# VII. CASELOAD MANAGEMENT

(Please indicate) **State Agency: UT** for **FY: 2025**

**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 disasters, emergencies, public health emergencies, or a supply chain disruption, including infant formula recalls, the State agency may request to implement existing and allowable regulatory flexibilities or waivers to support the continuation of Program benefits and services.  Waivers granted under Access to Baby Formula Act of 2022 (codified at 7 CFR 246.4a(30)) or temporary provision(s) authorized by Congress are not permanent amendments to the State Plan; however, State agencies should consider any historical amendments as the result of waivers granted under prior waiver authority to develop policies and procedures for current and future disasters.**

***A.*** [***No-Show Rate***](#_A._No-Show_Rate) ***–*** [***7 CFR 246.4(a)(11)(i)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(11)(i))***:*** describe the procedures used by the State agency to monitor potential and current participants’ utilization of program services.

1. [***Allocation of Caseload***](#_B._Allocation_of) ***–*** [***7 CFR 246.4(a)(5)(i)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(5)(i)) ***and*** [***(13)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(13))***:*** describe how the State agency assigns and manages local agency caseload allocations.
2. [***Caseload Monitoring***](#_Caseload_Monitoring) ***–*** [***7 CFR 246.4(a)(5)(i)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(5)(i))***:*** describe the information and procedures used by the State agency to monitor caseload.
3. [***Benefit Targeting***](#_Benefit_Targeting) ***–*** [***7 CFR 246.4(a)(5)(i)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(5)(i))***;*** [***(6)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(6))***,*** [***(7),***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(7))[***(19)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(19))***,*** [***(20)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(20))***,*** [***(21)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(21))***, and*** [***(22)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(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.
4. [***Outreach Policies and Procedures***](#_E._Outreach_Policies) ***–*** [***7 CFR 246.4(a)(5)(i)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(5)(i))***,***[***(ii);***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(5)(ii))[***(6),***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(6))[***(7)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(7))***,*** [***(19)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(19))***, and*** [***(20)***](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(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.
5. [***Caseload Management Strategies***](#_F._Waiting_List) ***–***  [*7 CFR 246.16(c)(2)(ii),*](https://www.ecfr.gov/current/title-7/part-246#p-246.16(c)(2)(ii)) [*7 CFR 246.4(a)(11)(i)*](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.4(a)(11)(i))*;* [*246.7(f)(1)*](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.7(f)(1))*,*[*(2); 246.7(h)(3)(i):*](https://ecfr.federalregister.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.7(f)(2))describe the policies and procedures used to manage caseload during a funding shortage, lapse in appropriations, or other WIC funding circumstances.

# A. No-Show Rate

### Policies and Procedures for Missed Certification Appointments and Food Instrument/Cash Value Voucher Pick-Up (No-Shows)

* 1. **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

### 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 Click or tap here to enter text.

**ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):** Click or tap here to enter text.

### Monitoring No-Show Rates

* 1. **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

* 1. **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): Click or tap here to enter text.

**ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):** Click or tap here to enter text.

# B. Allocation of Caseload

**DOES NOT APPLY (EXPLAIN WHY AND PROCEED TO NEXT SECTION)**

**Utah’s funding formula is based on historical participation and other variables. Our caseload is based on geography based on the county in which the applicant lives. We don’t have overlapping local agencies in the same county. All applicants are served within the county they reside unless a special exception has been granted on a case by case basis.**

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): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

### Click or tap here to enter text.

1. **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):**

Click or tap here to enter text.

1. **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. Click or tap here to enter text.

### If it appears that during the course of the program year all funds will 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

Other (specify): Click or tap here to enter text.

### 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): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

### Click or tap here to enter text.

1. **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):**

Click or tap here to enter text.

# 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): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

### Click or tap here to enter text.

1. **The State agency uses the following methods to monitor the below task (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): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

Click or tap here to enter text.

1. **Local agency caseload utilization, by any method, is reviewed by the State agency at least:**

Monthly

Quarterly

Other (specify): Click or tap here to enter text.

Not applicable

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

Click or tap here to enter text.

# Benefit Targeting

1. **Development and Monitoring of State Agency Targeting Plans**
   1. **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): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

Click or tap here to enter text.

* 1. **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): Click or tap here to enter text.

