

Chapter 7

Food Package

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The WIC Food Package is a major benefit of the WIC Program. The purpose of this chapter is to provide policy on what the allowable foods are and how to determine the most appropriate food package prescription to meet the participant's needs. The chapter also provides information on infant formulas and other products allowed through WIC medical documentation requirements.

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Maximum Monthly Allowances of Supplemental Foods

There are seven federally defined WIC food packages, each with maximum quantities of supplemental foods allowed each month. (7CFR 246.10)

■ Food Packages I - VII

- ▶ **I:** Available supplemental foods for infants receiving contract infant formula (IF) ages 0 through 5 months. NC contract formulas are Similac Advance Stage 1 and Similac Soy Isomil.
- ▶ **II:** Available supplemental foods for infants receiving contract infant formula (IF) ages 6 through 11 months
- ▶ **III:** Available supplemental foods for infants, women or children who have medical documentation (qualifying condition) to receive an infant formula (IF) exempt infant formula (EXF) or WIC-eligible nutritionals (referred to as WIC-eligible medical foods/WEMF in Crossroads)
- ▶ **IV:** Available supplemental foods for children 1 through 4 years
- ▶ **V:** Available supplemental foods for a pregnant woman, a pregnant (single or multiple fetuses) woman partially breastfeeding > MMA or a partially breastfeeding woman \leq MMA
- ▶ **VI:** Available supplemental foods for a postpartum non-breastfeeding woman, or a partially breastfeeding woman > MMA (single or multiple infants) up to 6 months postpartum.
- ▶ **VII:** Available supplemental foods for a fully breastfeeding woman or a pregnant woman with two or more fetuses or a pregnant woman partially (mostly) breastfeeding a singleton infant who receives \leq to MMA or a woman who is partially (\leq MMA) breastfeeding multiple infants from the same pregnancy or a pregnant woman fully breastfeeding a singleton infant. *Note: a woman who is fully breastfeeding multiple infants is eligible for 1.5 times the foods available in Food Package VII.*

**Note: When issuing MFI's, any pregnancy package with multiples is associated with the number of fetuses and will print Food Package VII*

■ **Crossroads Descriptions of Food Packages.** Crossroads describes food packages using WIC category, age category and breastfeeding status. The following terms are used throughout this section:

- ▶ **Monthly Maximum Allowance (MMA)** indicates a specific amount of formula that may be provided to an infant in an age category with a breastfeeding status. This is not the same as the Category Max Quantity listed on the Prescribe Food Screen.

- ▶ **WIC Category**
 - Pregnant Woman: means a woman reporting at least one fetus.
 - Breastfeeding Woman: means a woman who is breastfeeding one or more infants at least one time per day
 - Non-Breastfeeding Woman: means a postpartum woman up to six months after termination of pregnancy who is not breastfeeding.
 - Infant: means a person less than one year of age.
 - Child: means a person who has had their first birthday.
- ▶ Age Category:
 - Infant 0 months
 - Infant 1 to 3 months
 - Infant 4 to 5 months
 - Infant 6 to 11 months
 - Child 12 to 23 months
 - Child 2 yr. to 5 yr.
- ▶ **Breastfeeding Status** – applies to both women and infants
 - Fully Breastfeeding – means the dyad is breastfeeding and receiving no formula from WIC
 - Partially Breastfeeding \leq MMA – means the dyad is breastfeeding and is receiving some formula from WIC up to the maximum amount allowed for the partially breastfed infant in an age range
 - Partially Breastfeeding $>$ MMA – means the dyad is breastfeeding and is receiving formula from WIC in a range above the maximum for partially breastfed infants in an age range.
 - Fully Formula Feeding- means the dyad is not breastfeeding and receives the maximum amount of formula allowed for fully formula fed infants in an age range.
- ▶ **Extended Package** – applies to women only
 - Multiple Fetuses – means a woman reports more than one fetus in a pregnancy
 - Multiple Infants – means a woman is fully breastfeeding more than one infant
- ▶ **Reconstituted Fluid Ounces (RFO)** – means the amount of formula that a product will produce at standard dilution.

- ▶ **Full Authorized Nutrition Benefit (FNB):** the minimum amount of formula for a fully formula fed infant. The amount is established at the level for reconstituted liquid concentrate. This is the Category Max Quantity listed on the Prescribe Food page. Note that the Category Max Quantity in Crossroads is not always the MMA. Crossroads will allow any form of Infant Formula (IF) to be prescribed on the Prescribe Food screen.
- **Exempt Infant Formulas (EXF) and WIC-eligible nutritionals** (referred to as WIC-eligible medical foods/WEMF in Crossroads) can be prescribed only after appropriate medical documentation is completed in the system.
- The competent professional authority (CPA) can prescribe any amount of formula up to the MMA for that feeding option depending on the form of product (powder, concentrate or ready-to-feed).
 - ▶ Example:
 - Category Max Quantity for Similac Advance Stage 1 is listed at 806 oz.
 - CPA prescribes maximum amount of 806 oz. for a fully formula fed 2-month-old infant.
 - Food instruments print for 9 total cans of formula.
 - Each can reconstitutes to 90 ounces.
 - Total RFO = $9 \times 90 = 810$.
 - Crossroads will issue at least the FNB up to the MMA.
 - ▶ Ready-to-feed (RTF) formula may only be prescribed under certain circumstances. See Chapter 7, Section 3 for specific information.
- **Note:** There is no range in the amount of formula available in Food Package III to women and children. There is only one value of 910 RFO. This is the MMA. What is issued is the greatest RFO of a product without going over the MMA.
 - ▶ Example:
 - A 2-year-old has Medical Documentation of a qualifying condition to issue PediaSure 4 containers per day.
 - Each container is 8 oz.
 - $4 \text{ containers/day} \times 8 \text{ oz.} = 32 \text{ oz./day}$
 - $32 \text{ oz. /day} \times 30 \text{ days per month} = 960 \text{ oz.}$
 - WIC maximum = 910 oz.
 - CPA prescribes 910 oz.
 - Food instruments print for 113 containers
 - $113 \text{ containers} \times 8 \text{ oz. /container} = 904 \text{ oz.}$
 - 904 oz. is the maximum that can be provided for that product
 - One more container would put the issuance at 912 oz. which is over the maximum allowed.

■ Maximum Monthly Quantities of Supplemental Foods

In most instances the default amounts initially displayed on the Prescribe Food screen is the maximum quantity allowed per food category. The exception is the partially breastfed infant. The quantity of formula must be prescribed with intention.

■ Infants ages 6 – 11 months on Food Package III

Infants ages 6 – 11 months on Food Package III on contract infant formula (IF), exempt infant formula (EXF) or WIC-eligible nutritionals (referred to as WIC-eligible medical foods/WEMF in Crossroads) may receive formula at the amounts of an infant age 4 – 5 months if no infant foods (infant cereal and infant fruits and vegetables) are provided.

■ Fully Breastfeeding Woman with Multiples – Food Package VII+

The food package for the woman fully breastfeeding multiple infants is equal to 1.5 times the food items in Food Package VII. The provision of some of the foods is not possible monthly due to approved foods sizes; therefore, food amounts are alternated every other month. For example, only 16-ounce size is approved for cheese, but 24 ounces is allowed monthly in the standard (default) food package. Cheese will appear on food instruments as 1 pound one month and 2 pounds the following month. This distribution allows for the maximum provision in purchasable sizes. Food package III for a fully breastfeeding woman of multiple infants includes all the foods listed above plus up to 1365 RFO of a prescribed WIC-eligible nutritional (referred to as WIC-eligible medical food/WEMF in Crossroads).

■ Participants Who Need Formula And Other Products In Excess Of Amounts Allowed Through WIC

The amounts outlined earlier in this section are the maximum amounts available for distribution through the WIC Program. For participants requiring excess amounts of formula not provided by WIC, alternative options may be available for those on Medicaid. Staff is encouraged to assist participant families in obtaining the approval for additional product through Medicaid. Additional information is available at www.nutritionnc.com under Local Agency Resources.

Information about assistance provided to the family should be documented in the participant care plan in Crossroads.

WIC Supplemental Foods

Federal regulations define the minimum criteria for determining WIC supplemental foods with each State Agency having the ability to further define the selection criteria. The table below outlines the criteria that North Carolina uses to determine approved foods and not approved foods. Specific food choices in some food categories are outlined at www.nutritionnc.com. Also refer to the most current “NC WIC Program Shopping Guide” used by participants and the “North Carolina WIC Vendor Transaction Guide” used by vendors. These guides may be ordered from the Nutrition Services Branch.

