>
<td>☑</td>
<td>☐</td>
<td>☩</td>
</tr>
<tr>
<td>Local agency paraprofessional</td>
<td>☩</td>
<td>☩</td>
<td>☩</td>
</tr>
<tr>
<td>Clerical staff</td>
<td>☑</td>
<td>☩</td>
<td>☩</td>
</tr>
<tr>
<td>Other (specify):</td>
<td>☑</td>
<td>☩</td>
<td>☩</td>
</tr>
</tbody>
</table>

b. The State agency utilizes a participant identification card:

☑ Yes ☐ Yes, with photo ☐ No

If yes, issuance is controlled numerically, and each card is accounted for:

☐ Yes ☑ No

c. The State agency requires the following proof of receipt when issuing paper food instruments or EBT cards:

☐ Participant/parent/caretaker/proxy signature on register confirming receipt
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

☐ Local agency staff initials
☐ Date of food instrument pick-up
☐ Stub with participant signature or initials
☒ Other (specify): Electronic signature

d. The State agency has a policy to prorate food packages for the following:
☒ Late FI pick-up ☑ Certification due to expire within 30 days
☐ Mid-month certification ☒ Other (specify): late subsequent certification

e. The State agency requires local agency staff to provide each new participant/parent/caretaker/proxy with training in (check all that apply):
☒ Authorized vendors/farmers 📚 Selecting WIC-approved foods
☒ Transaction procedures ☑ Use of proxy ☒ Reporting problems/requesting assistance
☒ Participant violations (i.e., selling or offering to sell WIC benefits)
☐ Other (specify):

f. The State agency requires local agency staff to provide participants with a list of authorized vendors/farmers/farmers’ markets:
☐ Yes ☒ No

g. The State agency permits a participant to transact food instruments with any authorized vendor or farmer/farmers’ market in the State:
☒ Yes ☐ No

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

2. 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 FIs for all homeless WIC participants in a facility
☐ Limits proxy to a specified number of FI pick-ups
☒ Limits proxy to a minimum age
☐ Limits proxy assignment to local WIC staff
☐ Other (specify):

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

D. Food Instrument Redemption and Disposition

1. Food Instrument Disposition Procedures for paper FI issuance
a. The State agency system assures 100% disposition of all issued FIs
☒ Yes ☐ No

If no, specify the circumstances that prevent 100% disposition:

b. Local agencies are supplied with a report on the final disposition of its FIs:
☐ Yes (specify period): ☐ No

c. The State agency monitors each local agency’s:
☐ Number of manual FIs utilized
☐ Number of unclaimed FIs
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

☐ Number of voided FIs
☐ Number of redeemed FIs with no issuance record

2. Unclaimed, Voided, Prorated FIs
   a. The State agency requires local agencies to return "unclaimed/not picked up" paper FIs or EBT cards:
      ☒ Not applicable  ☐ Daily  ☐ Weekly  ☐ Monthly
      ☐ Other (specify):
   b. The State agency requires local agencies to return "voided" FIs:
      ☒ Not applicable  ☐ Daily  ☐ Weekly  ☐ Monthly
      ☐ Other (specify):

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

3. Lost/Stolen/Damaged Food Instruments
   a. The State agency requires local agencies to report lost/stolen/damaged FIs to (check all that apply):
      ☐ State agency  ☐ Police department  ☐ State agency's banking institution
      ☐ EBT Coordinator
      ☒ Other (specify): The State Agency reviews a report of deactivated and replaced e-WIC cards.
   b. Replacement/duplicate FIs Issuance
      (1) Replacement/duplicate FIs are issued when FIs are reported lost:
         ☐ No
         ☐ Depends on the circumstances
         ☒ Yes (If FIs are reissued, it is done):
            ☐ Immediately
            ☐ Following notification of State agency/bank agency
            ☐ After a ___ day waiting period (specify number of days)
      (2) Replacement/duplicate FIs are issued when FIs are reported stolen:
         ☐ No
         ☐ Depends on the circumstances
         ☒ Yes (If FIs are reissued, it is done):
            ☐ Immediately
            ☐ Following notification of State agency/bank agency
            ☐ After a ___ day waiting period (specify number of days)
      (3) Replacement/duplicate FIs are issued when FIs are reported damaged:
         ☐ No
         ☐ Depends on the circumstances
         ☒ Yes (If FIs are reissued, it is done):
            ☐ Immediately
            ☐ Following notification of State agency/bank agency
            ☐ After a ___ day waiting period (specify number of days)
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

☐ Other (specify):

c. Is a police report required before replacement benefits are issued when reported stolen?
☐ Yes    ☒ No

d. The State agency or its banking institution takes the following action after it is notified by the local agency of lost/stolen/damaged FIs (check all that apply):
☐ Stops payment on the lost/stolen/damaged FIs
☐ Notifies vendor or farmer
☒ Other (specify): e-WIC cards are automatically deactivated if reported lost/stolen/damaged.

Please provide a copy/citation of the State agency’s policy and procedures that ensure that lost/stolen FIs cannot be redeemed OR lost/stolen/damaged EBT cards will be replaced and associated benefits transferred (7 CFR 246.4(a)(14)(xix)).

Procedure Manual, Chapter 8, Food Benefit Delivery, Section 8.4.C.

e. The local agency documents in the participant's file that replacement FIs were issued:
☒ Yes    ☐ No

f. If it is established that lost/stolen/damaged FIs are transacted by the participant who reported them lost/stolen/damaged, the following actions are taken:
☐ A claim for cash repayment is issued to participant
☐ Participant is disqualified; specify the period of time:
☐ Participant receives a warning
☒ Other (specify): e-WIC cards are automatically deactivated if reported lost/stolen/damaged.

g. If lost/stolen/damaged FIs are transacted by someone other than the participant, the following actions are taken, check all that apply:
☐ Reported to police for investigation
☐ State agency or local agency does an investigation
☐ State agency or local agency notifies the participant
☒ Other (specify): e-WIC cards are automatically deactivated if reported lost/stolen/damaged.

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): Procedure Manual, Chapter 8, Food Benefit Delivery, Section 8.4.C.

h. The State agency monitors the level of reported lost/stolen/damaged FIs by local agency:
☒ Yes    ☐ No

4. Benefit Redemption Review (7 CFR 246.12(k)(1))

a. Describe in detail how the State agency sets maximum allowable reimbursement levels for payment for supplemental foods (including whether the State agency uses vendors’ shelf prices to set maximum reimbursement levels and how reimbursement levels are linked to competitive price criteria). If the State agency sets maximum allowable reimbursement levels differently for above-50-percent vendors and regular vendors, please explain the different methods used.

