Card Inventory

I. The Utah WIC Program utilizes eWIC Smart Cards (Chip and PIN) that are issued at the clinic site.

II. Cards come packaged with 50 cards in a pack (plastic wrapped); 300 cards in a tray (6 packs per tray); and 3000 cards in a box (10 trays).

III. Clinic staff count physical card inventory monthly and compare to VISION to ensure card supply on hand is accurate and adequate.

IV. Card ordering:

a. The system adds an alert when the clinic's card inventory drops below the replenishment threshold set by the state, Clinic staff place an order for more cards in VISION when they drop below the replenishment threshold.
    i. Enough cards should be ordered to last at least three (3) months but not longer than one year.
    ii. Cards are supplied in increments of 50 cards.

b. The State WIC Office staff monitors VISION alerts for orders placed and ships cards from the State Office.

c. Cards will be shipped to clinics via FedEx or other type of service where the cards can be tracked. Cards may also be hand delivered to clinics by state or local WIC staff.

d. State staff email designated clinic staff to notify them when cards are shipped.

V. Receiving Card Shipments.

a. One staff member (office specialist or supervisor) will enter the cards in VISION as <u>received</u>. A second staff member (clinic supervisor) will <u>verify</u> the cards received in VISION, ensuring that the correct number of cards was received.
    i. If not all cards were physically received or if some were damaged, contact the state for instructions before making any entry.

b. State staff review VISION weekly to ensure that shipped cards are received and verified by local clinic staff.

VI. All eWIC cards (new, damaged, and returned) are to be secured with a double locked system such as: a safe, locked drawer, file cabinet, or storage cabinet in a

locked room or closet. (This locked location is referred to as the “vault”). The exterior door of the clinic cannot be considered the 2nd lock.

VII. Checking out cards:

a. Cards pulled out of the vault for assignment to staff will need to be recorded in VISION by checking out the cards to the staff member who will be issuing the cards. Only one pack (50 cards) is checked out to a staff member at one time.

b. The cards checked out to staff for issuance shall be kept in a locked drawer or place where they are neither visible nor accessible by participants or other individuals who should not have access.

c. The card check out process in VISION requires the staff member receiving the cards to check them out, and a second staff person to verify the check out. This is normally done by the supervisor or person assigned to manage card inventory.

d. The cards can remain checked out until they are all issued.

e. Cards should be issued to participants in sequential order.

VIII. Checking in cards:

a. All cards that have been checked out must eventually be checked back in.

b. Even if a pack of cards have all been issued to participants, the check in process is still required. The “No PANs To Check In” check box selection indicates that there were no PANs to check back into the vault.

c. If a staff member will no longer be issuing the remaining cards that were checked out to them, the cards need to be checked back into the vault/inventory by recording them as checked in in VISION. These cards need to be placed back into the vault for future use.

IX. Cards in the vault need to be physically counted by WIC staff monthly to make sure the vault count matches the count in VISION.

a. It is the responsibility of the clinic supervisor to ensure that the counts are correct so that all cards are accounted for.

X. Cards that have been assigned to families and are subsequently returned (i.e. damaged or the family is no longer on WIC) shall be hot carded and documented

in the VISION Vault Outside Cards screen. All cards shall be destroyed in the clinic after documentation.

XI. Local agencies should not hold onto participant's cards for extended periods for reasons other than for troubleshooting.

XII. WIC staff should never know a participant's PIN. If card problems necessitate holding a participant's card at the WIC Office for troubleshooting, use the Reset PIN tool to assign an alternate PIN for staff use. When the participant comes to retrieve the card, a PIN change must be done.

XIII. Participants that are transferring in from out of state should surrender their old EBT cards from their former state which will need to be destroyed.

XIV. Each Local Vendor Coordinator should have a training card (white) that they can use to test UPC's or help grocery store staff with training. Since this card is a training card, it does not need to be locked with the rest of the clinic card inventory.

a. Training cards are of a different sequence so they will need to be added to the state inventory and be shipped and received separately.

b. These cards should only be used with Investigator Families.