### 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

### 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

### 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): Click or tap here to enter text.

### The State agency monitors benefit targeting through (check all that apply):

Automated reports developed by State agency

Manual reports submitted by local agencies

Local agency reviews

Other (specify): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

### Click or tap here to enter text.

# E. Outreach Policies and Procedures

* + 1. **Outreach Policies, Procedures and Materials**
       1. **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): Click or tap here to enter text.

### Availability of Program benefits is publicly announced at least annually via:

**State Agency Local Agency**

Newspapers

Radio

Posters

☐ Letters

Brochures/pamphlets

Television

Social Media (Twitter, Facebook, etc.)

Other (specify): Click or tap here to enter text.

Other (specify):

**c.** **Outreach materials are available in the following languages (check all that apply):**

English

Spanish

Vietnamese

Tribal Language(s)

Other (specify): Click or tap here to enter text.

### 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

Faith-based and community organizations in low-income areas

Shelters for victims of domestic violence

Food Banks

Head Start Centers

Other (specify): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

### Click or tap here to enter text.

**When an ITO State agency operates as both the State and local agency "All" should be checked.**

* + 1. **Accessibility to Special Populations**
       1. **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): Click or tap here to enter text.

### 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): Click or tap here to enter text.

### 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

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): Click or tap here to enter text.

### 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): Click or tap here to enter text.

### The State agency requires [all, some, none] local agencies to implement the following proceedings to facilitate service to homeless families/individuals (check all that apply):

**All Some None**

Provide homeless applicants with a list of shelters/facilities that fulfill WIC

Program requirements

Undertake regular and ongoing outreach to homeless individuals

Routinely monitors facilities serving homeless participants to ensure WIC foods

are not subsumed into communal food service

Implement formal agreement with other service providers to facilitate referrals

of homeless families/individuals

Secure a written statement from the facility attesting to compliance with the

requisite conditions for WIC services in a homeless facility

Establish, to the extent practicable, plans to ensure that the three conditions

in [7 CFR 246.7(m)(1)(i)](https://www.ecfr.gov/current/title-7/subtitle-B/chapter-II/subchapter-A/part-246#p-246.7(m)(1)(i)) regarding homeless facilities are met

Other (specify): Click or tap here to enter text.

### ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):

Click or tap here to enter text.

* + 1. **Unserved Geographical Areas**
       1. **How does the State agency prioritize areas defined as underserved geographic areas in descending order? All counties in Utah are served by a local agency. All but one county in Utah have a WIC clinic. We encourage local agencies to improve the service to areas that may be underserved within the boundaries of their agency.**
       2. **Please list unserved geographic areas or attach a list to appendix:** Click or tap here to enter text.

**No current unserved areas (check if applicable)**

**ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):**

Click or tap here to enter text.

* + 1. **Underserved Geographic Areas**
       1. **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

### 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):

### Click or tap here to enter text.

### 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:

Click or tap here to enter text.

# F. Caseload Management Strategies.

*For FY 2025, Section F. 1 is required. Sections F. 2-5 are optional and allow State agencies to anticipate any potential impacts due to funding shortages or lapse in funding. State agencies should review the below strategies and consider any necessary policy changes, where appropriate*.

1. **Waiting List Management and Procedures**

**a. The State agency has specific policies/procedures for the establishment and maintenance of waiting lists, which are used by all local agencies.**

Yes  No

**b. Waiting list procedures are uniform throughout the State agency.**

Yes  No, but State agency approves all exceptions

No, local variation allowed without State agency approval

### c. The State agency routinely monitors waiting lists.

Yes  No  No, for the current Fiscal Year, the State agency does not have a waiting list.

### d. The State agency requires/allows subprioritization of waiting lists by (check all that apply):

No subprioritization permitted  Income

Nutrition risk  Age

Point system

Special target populations (specify): Click or tap here to enter text.

Other (specify): Click or tap here to enter text.

### e. 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): Click or tap here to enter text.

### f. Waiting lists are maintained:

Manually

Automated system linked to State agency's central system

Automated system, stand alone at some/all local agencies

### g. Telephone requests for placement on the waiting list are accepted.

Yes  No

1. **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): Click or tap here to enter text.

1. **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):

### Click or tap here to enter text.

# Allowable Cost Saving Strategies (Optional)

1. **Does the State agency have policies and procedures to control cost when funding is insufficient relative to projected costs?**

Yes  No

1. **Does the State agency use any of the following policies and procedures? (select all that apply):**

Modified approved food list

Least expensive brands (LEB)

Economical container size and packaging

Other, please specify: Click or tap here to enter text.