The State Agency (SA) uses redemption data collected from the Management Information System (MIS) to establish the Maximum Allowable Reimbursement Level (MARL) for payment, also known as the Not to Exceed (NTE) amount. The Information Technology (IT) Support established a rule in our MIS to calculate the NTE on a recurring basis based on options set by SA Administrators. NTE amounts are updated on a 30-day schedule, and they are currently calculated on average redemption prices based on the last 185 days. Two standard deviations are added to the average prices to establish the NTE. NTEs are calculated by peer group at the UPC level. A default NTE is used if there are not at least 25-50 redemptions in the 185 days for a particular food item. The default NTE is set based on the average prices on the previously collected price survey. The system also has a mechanism in place where the NTE will
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

require manual approval if the current NTE is more or less than 15% of the previous NTE. This will help track price deflation and inflation.

Our current rule in our MIS, Crossroads, states: Interval in Days = 30. This means that the price will be recalculated every 30 days. Standard Deviation Above the Mean = 2. This means that this rule is adding 2 standard deviations to the average mean price.

Span in Days = 185. This means that the UPC’s NTE is based on redeemed prices for the last 185 days (about 6 months).

Minimum Count = 50. This means that a new NTE will be re-calculated every 30 days if there are at least 50 redemptions for the item in the last 185 days. If not, the default NTE will be selected. The minimum count may range from 25-50 based on the item. Some items need a lower minimum count because the overall redemptions for that item is really low.

Percentage Threshold = 15%. This means that if the NTE changes greater than or less than 15% from the previous NTE, an approval record will be established, and the Vendor staff will have to go to the NTE Approval page and approve the UPCs for the peer group(s) before the new NTE will take effect.

To establish our competitive price selection criteria (CPSC), the SA uses a Market Basket approach for CPSC. The market basket consists of ten of the most redeemed food items, which includes: bread, cheese, dry peas/beans, eggs, powder formula (Enfamil Infant), adult cereal (Cheerios 18 oz.), infant cereal 8 oz., juice 64 oz., peanut butter, and whole milk. The market basket will be recalculated every 6 months using the average prices of the current vendors’ redemption data by peer group. Two standard deviations will be applied to the average prices to establish the competitive priced market basket. SA vendor applicants and all active vendors will need to meet the CPSC of their appropriate peer group.

Alabama WIC does not authorize above-50 percent vendors. There are no MARLs established for above 50-percent vendors.

(1) The State agency establishes maximum allowable reimbursement levels for:

(a) Each peer group ☒ Yes ☐ No
(b) Each food instrument or food category ☒ Yes ☐ No
(c) Other (please specify): ☐ Yes ☒ No

(2) The State agency establishes maximum allowable reimbursement levels using:

(a) Standard deviations ☒ Yes ☐ No

If yes, specify the standard deviation number and explain how the State agency determined the standard deviation it used is appropriate: In accordance with the Interim Guidance on WIC Cost Containment document, Alabama uses two standard deviations from the mean to set maximum allowable reimbursement levels.

(b) A percentage above the average redemption amount ☒ Yes ☐ No

If yes, specify the percentage and explain how the State agency determined that this percentage is appropriate.

(c) Other (please specify): ☐ Yes ☒ No

(3) The maximum allowable reimbursement levels include a factor to reflect:

☐ Yes ☐ No Wholesale price fluctuations; explain:
☐ Yes ☐ No Inflation; explain:
☒ Yes ☐ No Other (please specify): In accordance with the Interim Guidance on WIC Cost Containment document, Alabama uses two standard deviation from the mean to set maximum allowable reimbursement levels.
b. The State agency screens redemption requests through a pre-edit (before payment) or post-edit (after payment) process to detect the following:

<table>
<thead>
<tr>
<th>Not Applicable</th>
<th>Pre-Edit Screen</th>
<th>Post-Edit Screen</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
| Purchase or requested price exceeds price limitations
| ☒              | ☐              | ☐                |
| Altered purchase price
| ☒              | ☐              | ☐                |
| Vendor/farmer identification missing
| ☒              | ☐              | ☐                |
| Invalid/counterfeit vendor/farmer identification
| ☒              | ☐              | ☐                |
| Transacted before specified period
| ☒              | ☐              | ☐                |
| Redeemed after specified period
| ☒              | ☐              | ☐                |
| Altered dates
| ☒              | ☐              | ☐                |
| Missing signature
| ☒              | ☐              | ☐                |
| Mismatched signature
| ☒              | ☐              | ☐                |
| Altered signature
| ☒              | ☐              | ☐                |
| Other (specify):

c. When the payment amount on a food item exceeds the maximum allowable reimbursement amount, what action does the State agency take?

☒ Reimburses the vendor for amounts up to the maximum allowable reimbursement amount
☐ Reimburses the vendor at the peer group average
☐ Rejects the reimbursement request, but allows the vendor to resubmit
☐ Rejects the reimbursement request without allowing the vendor to resubmit
☐ Other (please specify):

d. Where pre-edit screens are used, the proportion of FIs reviewed includes:

☒ All FIs
☐ Percentage of FI (%)
☐ Other (please specify):

e. The edit system(s) that use(s) maximum allowable reimbursement levels to screen for vendor overcharges rejects food instruments based on:

<table>
<thead>
<tr>
<th>Pre-Edit</th>
<th>Post-Edit</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Not To Exceed or Maximum Prices</td>
<td></td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Percentage above average (%)</td>
<td></td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Amount above average ($)</td>
<td></td>
</tr>
<tr>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>
| Other (specify):

f. The following actions are used to control against unauthorized stores redeeming FIs:

☐ Provide up-to-date list of authorized vendors to participants at certification and/or issuance
☒ Remove a vendor/farmer/farmers’ ability to conduct transactions when it is no longer authorized
☐ Conduct compliance buy to verify if unauthorized store transacts and redeems FIS
☒ State agency or its banking institution checks vendor/farmer/farmers’ market ID numbers on redemption requests against the authorized vendor/farmer/farmers’ market list before paying vendors/ farmers/farmers’ markets for FIs submitted for redemption
☐ Inform all participants who might use the unauthorized store
☐ Other (specify):

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

5. Price Lists
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

a. Shelf Price list information is routinely collected from vendors:
   ☒ Yes   ☐ No; Explain: (Proceed to item #6)

b. Shelf Price list data are collected:
   ☒ Real Time or Daily via EBT system   ☐ Monthly   ☐ Quarterly   ☐ Semiannually
   ☐ Other (specify):

c. Shelf Price data are collected by:
   ☐ State agency staff
   ☐ Local agency staff
   ☐ Reports are submitted by vendors
   ☒ EBT system
   ☐ Other (specify):

d. The data collected has food prices for (check all that apply):
   ☒ All brands and sizes of supplemental foods
   ☐ Highest price supplemental food items within food categories
   ☐ Most commonly redeemed food items; please specify:
   ☒ All authorized vendors
   ☐ A sample of authorized vendors (please describe the sampling method used):
   ☒ Other (specify): All WIC approved cereals in specific size containers and all infant formulas issued by Alabama WIC that could be purchased at an authorized WIC Vendor.

