

Farm Direct # _____
 Contract End Date _____

Montana WIC Program Farm Direct Agreement 2018

Farmer Name (First & Last) – please print		Telephone Number:	
Physical Address:		Fax Number:	
Mailing Address:		County:	
City:		Zip Code:	
Farm/Corporation Name:			
Tax ID Number:	OR	Social Security Number:	
E-mail:			

The Montana Department of Public Health and Human Services (hereinafter referred to as the “Department”) and the Farmer now enter into Agreement for the Farmer to participate in the Montana WIC Farm Direct Program to provide locally grown, eligible fresh fruits and vegetables to the recipients of the Montana WIC Farmers Market Nutrition Program Benefits (hereinafter referred to as FMNP benefits) under the regulations published by the United States Department of Agriculture.

Therefore, it is mutually agreed between the Department and the Farmer, that the Farmer agrees to comply with all rules and procedures as outlined in the Montana WIC Farm Direct Handbook, of which the Farmer has received a copy.

This Agreement will begin February 1, 2018, or upon signature of all parties, whichever occurs later, and will end January 31, 2021, subject to the following terms and conditions:

I. Farmer’s Responsibilities:

- A. Attend face-to-face training for the first year of the Farm Direct Agreement on Farm Direct procedures; provide training to and be accountable for the actions of employees in the provision of fresh fruits and vegetables, redemption of FMNP benefits, and submission of FMNP benefits for payment as outlined in the Farm Direct Handbook.
- B. Receive annual training on Farm Direct procedures for every subsequent year of the Farm Direct Agreement.
- C. At least sixty (60) percent of all produce for sale must be grown by the Farmer, and all WIC-eligible produce must be locally grown. The Farmer will clearly identify and separate produce which is not eligible to be paid for with FMNP benefits.
- D. Provide authorized fresh fruits and vegetables to participants or proxies at the same price or less than is charged to other customers. Keep a copy of approved food list at point of sale.
- E. Do not sell any unauthorized food items, as specified on the Farm Direct Authorized Food List.
- F. Clearly mark or post current prices, including sale prices, either on the eligible fresh fruits, and vegetables or on a sign immediately next to or in front of the items.

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- G. Do not accept FMNP benefits before the agreement has been fully executed, signed by the Farmer and the Department, and a Farm Direct ID stamp has been assigned. Stamps will not be assigned until after training has been completed.
- H. Prominently post or display the Montana WIC Program Farm Direct sign at the point of sale.
- I. Accept FMNP benefits as payment for eligible foods only if presented on or after the first valid date of use and on or before the last date of use printed on the benefit.
- J. Comply with the redemption procedures regarding FMNP benefit transactions as detailed in the Farm Direct Handbook, which includes ensuring the WIC customer's signature is placed on the benefit after the purchase date and amount of the purchase is entered.
- K. Stamp each transacted FMNP benefit with the authorized Farm Direct ID number prior to deposit and submit benefits for payment on or before the deposit date printed on the face of the benefit.
- L. Offer WIC participants and proxies the same courtesies extended to other customers.
- M. Farmers may not contact a WIC participant or proxy in an attempt to recover funds for a FMNP benefit not reimbursed or for which overcharges were requested.
- N. No cash may be exchanged and no change may be given for purchases made with FMNP benefits.
- O. FMNP benefits may not be traded for cash.
- P. Sales tax or fees, either state or local, may not be charged to FMNP benefit transactions.
- Q. Rain checks may not be exchanged for FMNP benefits.
- R. Agree to provide information to the Montana FMNP Program and/or the Food and Nutrition Service (FNS), if available.
- S. Agree to be monitored for compliance with the Farm Direct requirements. This can include overt and covert compliance buys as part of the monitoring process.
- T. Pay the State agency for any FMNP benefits transacted in violation of this agreement.
- U. Operate under WIC Federal Regulations as outlined in CFR 248.7 and CFR 246.1. (A copy is available at <http://wic.mt.gov> Farm Direct page.)
- V. The Farmer agrees to comply with civil rights requirements as stated in 7 CFR 248.10(a)(6) and 248.7(a): Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Department of Agriculture Regulation on nondiscrimination (7 CFR parts 15, 15a and 15b), and to ensure that no person shall on the grounds of race, color, national origin, age, sex, or disability, be excluded from participating.
- W. Notify the Local WIC Agency if he/she ceases to participate in the Farm Direct Program.
- X. Agree that the Farm Direct Program may choose not to renew this agreement if the Farmer has less than \$60.00 worth of FMNP redemption, on average, during their contract period.

II. Montana WIC Program State Agency Responsibilities:

- A. Ensure payment of any FMNP benefits submitted by the Farmer in a timely manner, if the Farmer meets all FMNP benefit redemption and submission requirements.
- B. Deny payment or seek restitution if the Farmer improperly redeems the FMNP benefit.
- C. Disqualify the Farmer in accordance with the abuse and sanction policy as set forth in the 2018 Montana WIC Farm Direct Handbook hereby made a part of this Agreement as if fully rewritten herein.

III. Montana WIC Program Local WIC Agency Responsibilities:

- A. Act as a liaison for the Montana WIC Program.
- B. Provide training to the Farmer on all required Farm Direct procedures.
- C. Monitor the Farmer for compliance with Farm Direct procedures at the request of the State WIC Office.
- D. Initially investigate any complaint made by or against the Farmer. Provide information to the State WIC Office for the determination of follow-up to the Farmer or WIC participant.

IV. General Conditions Include:

- A. Neither the Montana WIC Program nor the Farmer has an obligation to renew this Agreement.
- B. The Farmer has the right of appeal to the Department regarding denial of application to participate, imposing of a sanction or denied payment from the WIC Farm Direct Program. Expiration of a contract or agreement and claims action under Section 248.20 of the USDA Regulations are not subject to appeal; suspension or disqualification because of a Supplemental Nutrition Assistance Program (SNAP) suspension or disqualification cannot be appealed.
- C. The Farmer has sixty (60) days from the date of the denial of application, sanctioning or disqualification to request a fair hearing. All requested fair hearings will be conducted by Montana WIC/FMNP within three weeks of the date the Program receives the request for a hearing. See Fair Hearings section of the Farm Direct Handbook.
- D. This Agreement is not assignable or transferable.
- E. Signing of this Agreement signifies training has been completed and the Farmer, Local WIC Agency and the Montana WIC Program are aware of all responsibilities required to participate in the Montana WIC Farm Direct Program.
- F. The Farmer is accountable for the actions of employees and volunteers in the provision of foods and activities.
- G. The Department may disqualify the Farmer for WIC Farm Direct abuse upon written notification to the Farmer; Farmers who are suspended or disqualified from participation in, or have a civil monetary penalty imposed by the Supplemental Nutrition Assistance Program (SNAP), shall be automatically suspended or disqualified from the WIC Farm Direct Program. Certain suspensions/disqualifications from the WIC Program may result in suspension or disqualification from SNAP.
- H. A Farmer who commits fraud or abuse of the WIC Farm Direct Program is liable to prosecution under applicable federal, state or local laws.

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- I. The Department shall have the right to reimbursement from the Farmer of an amount equal in value to FMNP benefits deposited and paid upon, after the final notice of suspension or disqualification.

- J. In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

This Agreement is not effective until all required information is complete and the Agreement has been signed by both the Farmer and the Department.

Signature of Farmer:	Date:
Montana Department of Public Health & Human Services Representative:	Date:

Todd Harwell, Administrator
Department of Public Health & Human Services
Public Health & Safety Division
1400 Broadway B201
Helena MT 59620-2951
(406) 444-4141

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

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