Table of Contents	
▪ Milk and Milk Substitutes: Cow’s Milk, Cheese, Soy-based beverages, Tofu and Yogurt	Pages 7 - 8
▪ Juice: Concentrate and Single Strength	Page 8
▪ Whole Grain Products Cereal, Bread, Brown Rice, Tortillas (Soft Corn, Whole Wheat) and Whole Wheat Pasta	Page 9
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Cow’s Milk: Size and type as listed on food instrument	
Approved <ul style="list-style-type: none"> ▪ 1 gallon, ½ gallon and 1 quart fresh fluid milk ▪ ½ gallon lactose-reduced or lactose-free milk ▪ 1 quart Ultra High Temperature (UHT) milk ▪ 12 oz. canned evaporated milk ▪ Skim, 1%, 2% and whole pasteurized milk ▪ Least expensive brand available 	Not Approved <ul style="list-style-type: none"> ▪ Buttermilk ▪ Chocolate or other flavored milk ▪ Goat’s milk ▪ Milk drinks ▪ Organic milk ▪ Powdered milk

Cheese: Size and type as listed on food instrument	
Approved <ul style="list-style-type: none"> ▪ 16 oz. prepackaged block or sliced (wrapped or unwrapped) ▪ Least expensive domestic brand available of any of the following types of cheese or blends of any of these cheeses: <ul style="list-style-type: none"> ○ Brick ○ Cheddar ○ Colby ○ Monterey Jack ○ Mozzarella ○ Muenster ○ Pasteurized processed American ○ Provolone ○ Swiss ▪ Lower-sodium varieties ▪ Reduced-fat and reduced-cholesterol varieties 	Not Approved <ul style="list-style-type: none"> ▪ Cheese foods ▪ Cheese products ▪ Cheese spreads ▪ Cheese with additions such as wine, nuts, seeds, jalapenos, pimentos, herbs, spices, seasonings or flavorings (wine or smoked) ▪ Deli or hoop cheese ▪ Organic cheese ▪ Snack, cubed, shaped, crumbled, strips, sticks, diced, grated or shredded cheese ▪ String cheese

Soy-based Beverage: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.	
Approved <ul style="list-style-type: none"> ▪ 64 oz. container 	Not Approved <ul style="list-style-type: none"> ▪ Flavored soy-based beverage ▪ Soy-based beverages with artificial sweeteners ▪ Soy-based beverages with added DHA/ARA and/or omega-3 fats ▪ Organic soy-based beverage

Tofu: Must be an approved brand. Refer to www.nutritionnc.com for specified list of foods.	
Approved <ul style="list-style-type: none"> ▪ 14 oz. - 16 oz. prepackaged ▪ Calcium-set tofu prepared with calcium salts 	Not Approved <ul style="list-style-type: none"> ▪ Tofu with added fats, sugars, oils or sodium ▪ Tofu with artificial sweeteners ▪ Tofu with added DHA/ARA and/or omega-3 fats ▪ Organic tofu

Yogurt: Must be an approved brand. Refer to www.nutritionnc.com for specified list of foods	
Approved <ul style="list-style-type: none"> ▪ 1 quart (32 oz.) ▪ Pasteurized 	Not Approved <ul style="list-style-type: none"> ▪ Yogurts sold with accompanying mix-in ingredients such as granola, candy pieces, honey, nuts and similar ingredients ▪ Drinkable yogurts ▪ Organic yogurt

Concentrate Juice: Must be an approved brand. Refer to www.nutritionnc.com for specified list of foods.	
Approved <ul style="list-style-type: none"> ▪ 11.5 oz. – 12 oz. containers ▪ 100% juice, unsweetened, pasteurized ▪ Frozen or shelf stable concentrate Juices fortified with calcium, vitamin D or vitamin C	Not Approved <ul style="list-style-type: none"> ▪ Concentrate products with guidance for diluting to less than single strength ▪ Juice drinks or cocktails ▪ Juices promoted for use by infants ▪ Juices with added nutrients/additives other than calcium, vitamin D or vitamin C ▪ Organic juice ▪ Sports drinks

Single Strength Juice: Must be an approved brand and size specified on the food instrument. Refer to www.nutritionnc.com for specific list of foods.	
Approved <ul style="list-style-type: none"> ▪ 48 oz. and 64 oz. containers ▪ 100% juice, unsweetened, pasteurized ▪ Juices fortified with calcium, vitamin D or vitamin C ▪ Vegetable juice may be regular or low sodium Packaged in plastic, glass, cans or refrigerated paper cartons	Not Approved <ul style="list-style-type: none"> ▪ Freshly squeezed juices ▪ Juice drinks or cocktails ▪ Juices promoted for use by infants ▪ Juices with added nutrients/additives other than calcium, vitamin D or vitamin C ▪ Organic juice ▪ Sports drinks

Cereal: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.	
Approved <ul style="list-style-type: none"> ▪ 12 oz. or larger size box or bag ▪ At least 28 mg iron per 100 g dry cereal ▪ Less than or equal to 6 gm. Sugar per dry oz. cereal ▪ Includes whole grain as the primary ingredient by weight AND meets labeling requirements for making a health claim as a “whole-grain food with moderate fat content” 	Not Approved <ul style="list-style-type: none"> ▪ Single serving packets ▪ Cereals with artificial sweeteners ▪ Cereals with added DHA/ARA and/or omega-3 fats ▪ Organic cereals

Bread: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.	
Approved <ul style="list-style-type: none"> ▪ 16 oz. loaf ▪ 100% whole-grain and/or whole-wheat bread 	Not Approved <ul style="list-style-type: none"> ▪ Bagels, buns or rolls ▪ Bread with artificial sweeteners ▪ Bread with added DHA/ARA and/or omega-3 fats ▪ Organic bread

Brown Rice: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.	
Approved <ul style="list-style-type: none"> ▪ 14 oz. -16 oz. bag or box ▪ Plain, whole-grain brown rice ▪ Instant, quick or regular cooking 	Not Approved <ul style="list-style-type: none"> ▪ Mixtures of rice ▪ Seasoned or flavored rice ▪ Brown rice with added sugar, fats, oils or salt (sodium) ▪ Brown rice with artificial sweeteners ▪ Brown rice with added DHA/ARA and/or omega-3 fats ▪ Organic brown rice

Tortillas: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.	
Approved <ul style="list-style-type: none"> ▪ 16 oz. package ▪ Soft corn (yellow or white) tortillas ▪ Whole wheat tortillas 	Not Approved <ul style="list-style-type: none"> ▪ Hard-shelled corn tortillas ▪ Tortillas with artificial sweeteners ▪ Tortillas with added DHA/ARA and/or omega-3 fats ▪ Organic tortillas

Whole Wheat Pasta: Must be an approved brand. Refer to www.nutritionnc.com for specified list of foods.	
Approved <ul style="list-style-type: none"> ▪ 16 oz. package ▪ 100% whole-grain and/or whole-wheat pasta ▪ All shapes 	Not Approved <ul style="list-style-type: none"> ▪ Added sugars, fats, oils or salt (i.e., sodium) ▪ Organic pasta

Peanut Butter: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.	
<p>Approved</p> <ul style="list-style-type: none"> ▪ 16 oz. – 18 oz. containers ▪ Less-sugar varieties ▪ Lower-sodium, sodium-free or salt-free varieties ▪ Plain, creamy, crunchy or chunky ▪ Reduced-fat varieties ▪ Natural varieties 	<p>Not Approved</p> <ul style="list-style-type: none"> ▪ Freshly ground peanut butter ▪ Peanut butter combinations (such as jelly, chocolate, marshmallow) ▪ Peanut butter spread ▪ Peanut butter with artificial sweeteners ▪ Peanut butter with added DHA/ARA and/or omega-3 fats ▪ Organic peanut butter

Mature Legumes (Beans, Peas, Lentils): Size and type as listed on food instrument	
<p>Approved</p> <ul style="list-style-type: none"> ▪ 16 oz. bag or box ▪ 15 oz. - 16 oz. cans <p>DRY BEANS, PEAS, LENTILS</p> <ul style="list-style-type: none"> ▪ Any type of plain, unseasoned mature dry beans, peas or lentils <p>CANNED BEANS, PEAS, LENTILS</p> <ul style="list-style-type: none"> ▪ Any type of plain, unseasoned mature canned beans, peas or lentils ▪ Low-sodium mature canned beans, peas or lentils 	<p>Not Approved</p> <ul style="list-style-type: none"> ▪ Canned beans with meat or added sugars, fat or oils ▪ Frozen mature legumes (beans, peas or lentils) <ul style="list-style-type: none"> ○ May obtain with cash-value vouchers – not allowed with food instruments ▪ Green beans or green peas (canned, fresh or frozen) <ul style="list-style-type: none"> ○ May obtain with cash-value vouchers – not allowed with food instruments ▪ Organic dry beans, peas or lentils ▪ Soup mixes

Eggs: Size and type as listed on food instrument	
<p>Approved</p> <ul style="list-style-type: none"> ▪ One dozen container ▪ Least expensive brand available ▪ Large, white, grade A chicken eggs 	<p>Not Approved</p> <ul style="list-style-type: none"> ▪ Brown eggs ▪ Powdered, liquid or hard boiled eggs ▪ Specialty eggs such as low-cholesterol, cage-free, stress-free, free-range, vitamin-enriched, antibiotic-free, vegetarian-fed-hen, no-growth-hormones, fertile or organic eggs

Fish: Size and type as listed on food instrument	
<p>Approved</p> <ul style="list-style-type: none"> ▪ 5 oz.- 6 oz. cans or foil packs ▪ Pink Salmon: Any brand, plain unseasoned packed in water and with or without bones ▪ Chunk-Light Tuna: Any brand, plain unseasoned packed in water 	<p>Not Approved</p> <ul style="list-style-type: none"> ▪ Fish with added ingredients ▪ Lunch packs or kits

Formulas or Nutritional Products

Approved

- Only the brand, size, type and quantity specified on the food instrument

Infant Cereal: Must be an approved brand. Refer to www.nutritionnc.com for specified list of foods

Approved

- 8 oz. box
- Plain, dry infant cereal

Not Approved

- Infant cereal with added fruit or formula
- Infant cereal with artificial sweeteners
- Infant cereal with added DHA/ARA, omega-3 fats, prebiotics and/or probiotics
- Organic infant cereal

Infant Meats: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.

