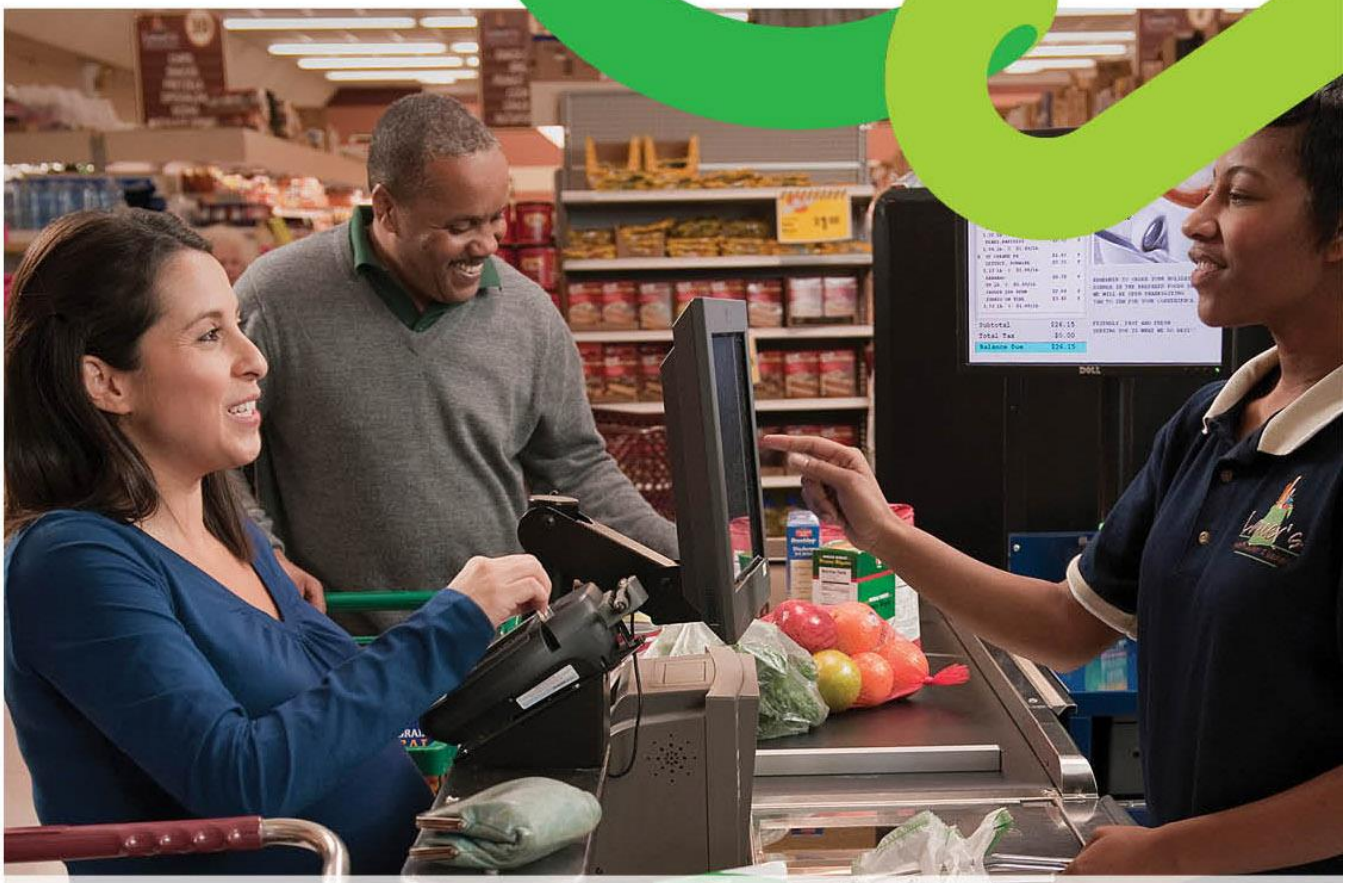
LEVEL 1

WIC Certification Program



Food Package Module

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IOWA WIC

IDPH
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Table of Contents

LEARNING OBJECTIVES **1**

SECTION I: INTRODUCTION **2**

SECTION II: IOWA WIC ALLOWABLE FOODS **3**

- Milk, Cheese, Soy Beverage, Tofu, Yogurt 4
- Breakfast Cereals 11
- Whole Grains 14
- Beans, Peanut Butter, Eggs, and Canned Fish 16
- Fruits and Vegetables (Cash Value Benefit) 18
- Juice 21
- Breastfeeding 23
- Infant Formula 24
- Formula Definitions 25
- Infant formula amounts by age and feeding status 29
- Complementary Infant Foods 30
- Infant Food Fruits and Vegetables 32
- Purchasing Infant Foods 33
- Selecting, Serving, and Storing Commercially Prepared Baby Foods 34