e. The State agency/local agency verifies price data provided by vendors:
   ☒ During routine monitoring visits
   ☐ Does not verify on a routine basis
   ☒ Other (explain): During review of weekly AL EBT Vendor Over NTE redemption report.

f. The State agency/local agency analyzes price data:
   ☒ Manually on a routine or as needed basis
   ☐ In an Automatic Data Processing system and uses it to:
      ☐ Generate estimated food instrument values
      ☐ Help inform WIC staff on vendor selection decisions
      ☐ Develop vendor peer groups
      ☐ Flag individual food instruments that appear to be overcharges
      ☐ Other (specify):

6. System to Detect Suspected Overcharges

a. Does the State agency screen for suspected overcharges?
   ☐ Yes, vendor claims are issued for overcharges.
   ☐ No, the State agency does not identify overcharges and/or issue claims for overcharges. (Proceed to section D. Manual Food Instruments.)
   ☒ Other (specify): Redemption data is captured on a continuous basis through transaction history. Vendors will be monitored through the AL EBT Vendor Over NTE Report can be reviewed daily by vendor staff. Vendors who consistently have transactions over the NTE amount will be evaluated to determine if they are in the correct peer group. Vendors who appear to be in the correct peer group and consistently have a high number of transactions over the NTE amount, will be evaluated for competitive price using the CPSC Worksheet.
b. The methods used to identify potential vendor overcharges are:

☐ Comparison of vendor’s redemption prices to charged prices (via receipt).
☒ Other (specify): Vendors will be monitored through the AL EBT Vendor Over NTE Report and can be reviewed daily by vendor staff. Vendors who consistently have transactions over the NTE amount will be evaluated to determine if they are in the correct peer group. Vendors who appear to be in the correct peer group and consistently have a high number of transactions over the NTE amount, will be evaluated for competitive price using the CPSC Worksheet.

c. To receive payment or justify and correct a claim for a price adjustment or vendor overcharge, the vendor must: (Check all that apply)

☐ Provide an updated price list
☒ Provide written justification for the higher prices
☐ Provide receipts
☐ Other (specify): 

d. What action(s) is/are taken when a potential vendor overcharge is identified? (Check all that apply)

☐ Routine monitoring or remedial vendor training is conducted
☒ Vendor is designated as high-risk and scheduled for compliance investigation
☒ Vendor is provided with a written warning of potential sanction for overcharging □ Other (specify): If a vendor no longer meets the competitive price requirement, the vendor will be asked to lower their prices. If the overcharging continues, a compliance investigation will be conducted. If the vendor displays a pattern of overcharging, the vendor will be removed from the WIC Program with a mandatory disqualification for three years. A pattern for compliance investigations is defined as committing the same violation two or more times during a compliance investigation which consists of at least three buys. These guidelines are outlined under the Sanction Schedule in the Alabama WIC Program Vendor Procedure Handbook, the Alabama WIC Administrative Rules, and Alabama WIC Vendor Contract.


E. Manual Food Instruments

☒ DOES NOT APPLY (PROCEED TO NEXT SECTION)

1. Manual FIs Policy

a. Manual FIs are utilized for the following reasons:

☐ New participants
☐ Automated FIs not available
☐ Mutilated automated FIs
☐ Wrong food package on automated FI
☐ Wrong dollar amount on automated FI
☐ Provide for the special needs of the homeless
☐ Food package tailoring
☐ Routine monitoring visits (i.e., educational buys) of vendors/farmers
☐ Compliance buys of vendors/farmers
☐ Special conditions, e.g., disasters
b. The State agency requires the following for completing the manual FI register:

☐ Participant/proxy signature  ☐ Local agency staff initials
☐ Date of FI pick-up  ☐ Other (specify):

C. Manual FIs have a “Not to Exceed Value” of:

☐ Same dollar amount for all manual food instruments $
☐ Variable dollar amount depending on type of prescription on manual FI
☐ Variable dollar amount depending on participant category on manual FI
☐ No limit
☐ Other (specify):

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

2. Manual FI Documentation and Disposition

a. A report containing the serial numbers of manual FIs issued by local agencies is sent to the State agency:

☐ Not applicable  ☐ Weekly  ☐ Monthly
☐ Other (specify):

b. Local agencies are required to provide documentation to substantiate a valid or invalid certification record for manual FIs issued and redeemed but for which no participant record currently exists by utilizing:

☐ Turnaround documents to establish valid certification records
☐ Telephone calls to the State/local agency on irregularities
☐ Other (specify):

(Provide a copy/citation of the State agency’s prescribed procedures if the manual FI inventory cannot be reconciled.)

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

F. Special FI Issuance Accommodations

1. Alternative FI Issuance

a. The State agency has implemented the following FI issuance policy (check all that apply):

☒ All participants are required to pick up FIs at the clinic or local agency, except in unusual circumstances
☒ Participants/proxies are required to show identification at FI card pick up
☐ FIs cards are routinely mailed to participants except (1) when the participant is scheduled for nutrition education (including breastfeeding promotion and support activities) or a certification appointment and (2) in areas where SNAP benefits are not mailed, as these areas are known to have experienced high mail issuance losses
☐ Benefits are provided electronically to a location (such as a grocery store) under certain conditions; thus, participants may not always pick up FIs at the clinics.
2. Mailing Policy/Procedures
   a. The State agency provides local agencies with guidelines/procedures for mailing paper FIs or EBT cards to individual participants:
      ☐ Yes ☒ No
   b. Policy requires participants to pick up paper FIs or EBT cards whenever certification appointment is due or nutrition education (including breastfeeding promotion and support activities) is scheduled:
      ☐ Yes ☒ No
   c. The State agency has implemented the following policy regarding mailing paper FIs or EBT cards (check all that apply):
      ☐ FIs are sent first class mail *(first class is considered regular mail)
      ☐ FIs are sent registered mail
      ☐ FIs are sent certified mail
      ☐ FIs 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): Under normal operating procedures, e-WIC cards are not mailed to participants.
   d. The State agency approves mailing FIs under the following conditions (check all that apply):
      
      | Condition                          | State-Wide | LA with SA Approval | Case by Case |
      |------------------------------------|------------|---------------------|-------------|
      | Participant hardship               | ☐          | ☐                   | ☐           |
      | Travel-related issues              | ☐          | ☐                   | ☐           |
      | Better clinic management           | ☐          | ☐                   | ☐           |
      | Participant safety                 | ☐          | ☐                   | ☐           |
      | Participant convenience            | ☐          | ☐                   | ☐           |
      | Cost effectiveness                 | ☐          | ☐                   | ☐           |
      | Public Health Emergency            | ☒          | ☐                   | ☐           |
      | Other                              | ☐          | ☐                   | ☐           |
      (if other, specify): Under normal operating procedures, e-WIC cards are not mailed to participants.
   e. When mailing paper FIs or EBT cards, documentation of FI issuance is:
      ☐ Signed by the participant at the following FI pick-up/visit
      ☐ Noted "mailed" and initialed/dated by local agency staff
      ☐ Signed and dated by local agency staff after return receipt is received
      ☒ Other (specify): Under normal operating procedures, e-WIC cards are not mailed to participants.