Approved

- 2.5 oz. containers
- Plain meat with gravy or with broth

Not Approved

- Meat and pasta mixtures
- Meat and vegetable mixtures
- Infant meats with added sugars or salt (sodium)
- Infant meats with added DHA/ARA, omega-3 fats, prebiotics and/or probiotics
- Organic infant meats

Infant Fruits: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.

Approved

- 3.5 oz. - 4 oz. container
- Single fruit or blend of fruits

Not Approved

- Infant fruit and vegetable mixtures
- Infant fruits with added sugar, starches or salt (sodium)
- Infant fruits with artificial sweeteners
- Infant fruits with added DHA/ARA, omega-3 fats, prebiotics and/or probiotics
- Organic infant fruits

Infant Vegetables: Must be an approved brand. Refer to www.nutritionnc.com for specific list of foods.

Approved

- 3.5 oz. - 4 oz. container
- Single vegetable or blend of vegetables

Not Approved

- Infant vegetable and fruit mixtures
- Infant vegetables with added sugar, starches or salt (sodium)
- Infant vegetables with added DHA/ARA, omega-3 fats, prebiotics and/or probiotics
- Organic infant vegetables

Cash-value Vouchers: Fruits and Vegetables

Approved	Not Approved
<p>FRUITS with no added sugar, fats, oils or salt</p> <ul style="list-style-type: none"> ▪ Fresh fruit ▪ Frozen fruit ▪ Fruit, juice-packed or water-packed in cans, glass or plastic containers ▪ Organic fruit ▪ Pre-cut, diced or sliced fruit ▪ Single serving packets <p>VEGETABLES with no added sugar, fats or oils</p> <ul style="list-style-type: none"> ▪ Fresh vegetables ▪ Frozen mature legumes (beans, peas or lentils) ▪ Frozen vegetables ▪ Low-sodium vegetables ▪ Organic vegetables ▪ Pre-cut, diced, sliced or shredded vegetables ▪ Salsa, canned tomato sauce or canned tomato paste ▪ Single serving packets ▪ Vegetables in cans, glass or plastic containers 	<ul style="list-style-type: none"> ▪ Breaded vegetables ▪ Catsup or other condiments ▪ Dried fruits ▪ Dried vegetables ▪ Dry or canned mature legumes (beans, peas or lentils) <ul style="list-style-type: none"> ○ May obtain when listed on food instruments – not allowed with cash-value vouchers ▪ Fruit and/or vegetable juices <ul style="list-style-type: none"> ○ May obtain when listed on food instruments – not allowed with cash-value vouchers ▪ Fruit baskets ▪ Fruit leathers and fruit roll-ups ▪ Fruit or vegetable items on party trays ▪ Fruit or vegetable items on salad bars ▪ Fruits or vegetables mixed with sauces or foods other than other fruits and vegetables ▪ Fruits or vegetables with added corn syrup, high-fructose corn syrup, maltose, dextrose, sucrose, honey, and/or maple syrup ▪ Fruit packed in cans, glass or plastic containers with artificial sweeteners ▪ Herbs used for flavoring ▪ Infant fruits and vegetables ▪ Ornamental and decorative fruits and vegetables ▪ Pickled vegetables, olives ▪ Soups

WIC Formulas

The WIC Program promotes breastfeeding as the best way to feed infants. When a mother cannot or chooses not to fully breastfeed her infant, the WIC Program can provide a wide variety of formulas and other products. When medically necessary, formula and other products are also available for women and children.

■ Participants Eligible to Receive Formulas

The following groups of participants may receive formulas and other products through WIC:

- ▶ Infants (birth to 12 months of age)
- ▶ Children and women when a physician, physician extender (physician assistant or nurse practitioner) or certified nurse midwife determines that the use of formula or other product is medically necessary
- ▶ Participants who are not hospitalized or living in an institution

■ Types (Forms) of Formulas

Formulas may come in three types (or forms): powder, concentrate, and ready-to-feed. Often times, the same product is available in more than one type/form.

- ▶ **Powder.** These products must be mixed with water or added to another fluid product according to manufacturer's instructions or to instructions of the prescribing health care provider.
- ▶ **Concentrate.** These products must be mixed with water according to manufacturer's instructions or to instructions of the prescribing health care provider.
- ▶ **Ready-to-Feed (RTF).** These products do not require mixing with water. They may be used only when the CPA confirms and documents one or more of the following:
 - **Multi-serving containers (e.g., 32 oz.)**
 - The product is available only in ready-to-feed.
 - The participant's household has an unsanitary or restricted water supply.
 - The caretaker may have difficulty in correctly diluting the concentrate and powder products.
 - **Single-serving containers (e.g., 2 oz., 3 oz., 8 oz.)**
 - The product is available only in single-serving ready-to-feed sizes.
 - No other size may be appropriate (i.e., participant is homeless and without adequate refrigeration and/or a way to prepare product in a sanitary manner).
 - There is an emergency or catastrophic situation such as a hurricane or major flood. In these instances, additional guidance would be distributed by the State WIC Program.

NOTE: Single-serving nursette bottles (i.e., 2 oz., 3 oz.) should not be used simply to

provide a higher caloric density formula. If a health care provider provides medical documentation for a higher caloric density formula (i.e., 22 or 24 calories per ounce), the CPA should contact the prescribing individual to discuss if an alternative method of providing additional calories is appropriate.

■ Formulas and Other Products

Infant Formulas (Contract Standard Milk- and Soy-Based). Most infants who are not fully breastfed consume standard milk- or soy-based infant formulas for the first year of life. Contract standard milk- or soy-based infant formulas are products for which the North Carolina WIC Program receives a reimbursement per unit of formula transacted (i.e., a rebate). The contract formulas allowed by the North Carolina WIC Program are Similac Advance Stage 1 and Similac Soy Isomil.

NOTE: Standard milk- and soy-based infant formulas which are nutritionally comparable to the contract infant formulas but for which the North Carolina WIC Program does not have under contract are NOT allowed.

- **Exempt Infant Formulas.** WIC allows exempt formula (EXF) to meet the nutritional needs of infants with a medical condition for which a standard milk-or soy-based infant formula is contraindicated.
- **WIC-Eligible Nutritionals (referred to as WIC-eligible medical foods / WEMF in Crossroads).** WIC also allows other formulas and products to meet the nutritional needs of participants with a documented medical condition.

Medical documentation is required for a participant to receive an exempt formula (EXF) or a WIC-eligible nutritional through WIC. Refer to Section 5 for information about medical documentation requirements and to Attachment 1 for a listing of the more frequently used exempt formula (EXF) and WIC-eligible nutritionals.

If medical documentation is received for an exempt infant formula or WIC-eligible nutritionals and it is not listed on Attachment 1, the CPA should contact the Nutrition Services Branch.

■ Metabolic Formulas

Most products used by individuals with a metabolic disorder are ordered by the Nutrition Services Branch (NSB) or AccessCare and shipped to the Local Agency WIC Program (Refer to Section 8 for information on receipt of products from the NSB). Staff should receive a memo from the ordering agency in advance of any shipment of metabolic products. This correspondence includes the contact information for staff at the tertiary medical center that follows the participant. It also includes instructions regarding nutrition care and nutrition education for the participant, and other products and/or WIC-allowable foods which may be provided.

■ **Non-Approved WIC Costs.**

All apparatus or devices (e.g., enteral feeding tubes, bags and pumps) designed to administer WIC formulas are not allowable WIC costs. Refer to Chapter 12, Section 1 for further information on WIC costs.

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Prescribing Food Packages

A CPA must prescribe a specific food package at each certification and when modifications are requested or required. There are several considerations in prescribing an appropriate food package.

■ Default (Standard) Food Package

When the CPA navigates to the Prescribe Food screen the default (standard) food package appropriate for the WIC category, age category and breastfeeding status of the participant will display. This package offers the maximum monthly allowances (MMA) of supplemental foods. See Section 1 of this chapter for more information.