FOOD PACKAGE KEY MESSAGES & POLICY FOR BREASTFEEDING PARTICIPANTS **39**

- Background 39
- Infant Food Package Issuance Based on Age of Infant and Breastfeeding Assessment 40
- Women's Food Packages 43
- Women's Food Package Issuance Based on Breastfeeding Assessment 43
- Summary of Iowa WIC Food Packages 44

SUMMARY OF THE WIC FOOD PACKAGES **46**

- Pregnant and Partially Breastfeeding In Range Women 46
- Exclusively Breastfeeding Women 47
- Postpartum and Partially Breastfeeding Out of Range Women 48
- Child Food Packages 49
- Infant Food Packages 50

SECTION III: ASSIGNING FOOD PACKAGES **52**

SECTION IV: FOOD PACKAGE TAILORING **55**

- Participant Category 55
- Personal Preference 59
- Living Situation 60
- Homeless Food Package Guidelines 62
- Nutrition Risk Factors 63

SECTION V: SPECIAL DIETARY NEEDS–FOOD PACKAGES REQUIRING MEDICAL DOCUMENTATION **69**

- Qualifying conditions for issuance of specialty formulas 72
- Role of the WIC CPA in medical documentation 75
- What criteria should the WIC CPA use to evaluate the appropriateness of the prescribed medical formula or food? 75
- Frequently Asked Questions 76
- Ordering Instructions for Products Not on Retail Shelves 78
- Section VI: Encouraging the Use of WIC Foods 80

SECTION VII: DOCUMENTATION OF FOOD PACKAGES **83**

- What information should be documented and where? 83
- When can food packages be tailored and what documentation is required? 84
- Examples of food package tailoring documentation 86

TRAINING ACTIVITY **89**

LEARNING OBJECTIVES

After completing the module, the learner will be able to:

1. Identify:

- The nutrition principles behind each allowable WIC foods for children and women.
- Criteria foods must meet in order to be WIC approved.
- The major food group each WIC food belongs.
- The major nutrients supplied by each WIC food.
- Examples of how WIC foods can be incorporated into providing nutrition education.
- The procedures for assigning food packages.
- Food package tailoring and participant needs to consider when assigning food packages.
- The reasons why breastfeeding is considered the best way to feed babies.
- The reasons why iron-fortified infant formula is the best alternative to breast milk.
- The reasons why powdered formula is recommended for partially-breastfed babies.
- The situations ready-to-feed formula may be issued.
- WIC formulas require a physician's prescription.
- The required medical documentation and correct procedure for issuing WIC-eligible nutritionals.
- The reasons why baby foods are issued when the baby is 6 months of age.

2. Recognize:

- WIC foods are supplemental and don't necessarily provide all the nutrients needed.
- The maximum amounts of WIC foods can never be exceeded.
- The purpose of providing WIC foods to help meet specific nutrient needs of participants.
- The WIC Program encourages all pregnant women to breastfeed.

SECTION I: INTRODUCTION

Two of the important benefits provided by the WIC Program are the supplemental WIC foods and nutrition education. These benefits, along with referrals and breastfeeding support, can influence the health of the participants we serve. The specific types and amounts of WIC foods were chosen to help meet certain nutrient needs of each type of WIC participant. Although there are specific foods allowed for each WIC category, you will work with individual participants to determine which combination of foods best meets their needs and helps them be as healthy as possible. You play an important part in ensuring that participants are assigned the right food package and are able to use their eWIC card to purchase the foods.

SECTION II: IOWA WIC ALLOWABLE FOODS

WIC foods are chosen based on recommendations from the National Academies' Institute of Medicine (IOM), to provide key nutrients important for health, but which are often inadequate in the diets of participants served by WIC.

The USDA uses these recommendations to specify the minimum nutritional requirements of WIC foods and to set limits on the quantities of food that can be provided. Each State Agency then specifies the foods that are authorized within their state according to the USDA Guidelines.

WIC Food Packages support the Dietary Guidelines for Americans, align with the American Academy of Pediatrics infant feeding guidelines, and support breastfeeding.

Key nutrients include:

Protein	Iron	Zinc	Calcium
Folate	Magnesium	Potassium	Vitamin B6
Vitamin C	Vitamin D	Vitamin E	Fiber

Locate a copy of the *Approved Foods List* and refer to it as you complete this module.

Milk, Cheese, Soy Beverage, Tofu, Yogurt

Why is milk provided?