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): Procedure Manual, Chapter 8, Food Benefit Delivery, Section 8.4

3. Participants who receive paper FIs or EBT cards by mail are provided:
   ☐ One month of benefits ☐ Two months of benefits
   ☐ Three months of benefits ☒ Other (specify): Under normal operating procedures, e-WIC cards are not mailed to participants.

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): Procedure Manual, Chapter VIII,
G. Vendor Cost Containment System Certification

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. The State agency that has not yet received FNS certification must submit a request for certification/recertification that contains the following information.

☒ DOES NOT APPLY (PROCEED TO SECTION H)

1. Calculation of competitive price levels
   Describe how the State agency derives (or will derive) competitive price levels for regular vendors that excludes the prices of above-50-percent vendors.

2. Maximum allowable reimbursement levels for regular vendors and above-50-percent vendors
   a. Explain how the State agency ensures that average payments to above-50-percent vendors do not exceed average payments to comparable regular vendors.

   b. The State agency exempts above-50-percent vendors from the calculated competitive price criteria and maximum allowable reimbursement levels.
      ☐ Yes ☐ No If yes, how many vendors will be exempted?
      Are these vendors needed to ensure participant access to supplemental foods?
      ☐ Yes ☐ No

   c. The State agency applies peer-group specific maximum allowable reimbursement levels during the benefit redemption process.
      ☐ Yes ☐ No If yes, describe the procedure or process used:

3. The State agency plans to exempt non-profit above-50-percent vendors from competitive price criteria and maximum allowable reimbursement levels.
   ☐ Yes ☐ No If yes, provide the following information in detail:
   a. Describe the reason the State agency has decided to exempt such vendors (i.e., the benefits to the program) and the number of non-profit vendors to be exempted.

   b. Describe the reason the non-profit above-50-percent vendors are needed to ensure participant access to supplemental foods.

   c. Does the State agency collect shelf prices from non-profit vendors?
      ☐ Yes ☐ No

   d. Describe how the prices of the non-profit vendors compare to those of other vendors in their geographic area that are subject to competitive price criteria and allowable reimbursement levels.

   e. Describe how the State agency establishes the level of reimbursement for the non-profit above-50-percent vendors that it has exempted.
4. The State agency has fully implemented the competitive price criteria and maximum allowable reimbursement methodologies described in items 1 and 2 above.
   ☐ Yes  ☐ No
   If the State agency has not fully implemented the revised competitive price and maximum allowable reimbursement methodologies, describe the current status of this effort and include the timetable for achieving full implementation.

5. The State agency plans to exempt pharmacy vendors from competitive price criteria and maximum allowable reimbursement levels.
   ☐ Yes  ☐ No
   If yes, the State agency has confirmed that these pharmacies provide only exempt infant formula and/or WIC-eligible nutritional foods to program participants.

6. Does the State agency collect shelf prices from pharmacies that provide only exempt infant formula?
   ☐ Yes  ☐ No

7. Complete the table on the following page to demonstrate that the State agency’s procedure for establishing and implementing competitive price criteria and maximum allowable reimbursement levels ensures that average payments per food instrument or food item to above-50-percent vendors do not exceed average payments to regular vendors.

8. Please attach and cite of a copy of the report(s) that the State agency will use to monitor average payments per food instrument to above-50-percent vendors and regular vendors. If the State agency does not have such a report, describe the State agency’s plans to develop and implement a report(s) for monitoring purposes, including the report contents or fields.
**IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL**

*Table 1. Data for WIC Vendor Cost Containment Certification – Overview*

Please provide the following information on the regular vendors and the above-50-percent vendors authorized by the State agency as of June 30th. If data are not available through June 30th, the State agency should enter data for the period for which data are available, replacing “June” with the month to which the data are applicable.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. How many authorized regular vendors did the State agency have as of June 30th? (or month of: )</td>
<td>1.</td>
</tr>
<tr>
<td>2. For all authorized regular vendors, what was the total amount of WIC redemptions paid as of June 30th?</td>
<td>2.</td>
</tr>
<tr>
<td>3. How many above-50-percent vendors did the State agency have as of June 30th?</td>
<td>3.</td>
</tr>
<tr>
<td>▪ Number of WIC-only stores</td>
<td>▪</td>
</tr>
<tr>
<td>▪ Number of other types of above-50-percent vendors (excluding pharmacies)</td>
<td>▪</td>
</tr>
<tr>
<td>b. Above-50-percent pharmacy vendors</td>
<td>b.</td>
</tr>
<tr>
<td>c. Total above-50-percent vendors (sum of a and b)</td>
<td>c.</td>
</tr>
<tr>
<td>4. What was the total amount of redemptions paid to these above-50-percent vendors as of June 30th?</td>
<td>4.</td>
</tr>
<tr>
<td>b. Above-50-percent pharmacy vendors</td>
<td>b.</td>
</tr>
<tr>
<td>c. Total above-50-percent vendors (sum of a and b)</td>
<td>c.</td>
</tr>
<tr>
<td>5. How many peer groups of above-50-percent vendors (either separate peer groups or groups with regular vendors) has the State agency identified?</td>
<td>5.</td>
</tr>
<tr>
<td>6. How many above-50-percent vendors and regular vendors has the State agency authorized that do not meet competitive price criteria, but are needed to ensure participant access to supplemental foods?</td>
<td>6. above-50%: regular vendors:</td>
</tr>
</tbody>
</table>

Supplemental WIC State Plan Guidance section IX.I – Vendor Cost Neutrality Assessment will be issued in the spring.
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

H. Home Food Delivery Systems
   ☒ DOES NOT APPLY (PROCEED TO NEXT SECTION)

1. Home Food Delivery Systems Overview
   a. Home delivery vendors include (check all that apply):
      ☐ Dairies
      ☐ Private delivery service doing WIC business only
      ☐ Private delivery service
      ☐ Other (specify):
   b. Participants who receive home food delivery:
      ☐ Are notified in writing of the types and quantities of foods
      ☐ Are issued FIs that they sign and provide to the vendor when the food is delivered
      ☐ Are delivered not more than a one-month supply of supplemental foods at any one time
      ☐ Indicate by authorized signature on a FI, receipt or signature document, the supplemental foods received
      ☐ Other (specify):
   c. Supplemental foods may be delivered:
      ☐ Only to the participant of record
      ☐ To the participant of record or proxy of record
      ☐ To any adult at home during time of delivery
      ☐ To anyone at home at the time of delivery
      ☐ Other (specify):