■ Adjusted Food Package

- ▶ The CPA may adjust the food package when presented with medical documentation which indicates one of the following modifications to a default food package:
 - Exempt infant formula for an infant
 - Standard or exempt infant formula (EXF) or WIC-eligible nutritionals (referred to as WIC-eligible medical foods/WEMF in Crossroads) for a woman or child
 - Whole milk for a child over 2 years of age or a woman participant
- ▶ The CPA may adjust the food package by participant request if:
 - Adjustments that are allowed within the subcategory can be completed on the Prescribe Food screen.
 - Elimination of a specific category can be completed on the Prescribe Food screen.
- ▶ Participants may make choices within subcategories or decline one or more specific food categories:
 - Infant formula
 - Infant cereal (no subcategories)
 - Infant meats (no subcategories)
 - Milk
 - Juice (no subcategories)
 - Cereal (no subcategories)
 - Eggs (no subcategories)
 - Legumes (dry beans, canned beans or peanut butter)
 - Breads/Whole Grains
 - Canned fish (tuna or salmon) (no subcategories)
 - Fruits and Vegetables (Cash-value Voucher) (no subcategories)
- ▶ Low-fat (1%) milk or non-fat (skim) milk is the standard milk for issuance to children 24 months of age and older, and to women.
 - Reduced fat (2%) milk may be issued to children age 24 months of age and older or to women when a CPA determines there is a medical need based on an individual nutrition assessment. 2% milk may not be based on a personal preference.

- Examples of medical need include underweight, weight loss and weight loss during pregnancy. When 2% milk is provided to children 24 months of age and older, or to women, the justification of providing it must be clearly documented in the child's or woman's care plan.
- Whole milk is the standard milk for issuance to children 12 to 23 months of age.
 - Reduced-fat (2%) milk may be issued to a child 12 – 23 months of age when a CPA determines there is a medical need based on an individual nutrition assessment, not a preference.
 - Examples of medical need include children for whom overweight or obesity is a concern. The CPA should consult with the child's health care provider, if necessary. Reduced-fat milk may also be issued to children 12 to 23 months of age when the child's health care provider has instructed that the child have it in place of whole milk. When 2% milk is provided for children 12 to 23 months of age, the justification of providing it must be clearly documented in the child's care plan.
- Participants may choose one or more milk of the following subcategories (no medical documentation by participant's health care provider is required):
 - Evaporated milk
 - UHT milk (only if participant has limited refrigeration)
 - Lactose-free or lactose-reduced milk
 - Soy-based beverage
- Participants may choose one or more of the following milk substitutions (no medical documentation by participant's health care provider is required);
 - Cheese (maximum of one pound above default food package)
 - Tofu
 - Yogurt (maximum of 1 quart of yogurt may be substituted for 1 quart of fluid milk)
 - Note: The same guidance in the preceding section on whole milk and reduced fat milk options to children (12-23 months of age) apply to yogurt issuance. Lowfat or nonfat yogurts are the only types of yogurt authorized for children \geq 24 months of age and women.

■ Situations Prompting Food Package Adjustment

- **Participants with Specific Food Intolerances/Vegan Diet.**
 - **Lactose Intolerance.** When the condition is reported by the participant, parent/guardian/caretaker of an infant or child, or by the health care provider, it must be documented in the participant's health record.
 - Adaptation may include:
 - Lactose-reduced milk as a substitute for fresh fluid milk.
 - Soy-based beverage as a substitute for fresh fluid milk (Refer to the additional information below for restrictions).
 - Tofu as a substitute for fresh fluid milk (Refer to the additional information below for restrictions).
 - Yogurt as a substitute for fresh fluid milk (Refer to the additional

information below for restrictions).

- **Food Allergies.** When a food allergy is reported by the participant/caretaker or by the health care provider, it must be documented. Participants who have a food allergy should receive a food package adapted to their needs. The CPA must remove one or more categories of foods when requested by the participant/caretaker or indicated on the medical documentation.
- **Vegan Diet.** When adherence to a vegan diet is reported by the participant or parent/guardian/caretaker of an infant or child, it must be documented and the food package adapted to their needs.

Issuance of Soy-Based Beverage and Tofu

Children:

Issuance of tofu and soy-based beverage as substitutes for milk must be based on an individual assessment and consultation with the child's health care provider if necessary.

- Soy-based beverage may be substituted for milk on a quart-for-quart basis up to the total maximum allowance of milk.
- Tofu may be substituted for milk at the rate of 1 pound per quart of milk up to the 4 quart substitution of cheese, tofu, or yogurt threshold for children (Food Package IV). *Additional amounts may be substituted up to the maximum allowance for fluid milk for lactose intolerance or other reasons assessed and documented by the CPA.*

Women:

- Soy-based beverage may be substituted for milk on a quart-for-quart basis up to the total maximum allowance of milk.
- Tofu may be substituted for milk at the rate of 1 pound per quart of milk up to the 4 quart substitution of cheese, tofu or yogurt threshold for pregnant, postpartum and partially breastfeeding women (Food Packages V and VI). No more than a total of 6 quarts of milk may be substituted for a combination of cheese, tofu or yogurt for fully breastfeeding women (Food Package VII). *Additional amounts may be substituted up to the maximum allowances for fluid milk for lactose intolerance or other reasons assessed and documented by the CPA.*

- **Participant Who Are Homeless.** If an individual is homeless, it should be indicated in the Participant Demographics in Crossroads. Depending on her living situation, a homeless participant may need certain foods and/or alternative packaging to accommodate her available food storage and preparation facilities.
- **Participants Who Have Limited or No Refrigeration.** Changes that can be made in the food package to adapt for any participant with limited or no refrigeration include:
 - Ordering single-serving ready-to-feed infant formula from the state office
 - Substituting UHT milk or evaporated milk for fresh fluid milk
 - Not issuing cheese or eggs

■ **Breastfeeding Status**

- ▶ The food package for an infant is determined by the breastfeeding status. The breastfeeding status is initially driven by the selections made on the Health Information screen. After a food prescription has been saved, adjustments may be initiated on the Prescribe Foods screen or the Health Information Screen.
- ▶ There are four breastfeeding status classifications in Crossroads: fully breastfed, partially breastfed \leq Maximum Monthly Allowance (MMA), partially breastfed $>$ MMA and fully formula fed. See Section 1 of this chapter for more information on MMA.
- ▶ There are four corresponding food packages/feeding options for postpartum women: fully breastfeeding, partially breastfeeding \leq MMA, partially breastfeeding $>$ MMA, and non-breastfeeding.

Infant Breastfeeding Status	Woman Category and Breastfeeding Status	
Fully breastfed (receives no formula from WIC)	Breastfeeding Woman	Fully breastfeeding
Partially breastfed \leq MMA	Breastfeeding Woman	Partially breastfeeding \leq MMA
Partially breastfed $>$ MMA	Breastfeeding Woman	*Partially breastfeeding $>$ MMA
Fully formula fed	Non Breastfeeding Woman	

***Note: After six months of age this woman is not eligible for food benefits.**

- ▶ The *certified* postpartum woman (breastfeeding or non-breastfeeding) and her infant(s) is/are considered a dyad. The amount of formula the infant receives will drive the mother’s food package prescription.
- ▶ If the food packages within the dyad contradict Crossroads will provide an error message alerting the user that corrections must be made (to prevent over issuance) or must be made (to provide both dyad members the maximum allowable supplemental foods).
- ▶ Women who are partially breastfeeding an infant six months of age or older receiving the $>$ MMA or the full formula package are not eligible for food benefits. This woman continues to be certified as a breastfeeding woman and is eligible for breastfeeding education, support and supply issuance.

Note: The breastfeeding status on the Prescribe Food page may not correspond with the dyad’s actual feeding practice.

■ **Infant Food Packages**

- ▶ Automatic changes occur in formula amount for fully formula fed (standard or exempt infant formula).
- ▶ Partially breastfed infants must have the formula amount prescribed with intention and confirmed with each age category and issuance. Otherwise, the initial amount prescribed will carry forward, even though the MMA changes.
- ▶ **Complementary Foods.** When an infant turns six months of age, s/he may begin to

receive complementary foods. The Crossroads system automatically notes this date in the carousel to take effect the first issue date after reaching six months of age.

- Fully breastfed infants receive:
 - Infant fruits and vegetables
 - Infant meats
 - Infant cereal
- Partially breastfed \leq MMA; partially breastfed $>$ MMA and fully formula fed infants receive:
 - Infant fruits and vegetables
 - Infant cereal
- If this change is not appropriate for the participant, staff must delete the inappropriate food categories.

■ Infants 6 – 11 Months of Age On Food Package III

Federal regulations allow the issuance of exempt infant formula (EXF) at the same maximum monthly allowance as an infant 4 - 5 months of age of the same feeding option receives if no infant foods (infant cereal and infant fruits and vegetables) are provided. Medical documentation is required for the issuance of any exempt infant formula.

Federal regulations also allow the issuance of contract infant formula (IF) at the same maximum monthly allowance as an infant 4 – 5 months of age of the same feeding option receives if no infant foods (infant cereal and infant fruits and vegetables) are provided. Medical documentation is required for this level of issuance for the contract infant formulas.

Note: Every infant must have the food package prescription verified. Failure to do so will result in an error message.

- ▶ *If the increased amount of formula is prescribed the CPA must delete the infant foods before saving the prescription.*
- ▶ *If the standard amount of formula is prescribed the CPA must change the amount of formula from the maximum displayed (884 RFO to 624 RFO).*

■ Automatic Food Package Change When an Infant Turns One Year of Age

- ▶ The infant food package is provided throughout the first year
- ▶ A default food package for a 12 - 23 month old child will be in the carousel when the infant is added to the Program.
- ▶ A child's food package will automatically be issued when the first date to spend is on or after the first birthday.

