

Check Stock

- I. The Utah WIC Program utilizes computer generated food instruments/cash-value vouchers (WIC checks) that are issued at the clinic site. The VISION system check stock comes as an 8 ½ x 11 sheet of security check paper with three blank check templates. There are perforation lines between the first and second, and second and third checks.
- II. Checks are shipped in boxes of 6000 checks. Within each box are five reams of 400 sheets (3 checks per sheet) for a total of 1200 checks per ream.
- III. Blank check stock contains the Utah WIC Program name, address and logo along with the bank address and logo. Blank check stock also comes with a unique preprinted check stock inventory number printed on each check.
- IV. Food instruments printed by the clinic add the Family ID number, name of participant, clinic ID, First Day to Use, Last Day to Use, quantity, and food item description. These checks also contain the check number and the bank account number.
- V. Cash value vouchers printed by the clinic add the Family ID number, name of participant, clinic ID, First Day to Use, Last Day to Use, maximum value, and Fresh Fruits and Vegetables – Invalid for More Than Maximum Value description. These checks also contain the check number and the bank account number.
- VI. The State Agency determines the amount of check stock each clinic needs to maintain an appropriate supply. This is input in VISION as the Replenishment Threshold. Determination will be made by state staff when additional check stock will need to be sent to each clinic.
- VII. The VISION system provides an estimated inventory of remaining blank check stock. The system tracks the quantity of checks printed and adds an extra percentage as a wastage factor. The system's estimated inventory of blank check stock on hand is shown as the "Current Inventory" on the "LA/Clinic FI Stock Inventory, Summary" screen.
 - a. Actual physical inventory counts of blank check stock and inventory adjustments must be done at least monthly in order to provide accurate data to state staff that are monitoring check stock inventories and usage. This manual count will be used to adjust the current inventory in the computer system. This inventory is completed as follows:
 - i. Full reams (1200 checks) and full boxes (6000 checks) must be counted to determine the quantity of blank checks on hand.
 - ii. It is not required to count opened reams of checks that have been loaded into the printer.
 - iii. Add a row to the Inventory Adjustments box.

- iv. If the current inventory shown on the screen is:
 - 1. lower than the actual amount of blank checks counted on hand, a positive adjustment is done to add additional inventory to the system so that the current inventory reflects actual inventory.
 - 2. higher than the actual inventory on hand, a negative (subtraction) adjustment is done to reduce the current inventory in the system. Use a negative (-) symbol in front of the quantity to be reduced.
 - v. In the Explanation box, enter the quantity counted by staff, for future reference.
 - vi. Completing this process correctly will instantly adjust the system's current inventory to reflect true inventory levels as counted. After completing this process, if the current inventory does not reflect what was counted, an error may have occurred in completing the adjustment.
 - b. Inventory adjustments can also be made to account for check stock that is damaged and unusable, and for check stock transferred to small satellite clinics. If an inventory adjustment results in a decrease of inventory, enter a negative sign (-) in front of the number.
 - c. State staff monitor clinic check stock levels remotely. The inventory in the system will only be accurate if monthly physical counts are done. To avoid running out of check stock or to avoid the State sending too much check stock it is imperative that the physical counts be done accurately each month.
- VIII. When clinic inventory levels are near or below the replenishment threshold level, state staff will prepare a shipment of check stock for the clinic. A notification email will be sent to the clinic prior to the order being shipped or delivered.
- a. For small satellite clinics that do not normally receive a shipment of check stock from the state, check stock can be transferred from a parent clinic to the satellite clinic. This will require a negative (-) inventory adjustment from the parent clinic and a positive adjustment into the satellite clinic. The parent clinic may assign a quantity of checks to the satellite clinic depending on the need. Clinic staff that run satellite clinics will be responsible to ensure the satellite clinic always has enough check stock to operate. A replenishment threshold can be set in the satellite clinic to provide a reminder to staff to take additional check stock to the satellite clinic when inventory gets low. The inventory adjustment process is the only process that will add an inventory of checks into a satellite clinic.
- IX. When shipments are received clinic staff must:

- a. Go to the “LA/Clinic FI Stock Inventory” menu tree and open the “Shipment Receiving” screen.
 - b. Click the radio button “Shipped Not Received” Enter the received date and the box quantity received. (If less boxes were received than the quantity shipped call the State WIC Office before entering the quantity received.)
 - c. As a witness that the check stock was received, a second staff member must go to this screen and click the radio button “Received Not Verified” and click the Verify button (do not click edit).
 - d. Once saved, the shipment will be shown when the “Received and Verified” radio button is selected.
 - e. This process should be completed immediately, but must be completed within 7 days of receiving checks.
- X. The safeguarding of blank check stock at the local clinic is essential. Because of the potential loss of dollars with each sheet of checks, it is important that effective security measures be observed. All blank WIC checks must be secured under a double locking system within the clinic such as a locked cabinet within a locked room in the clinic. VISION System MICR printers have a locked drawer in the printer to keep check stock secure. Check stock does not need to be unloaded from the printers nightly if the printers are kept in a secure area.
- XI. The check stock contains a pre-printed check stock inventory number just to the left of the “Pay Exactly” box. This is the large print, black number. This number is specific to each check on the three-check sheet. The inventory number is used by the state for inventory tracking of check stock sent to the clinics. This number is also used by clinic staff to track check stock placed into the printer. The check stock inventory number is not used to identify any redemption data.
- XII. Check stock does not need to be used in any certain order; however, check stock from a previous shipment should be used up before using the new shipment.
- XIII. Clinics with more than one MICR printer must:
 - a. Visibly label each MICR printer with the printer name/number.
 - b. Maintain a Printer Log for each MICR printer in the clinic. When staff loads check stock into the printer, staff will document the date and the first number and the last number of the check stock inventory numbers being loaded into that specific printer.

- i. This log will be used to identify which printer has a problem in the event that checks are being rejected at the bank due to printing problems.
 - ii. Clinic staff should ensure that the Magnetic Ink Character Recognition (MICR) lines on the checks are printed correctly. In case of a MICR line printing error the clinic cannot issue the check and the clinic should immediately contact the State WIC office.
 - iii. If the State Agency identifies that a MICR error has occurred at the bank, the State Agency will contact the clinic that a MICR error has occurred. The clinic will be directed to immediately cease issuing any further new checks until the printer creating the MICR error can be identified. The State Agency will coordinate with the clinic to identify the printer that is causing the problem. Continuation of issuance will be determined by the State Agency.
 - iv. Clinic staff must contact any clients who may have received improperly printed checks and ask them to return any unredeemed checks to the clinic for replacements.
- XIV. WIC clinics must only purchase Troy/HP MICR toner for use in the VISION system Troy/HP MICR printers. Generic or off-brand toner may not be purchased in an effort to save money. Generic toners have been tested and have been found to have a significant failure rate. The use of generic toner will also void the printer warranty.
- XV. When the toner is low, (at 3%) a warning message will appear and the printer will stop printing. The toner must be changed before continuing to print in order to avoid running out of toner.