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

2. Documentation
   a. The forms verifying delivery are reconciled against vendor invoices:
      ☐ Weekly
      ☐ Monthly reconciliation of the signed FIs or other signed receipts or signature documents from participant or proxies.
      ☐ Other (specify):
   b. Signatures of participants who sign the food receipt document/FIs are compared to the signature on file.
      ☐ No ☐ Yes, sample ☐ Yes 100%

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

I. Direct Distribution Food Delivery Systems
   ☐ DOES NOT APPLY

1. Direct Distribution Food Delivery - General
   a. The State agency uses a direct distribution food delivery system to:
      ☐ Distribute all its WIC Program foods
      ☐ Distribute only exempt infant formula and/or medical foods
      ☒ Distribute (specify): Some special infant formulas/exempt formulas/WIC eligible nutritionals.
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

b. The State agency uses:
   ☐ Warehouse not used
   ☐ One central warehouse, deliveries 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): Shipped directly to the Local WIC clinic from the manufacturer.

c. Warehouses are operated by:
   ☐ State agency       ☐ Local agency
   ☐ Other state or public agency  ☐ Under contract with a private business
   ☐ Other (specify):

d. Warehouses used for storage of WIC foods are also used to store other FNS program commodities (Please specify which commodities):
   ☐ Yes           ☐ No  Specify commodities:

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

2. Food Distribution
   a. Foods are distributed to participants:
      ☐ Grocery store fashion
      ☐ Pre-packaged
      ☒ Other (specify): Shipped directly to the local WIC clinic from the manufacturer for issuance to participants.

   b. Participants receiving food are required to sign:
      ☐ A register once for all foods received
      ☐ A register/form for each food item received
      ☒ Other (specify): WIC formula Log/Issuance Sheet (ADPH-WIC-112)

   c. Foods are distributed to participants:
      ☒ Monthly
      ☐ Not to exceed a one-month supply at any one time to any participant
      ☒ Other (specify): When prescribed by a physician and not available through the local retail market.

   d. Participants with limited access to facilities used for distribution have available to them:

       Services provided by:

       | Local Agency | Other Sources |
       |--------------|--------------|
       | ☐           | ☐            |
       | Home delivery| ☐            |
       | ☐           | ☐            |
       | Cost-free transportation| ☐            |
       | ☐           | ☐            |
       | Other | ☐            |
       | (if other, specify): |

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

3. Warehouse Insurance and Inspections
   a. Insurance for the warehouse covers (check all that apply):
      ☐ Theft       ☐ Fire       ☐ Infestation       ☐ Spoilage
IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

☐ Other (specify):

b. Warehouses are inspected by a public authority responsible for enforcing:
   ☐ Fire safety laws and regulations (specify date and grade of last inspection):
   ☐ Sanitation laws and regulations (specify date and grade of last inspection):
   ☐ Other (specify):

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

4. Monitoring and Inventory Control

Please describe the State agency’s methods for ensuring WIC supplemental foods are under proper inventory control (separation of duties for intake and inventory; stock rotation; performance of perpetual and physical inventory duties; reconciliation against issuance records; etc.).

Special medical formulas not available for purchase at authorized WIC vendors are ordered by the local clinics and submitted to the State Office via Requisition form. The State office places the order with the manufacturer and the order is shipped directly to the requesting clinic via carrier with tracking capabilities. Upon receipt in the clinic, the WIC Coordinator or designated person mail/scans the packing slip or bill of lading to the State WIC Office. The formula is entered into local inventory records, paper and Crossroads computer system; stored in a lockable storage area which remains locked when not in use by clinic staff. Formula is issued according to “first in first out” inventory system. At issuance, parent/proxy signs the Formula Log and/or electronic signature record in Crossroads. A perpetual inventory is kept via Formula Log/Crossroads computer system at issuance and receipt of formula. A monthly physical inventory is conducted by the WIC Coordinator and reconciled with the Formula Log/Crossroads inventory. The Quality Assurance tool includes criteria for physical inventory count of formula and reconciliation with Formula Log/Crossroads during the QA review of the clinic. In addition, the audit of clinics conducted by the Office of Program Integrity also evaluates the security, receipt, and issuance of formula.
Chapter X

Monitoring and Audits
X. MONITORING AND AUDITS

(Please indicate) **State Agency:** Alabama for FY 2023

Monitoring and Audits involves State agency efforts to review local agency/clinic activities on an ongoing and timely basis, and to track all audits involving WIC Program activity.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

A. **Monitoring-246.19(b):** requires State agencies to establish a management evaluation system.

B. **Audits-Subpart F to 2 CFR Part 200, as applicable:** describe State agency audit responsibilities.
X. MONITORING AND AUDITS

A. Monitoring

1. Local Agency/Clinic Monitoring Activity (to be updated each year). Skip this section if the State agency has no local agency(ies)

a. Local agencies/clinics monitored: (If State agency has one local agency, specify the date it was last monitored.

   8 Number of local agencies
   7 Number of local agencies monitored last annual period
   11 Number of clinics monitored last annual period
   8 Number of local agencies to be monitored this current annual period
   13 Number of clinics to be monitored this current annual period

Specify last annual period, from: 10/1/2021 to 9/30/2022 (month/day/year – month/day/year; must be applied consistently)

Specify current annual period, from: 10/1/2022 to 9/30/2023 (month/day/year – month/day/year; must be applied consistently

b. Number of local agencies/clinics required to submit Corrective Action Plans (CAPs) to address deficiencies identified during monitoring last year: 11 (Number)

c. The State agency uses a tracking device, such as a chart or spreadsheet, which summarizes the reviews of all local agencies.