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Medical Documentation Requirements

Medical documentation is required for the prescription and issuance of many products allowed through the WIC Program. All medical documentation is subject to WIC approval and provision based on program policy and procedures.

■ Situations Requiring Medical Documentation

- ▶ An **infant** requires a formula other than the contract milk-or soy-based infant formulas
- ▶ A **child or woman** requires an exempt formula or WIC eligible nutritionals
- ▶ A **child 24 months of age and older or a woman** requires whole milk

■ Medical Conditions Indicating Need for Prescribed Product

- ▶ **Formulas and other products.** The prescribing individual must document a medical condition that indicates a need for the prescribed formula or WIC- eligible nutritionals (referred to as WIC-eligible medical foods/WEMF in Crossroads) in the treatment or management of the condition. The responsibility for this treatment or management of the condition remains with the prescribing individual. The qualifying conditions include but are not limited to those listed on the table below as well as other medical conditions that impair ingestion, digestion, absorption or utilization of nutrients that could adversely affect a participant’s nutrition status. The table below lists *examples* of medical conditions that may indicate a need for the use of some formulas or products.

Formula or Product	Medical Conditions Which May Indicate Need For Use Of Formula or Product
Preterm Infant Formulas <ul style="list-style-type: none"> ▪ Enfamil Premature Formulas ▪ Gerber Good Start Premature Formulas ▪ Similac Special Care Formulas 	<ul style="list-style-type: none"> ▪ prematurity* <i>Note: Generally used with premature infants weighing less than 2500 grams. (5.5 pounds).</i>
Preterm Discharge Infant Formulas** <ul style="list-style-type: none"> ▪ Enfamil EnfaCare ▪ Similac Expert Care NeoSure 	<ul style="list-style-type: none"> ▪ prematurity* <i>Note: Generally used with premature infants weighing more than 2500 grams (5.5 pounds) and for a time period of up to 12 months corrected gestational age depending on the infant’s birth weight.</i>
Human Milk Fortifiers <ul style="list-style-type: none"> ▪ Enfamil Human Milk Fortifier ▪ Similac Human Milk Fortifier 	<ul style="list-style-type: none"> ▪ prematurity* or low birth weight (LBW) <i>Note: Generally used with premature or LBW infants who are receiving breast milk & who weigh less than 3.6 kg (8 pounds).</i>
* Prematurity is defined as less than or equal to 37 weeks gestation. ** Preterm discharge infant formulas provide a nutrient intake that is between a preterm and term infant formula.	

Formula or Product	Medical Conditions Which May Indicate Need For Use Of Formula or Product
<p>Other exempt formulas or products</p>	<ul style="list-style-type: none"> ▪ cancer ▪ cardiac disorder ▪ eating disorder (anorexia or bulimia) ▪ endocrine disorders ▪ failure to thrive ▪ gastrointestinal disorder ▪ feeding disorder ▪ hyperemesis gravidarum ▪ immune system disorder ▪ inborn errors of metabolism ▪ liver disease ▪ low birth weight ▪ lung disease ▪ malabsorption syndrome ▪ metabolic disorder ▪ neuromuscular or neurological disorder ▪ premature birth ▪ renal disease ▪ severe food allergies that require an elemental formula <p><i>NOTE: These products are not allowed for the following:</i></p> <ul style="list-style-type: none"> ▪ <i>Infants with a diagnosed formula intolerance or food allergy to lactose, sucrose, milk protein or soy protein that does not require the use of an exempt infant formula.</i> ▪ <i>Infants with a non-specific formula or food intolerance.</i> ▪ <i>Women and children who have food intolerance to lactose or milk protein that can be successfully managed with the use of one of the other WIC food packages.</i> ▪ <i>Solely for the purpose of enhancing nutrient intake or managing body weight.</i>

- ▶ **Whole milk for children 24 months of age and older and for women.** The prescribing individual must document a medical condition that indicates a need for whole milk in the treatment or management of the condition.

■ **Individuals Authorized to Prescribe**

Formula/products or foods requiring medical documentation may be authorized only when prescribed by a physician, a physician extender (physician assistant or nurse practitioner) or a certified nurse midwife.

■ **Required Medical Documentation**

The medical documentation must include the following information as applicable:

- ▶ Participant's name and date of birth
- ▶ Specific name of the formula, product or whole milk prescribed, including amount of formula/product needed per day
- ▶ Specific medical condition(s) requiring use of the prescribed formula/product or whole milk
- ▶ Duration of medical documentation (not to exceed 12 months of age for infants; not to exceed 12 months in duration for children and women)
- ▶ Specific WIC foods not allowed due to the qualifying condition
- ▶ Signature of the prescribing individual
- ▶ Prescribing individual's printed name

- ▶ Contact information (address, phone, fax) for the healthcare provider
- ▶ Date of signature (This will be considered the date of medical determination.)

If a CPA has questions about the medical documentation, including the appropriateness of the product prescribed, the CPA should contact the prescribing individual. Staff unfamiliar with the product prescribed should refer to the manufacturer's website for up-to-date information.

■ **Types of Medical Documentations**

- ▶ **Written Medical Documentations.** The medical documentation must be on the WIC Program Medical Documentation Form (Attachment 2), a physician's prescription pad, or documented in the health record if the participant receives health care within the local agency. All required information must be included. Prescription forms developed by product manufacturers are not acceptable. Staff may accept written medical documentation that is faxed, emailed, or mailed by the prescribing individual, or is brought to the agency by the participant. Medical documentation must be scanned into the participant record in Crossroads.
- ▶ **Verbal Medical documentations.** One month's issuance may be provided with Verbal Medical Documentation. A CPA may accept medical documentation information verbally from the prescribing individual. Documentation of verbal medical documentation must be made in the participant record in Crossroads and include the date, name and contact information of prescribing individual and required data elements. Staff must obtain written confirmation of the medical documentation within 2 weeks after accepting the medical documentation verbally. Upon receipt of the medical documentation, the timeframe for the approval should be adjusted by re-entering the medical documentation in Crossroads.

■ **Medical Documentation Changes for Formulas and Other Products**

Refer to Chapter 8 for information about procedures when medical documentation changes after issuance has occurred.

■ **Participant Transfers**

Local agency staff should assist an individual who transfers into their program to obtain required medical documentation for formula or products the individual was receiving at the time of transfer, while still complying with North Carolina WIC Program policy. The following table outlines procedures when issuing to participants transferring into the program. Issuance must not occur until required medical documentation is obtained. The prescribing individual must be authorized to prescribe in North Carolina.

*Note: Exception: When a transferring participant on an exempt formula/product or WIC-eligible nutritional (referred to as a WIC-eligible medical food/WEMF) can be verified as having received the product via verification of certification (VOC), the transferring participant can be issued one month's food benefits to allow the transferring participant to

obtain medical documentation. Staff should document a verbal order for the medical documentation to allow issuance in this situation. Documentation of this verbal order by the CPA should include the circumstances and issuance to the transferring participant and be written in the participant’s Nutrition Assessment section of the Care Plan Summary screen.

Product Used By Transferring Participant	Actions That Staff Must Take
Contract milk- or soy-based infant formula	<ul style="list-style-type: none"> ▪ An infant should be issued the same product. ▪ A child should be issued the same product if s/he has medical documentation. The parent/caretaker must provide staff with medical documentation for the formula and any WIC supplemental foods that are not allowed.
Non-contract milk-or soy-based infant formula	<ul style="list-style-type: none"> ▪ Participant must be switched to a corresponding contract product.
*Exempt formula/product or WIC-eligible nutritionals	<ul style="list-style-type: none"> ▪ The participant must provide staff with written medical documentation in order to receive the exempt formula/product or WIC-eligible nutritionals. The medical documentation must indicate any WIC supplemental foods not allowed.
Whole milk	<ul style="list-style-type: none"> ▪ Children who are 24 months of age or older and women may only be issued whole milk if they have medical documentation for its use.

Ordering Formula and Other Products From the Nutrition Services Branch

Certain formula and other products must be ordered from the Nutrition Services Branch (NSB) because they are not available in the retail system. Attachment 1 indicates which products **must** be ordered from NSB.

Generally, only human milk fortifier and nursettes are ordered through NSB. Retail availability in certain geographic areas may necessitate the ordering of some products not designated on Attachment 1 and should be addressed on a case by case basis.

■ Crossroads Operations

- ▶ Participant must be deaggregated from family issuance
- ▶ Place family on a monthly issuance frequency
- ▶ Prescribe food package and save
- ▶ **DO NOT ISSUE**
- ▶ In the event that food instruments are generated for the ordered product, staff must invalidate the printed food instruments and void in the Crossroads system
- ▶ Place order with NSB as per guidelines below
- ▶ Upon receipt of requested product follow guidelines below to add to local agency inventory
- ▶ Contact family to alert them to product availability
- ▶ When family presents for issuance navigate to the Issue Benefits page, verify the current month's issuance dot is green and select issue
- ▶ The Formula Wizard will appear
- ▶ Select the full amount of current months issuance from inventory displayed
- ▶ If foods are also being issued to the participant proceed with issuance

■ Ordering Products

To order products from the NSB, Local Agency staff must complete a Formula and WIC-Eligible Nutritionals Order Form and submit it to the NSB. Refer to Attachment 3 for the Formula and WIC-Eligible Nutritionals Order Form and instructions for completing and submitting it. (A cover sheet is not necessary when faxing orders nor is it necessary to provide the actual prescription.) The original order form must be maintained on file in the Local Agency.

