Card Inventory

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

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

III. Card ordering:

   a. Clinic staff place an order for more cards in VISION when they drop below the replenishment threshold set by the state in VISION.
       i.   Enough cards should be ordered to last at least three (3) months but not longer than (6) months.
       ii. Cards are supplied in increments of 50 cards.

   b. 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.

IV.   Receiving card Shipments.

   a. One staff member (office specialist or supervisor) will enter the cards in VISION as received. A second staff member (clinic supervisor) will verify the cards received in VISION, ensuring that the correct number of cards was received.

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

V.   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.

   VI.   Cards pulled out of the vault for the day will need to be recorded in VISION.

       a. The cards 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.

VII. At the end of each business day:

       a. Cards not used will need to be added back into the vault/inventory by recording them in VISION.

       b. Cards (new, damaged, and returned) need to be physically counted by WIC staff to make sure the vault count matches the count in VISION.
          i. Damaged cards need to be logged in VISION.
          ii. It is the responsibility of the clinic supervisor to ensure that the counts are correct.

VIII. At the end of each month:

       a. Damaged or returned cards shall be sent to the State WIC Office with a print screen of the VISION Vault Outside Cards screen within the first five business days of the following month.

       b. All cards that are being sent back to the State Office should be hot carded.

       c. State Office staff will review the returned cards and the VISION screen shot and notify the local agency by email that the cards can be removed from VISION.

IX. Local agencies should not hold onto participant's cards for extended periods for reasons other than trouble shooting.

X. 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 Forgotten PIN Unlock feature to assign an alternate PIN for staff use. When the participant comes to retrieve the card, a PIN change must be done.

XI. Transferring in participants must surrender any unused food instruments or EBT cards which will need to be logged and kept in the vault until they are sent to the State Office to be destroyed.

XII. Each Local Vendor Coordinator should have a training card 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.