   ☒ Yes   ☐ No

   If the State agency uses a tracking device, it shows (check all that apply):

   ☒ Date of most recent review for each local agency/clinic
   ☒ Number of clinics reviewed in most recent review for each local agency/clinic
   ☐ Listing of findings for most recent review of each local agency/clinic
   ☒ Date of State agency notice of findings in most recent review for each local agency/clinic
   ☒ Date of local agency/clinic corrective action plan in most recent review for each local agency and/or clinics
   ☒ Outcome of corrective action plan
   ☒ Whether the review was conducted virtually or onsite

d. In preparing to conduct a local agency review, the State agency reviews data reports on:

   ☐ No-shows by category
   ☐ Administrative costs claimed
   ☐ Financial reports
   ☐ Priorities served
   ☒ Caseload
   ☐ Racial/ethnicity
   ☒ Staff/participant ratios
   ☐ Participant nutrition surveillance data for participants in that local agency/clinic
X. MONITORING AND AUDITS

☒ Other (specify): Previous Quality Assurance/Office of Program Integrity reviews, Crossroads (MIS) reports

ADDITIONAL DETAIL: Monitoring & Audits Appendix and/or Procedure Manual (citation):  Alabama WIC Procedure Manual, Chapter 15 Quality Assurance

2. Local Agency/Clinic Monitoring Procedures

a. The State agency uses an established protocol when it monitors local agencies/clinics.
   ☒ Yes ☐ No

If yes, please provide the citation of where it can be found in the appendix or procedure manual:  Alabama WIC Procedure Manual, Chapter 15 Quality Assurance

This monitoring protocol includes:

☒ Advance notification of monitoring visit
☒ Determination of timeframes for conducting the review
☒ Designation of local agency/clinic staff to assist State agency staff during review
☐ Discussion of review findings on-site with local agency/clinic
☒ Specified time frame for providing written review report
☒ Specified time frame for local agency/clinic submission of corrective action plan, not to exceed 60 days from receipt of State agency’s report
☒ Instructions or guidance for preparation of corrective action plan (e.g., inclusion of implementation time frames)
☒ Evaluation of adequacy of corrective action
☒ Follow-up with local agency/clinic to ensure corrective action measures are implemented
☒ Written notification of closure of the review
☐ Other (specify):

b. Monitoring of local agencies/clinics is conducted by (check all that apply):

☒ State WIC staff
☒ District or regional staff
☐ Other health programs
☒ Other (specify): Alabama Department of Public Health, Office of Program Integrity

C. Specialists in the following areas monitor the areas of their expertise:

☐ Certification and eligibility determination
☐ Caseload management
☒ Nutrition service
☐ Breastfeeding promotion and support
☐ Targeting and outreach policies
☐ Financial management of administrative funds
☐ Food delivery system
☐ Vendor management
☐ Civil rights
X. MONITORING AND AUDITS

☐ Information Systems security
☐ Other (specify):  Alabama Department of Public Health, Office of Program Integrity
X. MONITORING AND AUDITS

If the State agency uses reviewers to monitor areas in which they do not have expertise and/or prior knowledge, describe how the State agency trains or equips its reviewers to conduct the review:

d. The State agency uses a standard local agency/clinic review form.
   ☒ Yes ☐ No

   If yes, please provide the citation of where it can be found in the appendix or procedure manual: Alabama WIC Procedure Manual, Chapter 15 Quality Assurance, Attachment 15-1 Quality Assurance Tools A-D

If yes, the review form covers the following areas:

☐ An assessment of local agency/clinic management
☐ An assessment of patient flow
☒ Certification case file reviews, including procedures for determining adjunctive income eligibility
☐ Caseload management
☐ Training of local agency and clinic staff
☒ Nutrition education
☐ Breastfeeding promotion and support
☐ Targeting and outreach policies
☐ Financial management of administrative funds
☐ Validation of staff time spent on WIC
☐ Food instrument accountability
☐ Vendor training and monitoring, if these functions are delegated to a local agency/clinic
☒ Civil rights compliance
☐ Other (specify):

If you selected any of the options above, please provide the citation of where it can be found in the appendix or procedure manual and answer the following questions: Alabama WIC Procedure Manual, Chapter 15, Quality Assurance, Attachment 15-1 Quality Assurance Tools A-D

Do these procedures include a monitoring tool?
   ☒ Yes ☐ No

Are all local agencies/clinics required to follow these procedures?
   ☒ Yes ☐ No (specify basis for exemptions):

ADDITIONAL DETAIL: Monitoring & Audits Appendix and/or Procedure Manual (citation): A.2.d. Validation of time spent on WIC: Monitored at State Office. See attachment in Chapter IV Organization and Management - Local Agency Cost Effectiveness Studies
X. MONITORING AND AUDITS

3. Use of Local Agency/Clinic Review Data
   a. The State agency analyzes the results of local agency/clinic monitoring visits to determine whether deficient areas are common among its local agencies/clinics.
      ☒ Yes    ☐ No

   b. The State agency utilizes local agency/clinic review data to (check all that apply):
      ☒ Identify outstanding operational approaches that could be shared with other local agencies/clinic
      ☒ Track individual local agency/clinic performance
      ☐ Compare administrative costs/expenses among local agencies/clinics
      ☐ Compare staffing and organization among local agencies/clinics
      ☒ Other (specify): Determine training needs

      ADDITIONAL DETAIL: Monitoring & Audits Appendix and/or Procedure Manual (citation): Alabama WIC Procedure Manual, Chapter 15 Quality Assurance

B. Audits

Do not include management evaluations or other reviews conducted by FNS regional offices or by WIC State agencies. This section concerns the audits conducted under Subpart F to 2 CFR Part 200 and audits conducted by USDA’s OIG, per 7 CFR 246.20 (a, b).

1. Audits (Federal, State, and Local)
   a. Number of audits conducted during FY-2021: 5.
   b. Entities audited (includes both State and local agencies)  
      Auditor(s)  Period of Audit  Status/disposition of audit at this time (management decision, final action, etc.)
      State of Alabama  State Examiners  of Public Accounts  10/1/2020-9/30/2021 Pending completion and issuance of report as of 7/29/22; WIC was not considered a MAJOR program for testing
      Jefferson County Health Department  Carr, Riggs & Ingram  9/30/2021 Closed; no matters to be reported
      Mobile County Health Department  Smith, Dukes & Buckalew LLP  9/30/2021 Closed; no matters to be reported
      Poarch Band of Creek Indians  REDW, LLC  Year ended 12/31/2020 Closed; no matters to be reported
      Health Services, Inc.  Warren Averett, LLC  Year ended 1/31/2022 Closed; no matters to be reported

If additional audits were conducted, please provide separately.
X. MONITORING AND AUDITS

c. Entities not audited and reason (e.g., local office is not a subrecipient local agency, non-federal entity did not expend $750,000 or more in Federal funds during the fiscal year, etc.)

| Entities not audited (includes both State and local agencies) | Reason Entity Not Audited |

ADDITIONAL DETAIL: Monitoring & Audits Appendix and/or Procedure Manual (citation):

2. Audit Management Decision

a. Methods used by the State agency to ensure that corrective action is taken on audit findings include (check all that apply):
   ☒ State agency has a copy of the corrective action plan on file.
   ☒ State agency tracks audits to determine if the same problems are recurring from year to year.
   ☐ Local agency must file periodic reports.
   ☐ State agency contacts local agency by phone or in writing periodically.
   ☐ State agency visits local agency.
   ☒ Other (specify): N/A: Management decisions were not required as there were no findings related to WIC

b. State agency actions taken to ensure that all claim amounts are recovered include (check all that apply):
   ☒ Local agency files periodic reports.
   ☐ State agency contacts local agency by phone or in writing.
   ☐ State agency monitors receipt of a check in the amount of an audit claim.
   ☐ State agency establishes and employs billing/offsetting of account procedures.
   ☒ Other (specify): N/A: There were no claims recovered during these audits.