Unless otherwise notified, orders will be processed by the NSB within two (2) working days of receipt. Products should arrive at the local agency within five (5) working days from the date the NSB processes the order. Local Agency staff should inform the WIC participant/parent/guardian/caretaker of the anticipated delivery date (e.g. up to 7 working days from the time the order is submitted by the Local Agency).

- ▶ **Initial Orders.** Order no more than a one (1) month supply of formula or other product.
- ▶ **Subsequent Orders.** Local Agency staff is responsible for reordering products when needed.

- Order no more than a one (1) month supply of formula when the formula is packaged in 2, 3, or 4 oz. bottles (nursettes) or is for a participant who anticipates needing the product only for a short time.
- Up to a two (2) months' supply of formula may be ordered when the medical condition is chronic and/or the participant will need the product for an extended period of time. However, only the current month's issuance may be provided through the Formula Wizard.
- **Confirmation of Orders by the NSB.** Once an order has been processed, the NSB will fax the original order form to the originating Local Agency with information noted at the bottom related to the order, including the expected delivery date of the product.

■ Receiving Products

When product is received, staff should verify that it is the product and the amount they ordered and that the shipment is not damaged.

- **Correct Shipment.** If the shipment is correct and undamaged, staff should:
 - Document receipt of the shipment. Refer to Section 7 for guidance on inventory of formula and other products.
 - Contact the participant/parent/guardian/caretaker and arrange for them to pick-up the product from the agency.
 - Within 24 hours of product receipt, fax the packing slip (which shows the number of containers received) to the NSB. (*The NSB must have a packing slip to pay the invoice.*) Some address labels serve as packing slips. Do not fax freight/trucking slips as these do not contain complete information. If the packing slip is lost, misplaced, or was never received fax a short memo to the NSB which includes your agency name, the name of the formula(s) or product(s), quantity, date product(s) was/were received and an explanation of why there is no packing slip for the product(s) received.
- **Problem Shipment.** If the shipment is damaged, is more or less than the amount ordered, or is the wrong product, staff should call the NSB immediately and speak with the NSB staff responsible for ordering formula and other products.

■ Issuing Products

Refer to Section 7 for guidance on documentation of issuance of formula and other products received from the NSB.

Inventory and Issuance of Formula and Other Products

Local Agencies will frequently have a supply of formula and other products on hand that was ordered by the Local Agency from the Nutrition Services Branch (NSB) for a program participant, returned to the Local Agency by a program participant, and/or received from another Local Agency. In each of these situations, staff is accountable for the management of the products including receipt, storage, inventory, issuance, and disposal.

■ **Receipt of Formulas and Other Products**

- **Received from the Nutrition Services Branch.** Products received from the NSB are intended for issuance to a specific individual. Upon receipt, these products must be immediately checked for damage of any kind.
 - Local agency staff will add the complete shipment into the local agency formula inventory in Crossroads
- **Received from a Participant/Parent/Guardian/Caretaker.** When products are returned to the local agency by a participant/parent/guardian/caretaker, staff should immediately check for signs of tampering or damage (e.g., bulging can), and to see if any of the product has expired.
 - If the product is in good shape and is within its expiration date, it can be put into Crossroads inventory system and subsequently:
 - issued to another participant (for part or all of a current month's food issuance) in place of using food instruments; and/or
 - sent to another NC Local Agency WIC Program for issuance to a WIC participant. (Note: These shipments are arranged on a case-by-case basis).
 - If the product is damaged, tampered with, or past its expiration date, it must be disposed of immediately. Refer to the discussion later in this section about disposing of nutritional products.
- **Received from Another Local WIC Program.** Sometimes, one Local Agency may have a supply in inventory of a specialized formula or another product that could be used by a participant in another Local Agency. The transfer of product from one agency to another must be documented by both agencies (issuance from one agency and receipt by the other). Product received should be checked immediately for signs of tampering, damage (e.g., bulging can), or being out-of-date and should not be used if problems are identified. Refer to the discussion later in this section about disposing of products.

■ **Storage of Formulas and Other Products**

Staff must store all formula and other products in a secured area which is not visible to program participants.

■ **Issuance of Formulas and Other Products from Inventory**

- Documentation of issuance of infant formula (IF), exempt infant formula (EXF) or WIC-eligible nutritionals (referred to as WIC-eligible medical foods/WEMF in Crossroads)

will be done in the Crossroads system and can be found in the Journal of Transactions.

- ▶ Inventory should be deducted when product is sent to another Local Agency for use by one of their program participants.

■ **Disposal of Product That Is Damaged, Tampered With, Or Past Expiration Date**

Whenever a product in inventory is damaged, found to be tampered with, or is past its expiration date; the product must be opened, disposed of in a safe manner and removed from the clinic inventory.

- ▶ **Product Received from the NSB.** Prior to disposing of product received from the NSB, (i.e., a product ordered by the local agency), call the NSB for instructions.
- ▶ **Product Received from a Participant.** Unusable formula or other product received by the agency from a participant should be opened and disposed of in a safe manner.
- ▶ **Documentation of Disposal.** Staff must document the disposal of products in the Crossroads inventory system.

Inventory and Issuance of Metabolic Formula

Local Agencies may have a supply of metabolic formula on hand that was received from the NSB or AccessCare for an individual with a metabolic disorder. WIC staff is accountable for the management of the products including receipt, storage, inventory, issuance, and disposal.

In the case of metabolic formulas, the NSB and AccessCare order products for individuals with a metabolic disorder regardless of WIC status (e.g., many individuals receiving metabolic products are not categorically or income eligible for WIC). Local Agency staff is responsible for the accountability of metabolic products (e.g., receipt, storage, inventory, issuance, and documentation), regardless of the recipient's WIC status. This is a paper system separate from Crossroads.

■ **Receipt Of Metabolic Formulas**

- **Received From the Nutrition Services Branch or AccessCare.** Metabolic products received from the NSB or AccessCare are intended for issuance to a specific individual. Upon receipt, these products must be immediately checked for damage of any kind
 - Note: Metabolic products must not be accepted for return at the local WIC agency. Metabolic clients should be advised to contact the tertiary care center that manages their prescription. If the product is damaged, tampered with, or past its expiration date, it must be disposed of immediately. Refer to the discussion later in this section about disposing of nutritional products.
- **Received From Another Local WIC Program.** Sometimes, one Local Agency may have a supply in inventory of a metabolic formula that could be used by a participant in another local program. Any transfer of product will be coordinated by the NSB. The transfer of product from one agency to another must be documented by both agencies (issuance from one agency and receipt by the other). Product received should be checked immediately for signs of tampering, damage (e.g., bulging can), or being out-of-date and should not be used if problems are identified. Refer to the discussion later in this section about disposing of products.

■ **Storage Of Metabolic Formulas**

Staff must store all metabolic formula in a secured area which is not visible to program participants.

■ **Documentation Of Issuance Of Metabolic Formulas**

Documentation of receipt and issuance of metabolic products, whether for a WIC participant or not will be done on a paper log. Refer to Attachment 4 which offers a description and examples of two types of inventory/issuance logs that can be used to document receipt and issuance of metabolic formula.

- **Receipt** must be documented using the paper system outlined above for all metabolic formulas shipped from the NSB or AccessCare regardless of WIC status, or received from another local WIC Program.

- ▶ **Issuance** must be documented using the paper system outlined above for a product issued to a WIC participant, to an individual not on WIC but receiving a metabolic formula, or to another local WIC Program for use by one of their program participants.

Confidentiality Of Information on Inventory/Issuance Logs

Inventory/issuance logs, while not directly disclosing medical information, disclose the names of specialized nutritional products along with participant names. Staff should not document medical information on these logs. Staff is also encouraged to implement safeguards that protect the privacy of the participants receiving formula or other products. Examples of such safeguards are covering up the previous entries with a piece of paper while the participant/parent/ caretaker is signing for receipt of product or using a separate page for each issuance.

■ **Disposal Of Product That Is Damaged, Tampered With, Or Past Expiration Date**

Whenever a product in inventory is damaged, found to be tampered with, or is past its expiration date; the product must be opened and disposed of in a safe manner.

- ▶ **Product Received from the NSB or AccessCare.** Prior to disposing of product received from the NSB, (i.e., a metabolic product sent to the agency), call the NSB for instructions.
- ▶ **Documentation of Disposal.** Staff must document the disposal of inventoried products on the paper log.