1. **During funding shortfalls/to control costs, the State agency requires local agencies to certify participants for the minimum period specified in regulations.** [7 CFR 246.7(g)(1)](https://www.ecfr.gov/current/title-7/part-246#p-246.7(g))

Yes  No

If yes, please describe or attach applicable policies and procedures. Click or tap here to enter text.

1. **During funding shortfalls/to control costs, the State agency requires local agencies to shorten certifications on a case-by-case basis.** [7 CFR 246.7(g)(2](https://www.ecfr.gov/current/title-7/part-246#p-246.7(g)(2)))

Yes  No

If yes, please describe the case-by-case basis scenario or attach applicable policies and procedures. Click or tap here to enter text.

1. **The State agency uses targeted outreach to serve participants most in need to control cost.** [7 CFR 246.4(a)(7)](https://www.ecfr.gov/current/title-7/part-246#p-246.4(a)(7)) and [7 CFR 246.6(f)](https://www.ecfr.gov/current/title-7/part-246#p-246.6(f)).

Yes  No

If yes, please describe the process used to determine which group of participants are most in need or attach applicable policies and procedures. Click or tap here to enter text.

1. **Mid-Certification Benefit Discontinuation During Funding Shortfalls (Optional)**
2. **The State agency has specific policies/procedures for establishing and implementing mid-certification benefit discontinuation due to funding shortfalls, which are used by all local agencies**.

Yes  No

If yes, please describe the process used to determine how mid certification benefits will be discontinued or attach applicable policies and procedures. Click or tap here to enter text.

1. **If a State agency experiences a funding shortfall where it is unable to maintain its current level of participation for the remainder of the fiscal year and has explored all other alternative actions, the State agency will instruct local agencies to begin mid-certification benefit discontinuation by: (Select all that apply)**

Mid-certification disqualification of program participants

Withholding of benefits for program participants

1. **The mid-certification benefit discontinuation action must affect the least possible number of participants and be directed first at those where their nutritional and health status is at least risk. When implementing mid-certification benefit discontinuation due to funding shortfalls, State agencies will select participants by: (Select all that apply)**

Selecting participants in reverse order from the nutritional risk priority system.

Selecting participants who were certified due to possible regression in nutritional status, especially if original eligibility was based on a lower priority condition.

Selecting participants who have only one month left in their certification periods.

Selecting participants at higher income ranges.

Other: specify: Click or tap here to enter text.

1. **Prior to implementing mid-certification benefit discontinuation due to funding shortfalls, the State agency will notify FNS.**

Yes  No

1. **Prior to implementing mid-certification benefit discontinuation due to funding shortfalls, the State agency will provide FNS the following information:**

A summary description of the alternative policies and procedures explored or used prior to implementing any adverse action.

An explanation of how the planned action is intended to meet the criteria of affecting the least number of people and also the lowest priority persons to bring caseload in line with available resources.

Other: specify: Click or tap here to enter text.

1. **During funding shortfalls, the State agency authorizes local agencies to disqualify participants in the middle of a certification period for failure to pick up food instruments. (Optional)**

Yes  No  N/A, the State agency already authorizes local agency to disqualify participants for

failure to pick up food instruments/CVV during normal operations.

If yes, please indicate the number of months before a participant is disqualified or attach applicable policies and procedures. 2 Months

1. Competitive Vendor Selection Strategies. **(Optional)**
2. **During funding shortfalls/to control costs, does the State agency have procedures to adjust their vendor cost containment policies, including their competitive price selection criteria and/or maximum allowable reimbursement levels?**

Yes  No

1. **During funding shortfalls/to control costs, does the State agency have procedures to adjust their vendor authorization policies (outside of cost containment), including application periods, selection criteria, and limiting criteria?**

Yes  No

1. **If the State agency answered “yes” to either a or b: During funding shortfalls/To control costs, does the State agency reassesses vendors using the updated vendor authorization policies and selection criteria, including cost containment?**

Yes  No

1. **During funding shortfalls/to control costs, does the State agency have procedures to assess the effectiveness of their above-50-percent vendor population to ensure continued oversight of cost neutrality assessment?**

Yes  No