c. State agency accounting procedures for claim amounts recovered:
   ☐ Recovered claim amounts from prior fiscal years are returned to FNS.
   ☐ Recovered claim amounts are reallocated if collected within the same fiscal year.
   ☒ Claim amounts are verified with local agency.
   ☒ Other (specify): N/A: There were no claim amounts recovered for these audits

ADDITIONAL DETAIL: Monitoring & Audits Appendix and/or Procedure Manual (citation):
X. MONITORING AND AUDITS

3. Availability of Audit Reports
   a. The State agency receives and maintains for at least three years copies of all organization-wide audits involving the WIC Program and maintains a listing of those audits.
      ☒ Yes  ☐ No, copies are retained by:

   b. Procedures used for maintaining files to reflect the trail from the receipt of the audit to final action include:
      ☐ Detailed breakdown of each audit finding is tracked separately.
      ☐ Individuals are assigned to monitor each audit.
      ☐ One individual is assigned to monitor all audits.
      ☒ Other (specify): Contract Management Branch of FHS/ADPH monitors all audits with final review by OPI.

   c. The State agency maintains a listing of all planned audits for the coming Fiscal Year.
      ☐ Yes  ☒ No
      (Indicate recent FYs which included WIC in the single audit report): FY2013, FY2014, FY2017, FY2020

   d. The State agency ensures WIC participation in the single audit and other audits by (check all that apply):
      ☒ Developing a tracking system that monitors the status of each audit
      ☐ Establishing a contact person for each audit
      ☒ Including this audit requirement in the local agency contract
      ☐ Other (specify):

      ADDITIONAL DETAIL: Monitoring & Audits Appendix and/or Procedure Manual (citation):
Chapter XI

Civil Rights
XI. CIVIL RIGHTS

(Please indicate) **State Agency: Alabama** for FY **2023**

The Civil Rights section of the State Plan should cover the training of State and local staff on issues, rules and regulations related to civil rights, public notification of nondiscrimination requirements, the monitoring of local agencies and clinics for compliance with civil rights regulations and rules, the collection of relevant racial/ethnic information and procedures for handling civil rights complaints.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, “Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation.” was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO.

A. **Administration - 246.4(a)(17):** describe the procedures the State will use to comply with the civil rights requirements described in 246.8, including the processing of discrimination complaints.

B. **Public Notification Requirements and Nondiscrimination Notification - 246.8(a)(1):** describe the policies and procedures used to ensure that public notification regarding nondiscrimination in the WIC Program reaches all participants and potential participants in an appropriate language (246.8(c)) through WIC Program materials.

C. **Compliance Review and Monitoring Activity - 246.8(a)(2):** describe the policies and procedures used to monitor and review local agencies to verify that they are in compliance with civil rights laws and regulations.

D. **Data Collection and Reporting - 246.8(a)(3):** describe the methods used to collect and monitor racial/ethnic data in compliance with title VI of the Civil Rights Act of 1964.

E. **Complaint Handling - 246.4(a)(17):** describe the policies and practices used to ensure civil rights complaints are handled properly at the State and local level.
XI. CIVIL RIGHTS

A. Administration

1. The State agency designates an individual to coordinate, implement, conduct training, and enforce civil rights efforts.

☒ Yes ☐ No

a. The following methods are used to inform and update State and local agency staff of their obligations under civil rights rules, regulations, and instructions:

<table>
<thead>
<tr>
<th>Method</th>
<th>State Agency</th>
<th>Local Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briefing for new employees</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Handouts for new employees</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Memos and updates</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Presentations by civil rights coordinator</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Presentation by staff other than WIC Program</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If other, specify:

b. Civil rights training is provided annually

State agency staff ☒ Yes ☐ No
Local agency staff ☒ Yes ☐ No

c. Civil rights training includes the following:

<table>
<thead>
<tr>
<th>Topic</th>
<th>State Agency</th>
<th>Local Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collection and use of racial/ethnical data</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Effective public notification systems</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Complaint procedures</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Compliance review techniques</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Resolution of noncompliance</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Requirements for reasonable accommodation of persons with disabilities</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Requirements for language assistance</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Conflict resolution</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>Customer Service</td>
<td>☒</td>
<td>☒</td>
</tr>
</tbody>
</table>

If other, specify:

DETAIL: Civil Rights Appendix and/or Procedure Manual (citation): Section 1557 of the Affordable Care Act.

2. The State agency has copies of the following materials on file:

☒ FNS Instruction, 113-1
☒ Title VI (1964), 7 CFR 15
☒ Title IX, Education Amendments, 7 CFR 15a (sex discrimination)
☒ Section 504, Rehabilitation Act of 1973, 7 CFR 15b
XI. CIVIL RIGHTS

☒ Racial/Ethnic data collection policy and reporting requirements
☒ Age Discrimination Act of 1975, 45 CFR Part 91
☒ Americans with Disabilities Act, 28 CFR Part 35
☒ Civil Rights Restoration Act of 1987

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

3. The State agency's policy for reasonable accommodation includes the most up-to-date provisions for individuals with disabilities.
   ☑ Yes ☐ No
   (Refer to FNS Instruction 113-1, Civil Rights Compliance and Enforcement–Nutrition Programs and Activities)

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

B. Public Notification Requirements and Nondiscrimination

1. Public Notification
   a. The State agency requires its local agencies to include the nondiscrimination policy statement and civil rights complaint procedure on the following (check all that apply):
   ☑ Outreach letters to the general public ☑ Radio announcements
   ☑ Program information letters ☑ Publications
   ☑ Program information brochures ☑ Posters
   ☑ Program information bulletins ☑ Newsletters
   ☑ Newspaper announcements ☑ Referral material
   ☑ Internet ☑ Television announcements
   ☐ Letters of invitation in the public hearing process
   ☑ Certification forms to be signed by participants
   ☐ Application forms (including computer-based forms)
   ☐ Other (specify):

   b. The State agency requires that the USDA nondiscrimination poster, "And Justice For All," or an FNS- approved substitute be displayed in the following places frequented by applicants and participants:

   ☑ Clinic waiting rooms
   ☐ Food instrument issuance offices
   ☐ Group/individual nutrition education areas
   ☐ Test kitchens
   ☐ Distribution centers or locations
   ☐ Other (specify):
XI. CIVIL RIGHTS

c. Check the group categories that the State agency and its local agencies publicly inform of the following information (check all that apply; see key below):

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td></td>
<td>☐</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

1 = general public
2 = grassroots/community organizations that deal with potentially eligible low-income individuals
3 = potential eligible individuals/participants

d. The State agency ensures that advocacy/minority organizations and the general public are informed of the benefits/policies listed above (please provide the appropriate Procedure Manual citation of materials used):

☐ Annually  ☒ More frequently

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation): AL WIC Procedure Manual Ch. 10 Civil Rights.