Infant Formulas, Exempt Infant Formulas and WIC-Eligible Nutritionals**Allowed Through WIC***Contact the Nutrition Services Branch (NSB)**to inquire about a product not listed*

Product Manufacturer	Must Order from NSB	Category in Crossroads	Size	Type	Reconstituted Fluid Ounces (RFO)
Alfamino infant with Iron <i>Nestle</i>		EXF	14.1 oz.	PWDR	96
Alfamino Jr. <i>Nestle</i>		WEMF	14.1 oz.	PWDR	62
Boost <i>Nestle</i>		WEMF	8 oz.	RTF	8
Boost Breeze <i>Nestle</i>		WEMF	8 oz.	RTF	8
Boost High Protein <i>Nestle</i>		WEMF	8 oz.	RTF	8
Boost Kid Essentials <i>Nestle</i>		WEMF	8.25 oz.	RTF	8.25
Boost Kid Essentials 1.5 <i>Nestle</i>		WEMF	8 oz.	RTF	8
Boost Kid Essentials 1.5 w/fiber <i>Nestle</i>		WEMF	8 oz.	RTF	8
Boost Plus <i>Nestle</i>		WEMF	8 oz.	RTF	8
Compleat Pediatric <i>Nestle</i>		WEMF	250 ml	RTF	8.45
Compleat Pediatric Reduced Calorie <i>Nestle</i>		WEMF	250 ml	RTF	8.45
EleCare DHA/ARA <i>Abbott</i>		EXF	14.1 oz.	PWDR	95
EleCare Jr Vanilla <i>Abbott</i>		EXF	14.1 oz.	PWDR	62
EleCare Jr Unflavored <i>Abbott</i>		EXF	14.1 oz.	PWDR	62
EO28 Splash <i>Nutricia</i>		WEMF	237 ml	RTF	8
Enfamil EnfaCare <i>Mead Johnson</i>		EXF	12.8 oz.	PWDR	82
			8 oz.	RTF	8
Enfamil EnfaCare <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
Enfamil Human Milk Fortifier <i>Mead Johnson</i>	X	EXF	5 ml	CONC	1
			0.71 gm.	PWDR	1
Enfamil 24 <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
Enfamil Premature 20 (Iron Fortified) <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
Enfamil Premature 24 (Iron Fortified) <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2

Infant Formulas, Exempt Infant Formulas and WIC-Eligible Nutritionals**Allowed Through WIC***Contact the Nutrition Services Branch (NSB)**to inquire about a product not listed*

Product Manufacturer	Must Order from NSB	Category in Crossroads	Size	Type	Reconstituted Fluid Ounces (RFO)
Enfamil Premature High Protein 24 <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
Enfamil Premature 30 <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
Enfaport <i>Mead Johnson</i>		EXF	6 oz.	RTF	6
Ensure <i>Abbott</i>		WEMF	8 oz.	RTF	8
Ensure Clear Nutritional Beverage <i>Abbott</i>		WEMF	10 oz.	RTF	10
Ensure Plus <i>Abbott</i>		WEMF	8 oz.	RTF	8
Gerber Extensive HA <i>Nestle</i>		EXF	14.1 oz.	PWDR	96
Gerber Good Start Premature 20 <i>Nestle</i>	X	EXF	3 oz.	RTF	3
Gerber Good Start Premature 24 <i>Nestle</i>	X	EXF	3 oz.	RTF	3
Gerber Good Start Premature 24 High Protein <i>Nestle</i>	X	EXF	3 oz.	RTF	3
Glucerna <i>Abbott</i>		WEMF	8 oz.	RTF	8
KetoCal 4:1 <i>Nutricia</i>		WEMF	11 oz.	PWDR	70
			8 oz.	RTF	8
KetoCal 3:1 <i>Nutricia</i>		WEMF	11 oz.	PWDR	69.9
Neocate Infant DHA/ARA <i>Nutricia</i>		EXF	14.1 oz.	PWDR	97
Neocate Junior (unflavored) <i>Nutricia</i>		WEMF	14.1 oz.	PWDR	64
Neocate Junior (flavored) <i>Nutricia</i>		WEMF	14.1 oz.	PWDR	60
Neocate Junior with Prebiotics <i>Nutricia</i>		WEMF	14.1 oz.	PWDR	64
Neocate Splash (unflavored) <i>Nutricia</i>		WEMF	8 oz.	RTF	8
Nepro <i>Abbott</i>		WEMF	8 oz.	RTF	8
Nutramigen <i>Mead Johnson</i>		EXF	13 oz.	CONC	26
			32 oz.	RTF	32
Nutramigen with Enflora LGG <i>Mead Johnson</i>		EXF	12.6 oz.	PWDR	87
Nutren Junior <i>Nestle</i>		WEMF	8.45 oz.	RTF	8.45

Infant Formulas, Exempt Infant Formulas and WIC-Eligible Nutritionals**Allowed Through WIC***Contact the Nutrition Services Branch (NSB)**to inquire about a product not listed*

Product Manufacturer	Must Order from NSB	Category in Crossroads	Size	Type	Reconstituted Fluid Ounces (RFO)
Nutren Junior Fiber <i>Nestle</i>		WEMF	8.45 oz.	RTF	8.45
Osmolite 1.0 <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure with Fiber <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure 1.5 Cal <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure 1.5 Cal with Fiber <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure Enteral 1.0 <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure Enteral 1.0 Fiber <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure Peptide 1.0 Cal (flavored) <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure Peptide 1.0 Cal (unflavored) <i>Abbott</i>		WEMF	8 oz.	RTF	8
PediaSure Peptide 1.5 Cal (flavored) <i>Abbott</i>		WEMF	8 oz.	RTF	8
Peptamen Junior <i>Nestle</i>		WEMF	8.45 oz.	RTF	8.45
Peptamen Junior with Fiber <i>Nestle</i>		WEMF	8.45 oz.	RTF	8.45
Peptamen Junior 1.5 <i>Nestle</i>		WEMF	8.45 oz.	RTF	8.45
Peptamen Junior with Prebio <i>Nestle</i>		WEMF	8.45 oz.	RTF	8.45
Portagen <i>Mead Johnson</i>	Contact NSB if prescribed for an infant	WEMF	14.4 oz.	PWDR	64
Pregestimil DHA & ARA <i>Mead Johnson</i>		EXF	16 oz.	PWDR	112
Pregestimil DHA & ARA 20 Cal <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
Pregestimil DHA & ARA 24 Cal <i>Mead Johnson</i>	X	EXF	2 oz.	RTF	2
ProPhree <i>Abbott</i>		EXF	14.1 oz.	PWDR	102
PurAmino DHA & ARA <i>Mead Johnson</i>		EXF	14.1 oz.	PWDR	98
Resource 2.0 <i>Nestle</i>		WEMF	32 oz.	RTF	32

Infant Formulas, Exempt Infant Formulas and WIC-Eligible Nutritionals**Allowed Through WIC***Contact the Nutrition Services Branch (NSB)**to inquire about a product not listed*

Product Manufacturer	Must Order from NSB	Category in Crossroads	Size	Type	Reconstituted Fluid Ounces (RFO)
Ross Carbohydrate Free (RCF) <i>Abbott</i>		EXF	13 oz.	CONC	25.6
Similac Advance Stage 1 <i>Abbott</i>		IF	12.4 oz.	PWDR	90
			13 oz.	CONC	26
			32 oz.	RTF	32
Similac Alimentum <i>Abbott</i>		EXF	12.1 oz.	PWDR	87
			32 oz.	RTF	32
Similac for Diarrhea <i>Abbott</i>		EXF	32 oz.	RTF	32
Similac NeoSure <i>Abbott</i>		EXF	13.1 oz.	PWDR	87
			32 oz.	RTF	32
Similac NeoSure <i>Abbott</i>	X	EXF	2 oz.	RTF	2
Similac Human Milk Fortifier <i>Abbott</i>	X	EXF	.90 gm.	PWDR	1
			5 ml.	CONC	1
Similac Soy Isomil <i>Abbott</i>		IF	12.4 oz.	PWDR	90
			13 oz.	CONC	26
			32 oz.	RTF	32
Similac PM 60/40 <i>Abbott</i>		EXF	14.1 oz.	PWDR	102
Similac Special Care 20 w/Iron <i>Abbott</i>	X	EXF	2 oz.	RTF	2
Similac Special Care 24 w/Iron <i>Abbott</i>	X	EXF	2 oz.	RTF	2
Similac Special Care 24 High Protein <i>Abbott</i>	X	EXF	2 oz.	RTF	2
Similac Special Care 30 w/Iron <i>Abbott</i>	X	EXF	2 oz.	RTF	2
Suplena with Carb Steady <i>Abbott</i>		WEMF	8 oz.	RTF	8
Vivonex Pediatric <i>Nestle</i>	X	WEMF	1.7 oz.	PWDR	8.45

Infant Formula = IF Exempt Infant Formula = EXF

WIC-eligible Nutritionals = WEMF

WIC Program Medical Documentation

PURPOSE: To facilitate the collection of required medical documentation necessary for the issuance of specific products through the WIC Program.

GENERAL

INSTRUCTIONS: WIC Program staff should provide the WIC Program Medical Documentation form to any participant needing the issuance of a specific exempt infant formula (EXF) or WIC-eligible nutritional (WEMF), or whole milk for children 24 months of age or older and women. The WIC Program Medical Documentation form may be faxed, mailed, or given to the individual to take to the health care provider.

The health care provider should complete the relevant sections of the form, including the qualifying condition, the name of the authorized WIC formula (infant formula, exempt infant formula, WIC-eligible nutritional prescribed, including the amount needed per day); or whole milk, any WIC supplemental food(s) not allowed, the duration of the prescription for the participant, sign and date the form, and return it to the Local WIC Program.

DISTRIBUTION: Maintain a scanned copy of the WIC Program Medical Documentation form in Crossroads.

DISPOSITION: The WIC Program Medical Documentation form should be scanned into Crossroads and saved. The physical form should be destroyed upon confirmation that the scan is legible and retrievable from Crossroads.

REORDER

INFORMATION: Additional copies of this form may be ordered on the Nutrition Services Branch Requisition Form, DHHS 2507, from:

Nutrition Services Branch
1914 Mail Services Section
Raleigh, NC 27699-1914

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North Carolina Department of Health and Human Services
Division of Public Health/Women's and Children's Health Section/Nutrition Services Branch

WIC Program Medical Documentation Infant (Birth to 12 Months of Age)

The WIC Program promotes breastfeeding for infants the first year of life and beyond and actively supports the American Academy of Pediatrics' Statement on Breastfeeding and the Use of Human Milk.

A written prescription is required for an infant who uses a formula/product other than a North Carolina WIC contract milk- or soy-based infant formula. Prescription is subject to WIC approval and provision based on program policy and procedures.

Please complete all sections (A-D) for all prescriptions.

A. PARTICIPANT INFORMATION

Participant's name:	DOB:
Medical condition(s) indicating need for prescribed product:	

B. FORMULA/PRODUCT

Formula/product prescribed:
Amount prescribed per day:
Special instructions for preparation or dilution:
Duration of prescription (limited to 12 months of age):

C. SUPPLEMENTAL FOODS

Beginning at six months of age through the 11th month of age, WIC supplemental foods are available in addition to the prescribed formula. Please indicate which foods this infant should <u>not</u> receive for the duration of this prescription. <input type="checkbox"/> No Infant Cereal <input type="checkbox"/> No Infant Fruits or Vegetables

D. HEALTH CARE PROVIDER INFORMATION

Signature of health care provider:		
Provider's name (please print):		
Medical office/clinic (include address):		
Phone #:	Fax #:	Date:

Contact your local WIC program for information on formulas allowed.

DHHS 3835 (Revised 06/2014)
WIC (Review 06/2017)

North Carolina Department of Health and Human Services
Division of Public Health/Women's and Children's Health Section/Nutrition Services Branch

WIC Program Medical Documentation Child (12 Months of Age and Older) or Woman

Complete sections A and D for all prescriptions.

- ▶ To prescribe a **formula or product** for a child (12 months of age or older) or a woman, also complete **section B**.
- ▶ To prescribe **whole milk** for a child (24 months of age or older) or a woman, also complete **section C**.

Prescription is subject to WIC approval and provision based on program policy and procedures.

A. PARTICIPANT INFORMATION

Participant's name:	DOB:
Medical condition(s) indicating need for prescribed product:	
Duration of prescription (limited to 12 months):	

B. FORMULA/PRODUCT AND WIC SUPPLEMENTAL FOODS

Formula/product prescribed:
Amount prescribed per day:
Special instructions for preparation or dilution:
Supplemental foods:
<input type="checkbox"/> <u>No</u> Supplemental foods are allowed for this participant. Offering these foods is contraindicated at this time. — or —
Identify <u>any</u> WIC supplemental foods <u>not</u> allowed for this participant, otherwise some or all of the following foods may be provided depending on the participant category.
<input type="checkbox"/> No Milk <input type="checkbox"/> No Juice <input type="checkbox"/> No Breakfast Cereal
<input type="checkbox"/> No Whole-wheat Bread or Other Whole Grains <input type="checkbox"/> No Eggs <input type="checkbox"/> No Fruits and Vegetables
<input type="checkbox"/> No Cheese <input type="checkbox"/> No Peanut Butter <input type="checkbox"/> No Legumes
<input type="checkbox"/> No Canned Fish (fully-breastfeeding women only) <input type="checkbox"/> No Tofu <input type="checkbox"/> No Soy-based Beverages

C. WHOLE MILK — CHILD (24 MONTHS OF AGE OR OLDER) OR WOMAN

<input type="checkbox"/> Whole milk prescribed. Otherwise, these individuals receive skim, 1%, or 2% milk.
--

D. HEALTH CARE PROVIDER INFORMATION

Signature of health care provider:		
Provider's name (please print):		
Medical office/clinic (include address):		
Phone #:	Fax #:	Date:

Contact your local WIC program with any questions about current policy or for more information.

DHHS 3835 (Revised 06/2014)
WIC (Review 06/2017)

**Formulas and WIC-Eligible Nutritionals Order Form
(DHHS #T827)**

- Purpose:** To order formulas or WIC-eligible nutritionals through the Nutrition Services Branch.
- Preparation:** The Local Agency Staff must:
1. Complete Sections I- IV -- PRINT LEGIBLY
 2. Fax the completed order form to the Nutrition Services Branch
(No cover sheet is required.)
- The State Agency Staff must:
1. Order the formula or WIC-eligible nutritionals.
 2. Complete the bottom part of the form.
 3. Send confirmation of the order to the local agency once the order is processed
- Distribution:** Retain copy on file in both Local and State WIC agency.
- Disposition:** This form may be destroyed in accordance with the Records Retention and Disposition Schedule for Grants, North Carolina Department of Health and Human Services.
- Reorder:** Photocopy additional copies as needed.

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**FORMULAS AND WIC-ELIGIBLE NUTRITIONALS
ORDER FORM**

**Department of Health and Human Services
Nutrition Services Branch (NSB)**

Instructions: Complete Sections I - IV and fax form to NSB at (919) 870-4898.

I. CONTACT INFORMATION FOR COMPETENT PROFESSIONAL AUTHORITY (CPA) AUTHORIZING ORDER

Date _____ Name & Title of CPA _____
Phone # _____ Email _____ Fax # _____

II. PARTICIPANT INFORMATION

First Name _____ Last Name _____ DOB _____
Participant ID # _____ Medicaid: Yes / No

Document the specific medical condition(s) indicating the need for the product (*List all conditions that apply*):

NOTE: *If ordering "preterm" or "preterm discharge infant formula" → Current weight _____ Date of measure _____
If ordering "human milk fortifier" → Current weight _____ Date of measure _____
Nursettes limited to 1 month supply per order.*

III. PRODUCT INFORMATION **INITIAL ORDER** (limited to 1 month) **REORDER** (___ 1 month ___ 2 months)

Complete Product Name _____ Flavor (if applicable) _____

Product Manufacturer: Abbott Mead Johnson Nestle Nutricia

Product Type: Ready-to-Feed Concentrate Powdered

Containers or Reconstituted Fluid Ounces (RFOs) requested : _____

If amount requested is less than maximum monthly amount, check all that apply:

- agency has partial supply of _____ containers or _____ RFOs
- client is partially breastfed client declines/does not use maximum monthly amount
- other

IV. SHIPPING INFORMATION

WIC Agency _____

Shipping Address _____

City/State _____ Zip Code _____

State Office Use Only

Product Number _____ **# Cases** _____ **Order Approved By/Date** _____

Account # _____ **PO #** _____ **Ref #** _____

Ordered By/Date _____

Estimated Delivery Date _____ **Date Order Confirmation Faxed to LA** _____

Order is for _____ containers. Issue _____ containers. Place remaining _____ containers in Local Agency Inventory.

NSB #T827 (10-2014)

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Examples of Metabolic Product Inventory and Issuance Logs

The purpose of a metabolic products inventory log is to track receipt and issuance of metabolic products received by the Local Agency from the Nutrition Services Branch, from AccessCare, or from another local WIC Program. The minimum requirements for these logs are outlined in Chapter 7 Section 7.

There are a variety of ways to maintain inventory logs. This attachment includes two examples of logs that Local Agency staff may use or modify as needed for metabolic products.

Example #1 documents receipt and issuance specific to a product type and size such as RTF, concentrate, powder. That is, each product/product type would have its own inventory log.

Example #2 documents receipt and issuance that is not specific to a product type and size. Every product/product type would be on one inventory log.

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INVENTORY INFORMATION	ISSUANCE INFORMATION
<p>PRODUCT NAME: _____</p> <p>Date Received: _____</p> <p>Amount Received: _____ Received by: _____</p> <p>Date client contacted: _____</p> <p>Notes: _____</p>	<p>Date Issued: _____ Amount Issued: _____ Staff Initials: _____</p> <p>Client's Name: _____ **WIC ID _____</p> <p>Client's Signature: _____</p> <p>-OR- Other (e.g., destroyed/shipped elsewhere) Reason _____ Date: _____</p> <p>Notes: _____</p>
<p>PRODUCT NAME: _____</p> <p>Date Received: _____</p> <p>Amount Received: _____ Received by: _____</p> <p>Date client contacted: _____</p> <p>Notes: _____</p>	<p>Date Issued: _____ Amount Issued: _____ Staff Initials: _____</p> <p>Client's Name: _____ **WIC ID _____</p> <p>Client's Signature: _____</p> <p>-OR- Other (e.g., destroyed/shipped elsewhere) Reason _____ Date: _____</p> <p>Notes: _____</p>

** Complete only if issued to WIC participant