2. Nondiscrimination Notification

a. The State agency or local agency:
   ☒ Provides applicants/participant with key information, such as applications and materials describing eligibility criteria and procedures for delivery of benefits, in appropriate languages other than English in areas where a significant proportion of people with limited English proficiency (LEP) reside.
   ☒ Provide applicants/participants with key information, such as applications and materials describing eligibility criteria and procedures for delivery of benefits using inclusive language.
   ☒ Appropriate bilingual staff, volunteers, or other translation resources are available to serve applicants and participants in areas where a significant proportion of people with limited English proficiency (LEP) reside.
   ☒ All rights and responsibilities listed on the certification form are read to or by the applicants and participants in the appropriate language, or if the participant is sight or hearing impaired and requires assistance.
XI. CIVIL RIGHTS

b. The State agency provides WIC Program materials and translators in the following languages (Check all that apply; M = Materials, VT = Volunteer Translators, PT = Paid Translators, BS = Bilingual Staff):

<table>
<thead>
<tr>
<th></th>
<th>M</th>
<th>VT</th>
<th>PT</th>
<th>BS</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
<tr>
<td>☐</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
<td>☒</td>
</tr>
</tbody>
</table>

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

C. Compliance Review and Monitoring Activity

1. Compliance Review
   a. Civil rights reviews of local agencies are conducted:
      ☒ Separately
      ☐ In conjunction with another department, organization, or service as part of an overall review
      ☐ Other (specify):

b. The State agency reviews all its local agencies for civil rights compliance with the nondiscrimination laws and regulations when it does its reviews.
   ☒ Yes
   ☐ No

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

2. Monitoring Activity
   a. In addition to the local agency reviews, the State agency uses the following means to ensure that local agencies operate in a nondiscriminatory manner:
      ☒ Review of the racial/ethnic enrollment and/or participation data applications
      ☐ Review of waiting lists
      ☐ Other (specify):
      ☐ Review of denied
      ☒ Review of complaints
      ☐ Review of participant surveys
      ☐ Participant interviews
b. The State agency checks for the following in local agency applications:

- ☒ The local agency has corrected all past substantiated civil rights problems or noncompliance situations
- ☒ The Civil Rights Assurance is included in the State-Local Agency Agreement
- ☐ A description of the racial/ethnic makeup of the service area is included in the application
- ☒ The local agency uses inclusive language with developing its program materials
- ☐ Appropriate staff, volunteers, or other translation resources are available in areas where a significant proportion of people with limited English proficiency (LEP) reside


c. The State agency checks for the following in its civil rights reviews of its local agencies:

- ☒ Case records include racial/ethnic data
- ☐ Where applicable, an explanation of why the racial/ethnic WIC participant level is not proportionate to the income eligible racial/ethnic population
- ☐ The local agency has conducted civil rights training for its staff
- ☒ The project area displays the USDA nondiscrimination poster, "And Justice For All," or an FNS-approved substitute
- ☒ Program information has been provided to applicants, participants, and grassroots organizations or similar minority groups
- ☒ The nondiscrimination policy statement and civil rights complaint procedure are included on all printed materials such as applications, pamphlets, forms, or any other materials distributed to the public
- ☒ Racial/ethnic data are collected by actual count and maintained on file for 3 years
- ☒ The local agency has corrected all past substantiated civil rights problems or noncompliance situations
- ☒ Civil rights complaints are handled in accordance with the procedures outlined in FNS Instruction 113-1

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

D. Data Collection and Reporting

1. Data Collection

a. The State agency ensures the following when collecting civil rights data:

- ☒ All racial/ethnic categories are collected and reported as part of the program participant characteristics report
- ☒ Racial/ethnic data definitions are in accordance with current OMB guidance and clinic procedures are in place to ensure the data is collected accurately
- ☒ Data reported on participant characteristics include the number of persons on WIC master lists or persons listed in WIC operating files who are certified to receive benefits
- ☒ Collected racial/ethnic data and records are accessible only to authorized personnel

b. The State agency maintains a civil rights file which retains collected racial/ethnic data for three years.

- ☒ Yes ☐ No
XI. CIVIL RIGHTS

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

2. The State agency instructs its local agencies to obtain a participant’s racial/ethnic category by (check all that apply):
   - ☒ Allowing self-identification by participant (must be used at participant’s request)
   - ☒ Visual identification/sight assessment by local agency staff
   - ☐ Local agency staff personally know participant's racial/ethnic category
   - ☒ Other (specify): ADPH-ENC-400, Information Request Form allows applicants/participants to choose race & ethnicity.

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

E. Complaint Handling

1. The State agency ensures the following:
   - ☒ WIC Program applicants and participants are informed where and how they may file a complaint of discrimination by directing them to the USDA Office of the Assistant Secretary for Civil Rights (OASCR) website (https://www.usda.gov/oascr/how-to-file-a-program-discrimination-complaint) for proper Discrimination Complaint Filing processes.
   - ☒ WIC Program applicants and participants are informed that they can file their complaints directly with the U.S. Department of Agriculture or directly with the FNS HQ Civil Rights Division, their State agency, or their local agency. However, the local/State agency must then forward their complaint either directly to the FNS HQ Civil Rights Division or the U.S. Department of Agriculture.
   - ☒ All local agency staff are trained in discrimination complaint procedures.
   - ☒ All written and verbal complaints alleging discrimination based on race, color, national origin, age, sex, or disability are accepted from applicants and participants by State agency and local agency staff and forwarded to the FNS HQ Civil Rights Division.

   - ☒ Complaints alleging discrimination based on race, color, national origin, or age are forwarded to the FNS HQ Civil Rights Division through an FNS-established complaint procedure. (Regional Office receives copy of all complaints.)

   - ☐ Complaints alleging discrimination based on sex or disability are forwarded to the FNS HQ Civil Rights Division (for those State and local agencies without an FNS-approved grievance procedure in place).

   - ☒ Complaints alleging discrimination based on sex or disability are forwarded to the FNS HQ Civil Rights Division.

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):

2. The State agency uses a discrimination complaint form it has developed for acceptance of a complaint.
   - ☐ Yes  ☒ No

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation): AL WIC Procedure Manual Ch. 10 Civil Rights.

3. The State agency establishes and ensures that local agencies implement specific timeframes concerning discrimination complaints:
XI. CIVIL RIGHTS

☒ An individual has the right to file a complaint within 180 days of the alleged discriminatory action.
☒ All complaints are processed and closed within 90 days of receipt.

ADDITIONAL DETAIL: Civil Rights Appendix and/or Procedure Manual (citation):