Milk is a WIC food for women and children. It is provided to supply calcium, protein, vitamins A and D, and is also a good source of riboflavin (a B vitamin). Calcium is needed to build strong bones and teeth and to prevent osteoporosis (fragile, brittle bones).

How much milk is provided?

The maximum amount of milk provided per month for each category of participant is shown below:

Participant Category	Quarts of milk
Children (12-59 months)	16
Not breastfeeding/Partially breastfeeding (out of range) women	16
Pregnant/Partially breastfeeding (in range) women	22
Exclusively breastfeeding women	24
Women exclusively breastfeeding multiples	36

The daily recommended amount of milk to meet calcium needs is:

- 2 cups for children.
- 3 cups for women.

Milk is a nutritious food, but when a child drinks too much, it can prevent them from learning to eat a variety of foods and may result in an inadequate diet. Milk is a poor source of iron and vitamin C. Too much milk, and an inadequate intake of foods, may lead to iron-deficiency anemia in young children. The WIC amount of 16 quarts per month for children provides a little more than 2 cups a day; enough to meet nutrient needs without supplying an excess amount, which might spoil the appetite for other foods.

What types of milk are provided?

- Whole milk for children less than two years of age.
- Low fat (1%) and fat free milks for women and children two years of age and older.

Fortified soy milk, goat milk, acidophilus, evaporated milk, powdered milk, and lactose-free milks that meet the specified fat content are also allowed (such as lactose-free whole milk for children less than two years of age and 1% and fat free lactose-free milk for women and children two years of age and older.)

Why is 1% or fat free milk not routinely given to children under 2 years of age?

Young children are growing rapidly and need the fat from whole milk to provide enough calories and essential fatty acids to help with growth and development. Fat is necessary for myelination (development of the protective sheath) around nerves. If fat free or 1% milk is used during this period when the child is growing rapidly, it may result in a diet that is too low in needed fat.

For children under 2 years of age (12 through 23 months) where overweight is a concern, is there an option to provide 1% or fat free milk?

1% or fat free milk may be issued to children under two years of age (12-23 months) only after the CPA completes a thorough nutrition assessment and the child has been assigned risk code 115 (high weight-for-length birth to <24 months.)

- Definition of high weight-for length: Child's weight-for-length is at or above the 97.7th percentile on the Centers for Disease Control and Prevention (CDC) Birth to 24 months gender specific growth charts which are based on the World Health Organization charts.

Note: The data system plots anthropometric measurements based on the 2006 WHO growth standards for birth to < 24 months and the 2000 NCHS/CDC growth charts for > 24 months for the appropriate age and sex group. This includes all premature infants who have attained a gestational age of at least 40 weeks.

Reinforcing the recommendation of about 2 cups of milk per day for children (about what the child's WIC food package provides) is an important nutritional message to prevent too much calorie intake from milk, and help the child to maintain an appetite for other healthy foods while ensuring adequate calcium intake. The lower calorie content of 1% or fat free milk may help slow the rate of weight gain in children with a high weight-for-length. Determining the appropriate milk fat content must be made through an individual nutritional assessment and, if necessary, discussion with the child's health care provider.

Why are only 1% or fat free milk provided for women and children two years and older?

By two years of age, a child's growth has slowed, and the need for fat in the diet decreases. The American Academy of Pediatrics recommends that babies and children younger than 2 years of age should get half of their calories from fat. By two years of age, the diet should be gradually changed until children are getting only about one third of their calories from fat. 1% and fat free milk contains just as much protein, calcium, vitamins (including Vitamin D) and minerals as whole and 2% milk, but has significantly less fat and cholesterol. Lower levels of fat and cholesterol in the diet are associated with a reduced risk of chronic diseases such as coronary heart disease and obesity. Choosing 1% or fat free milk is a healthy lifelong eating habit that benefits the entire family.

Can whole milk be given to 2-5 year old children who need additional calories because of growth faltering or to women with inadequate weight gain?

The CPA may provide whole fat milk to participants who are receiving an approved special medical formula. Formula must be prescribed by a health care provider. Additional information is provided in the Special Dietary Needs section.

What forms and sizes of milk are allowed?

Participants may only purchase the types and forms of milk listed on their food benefits list.

Milk is issued as gallons, half gallons, and quarts. Participants may purchase any size container, but are encouraged to purchase milk in the most economical sizes, typically gallons.

WIC Allowable Milk Sizes	
Fresh milk	
1 gallon	= 1.0 gallon
½ gallon + 1 quart	= 0.75 gallon
½ gallon	= 0.50 gallon
1 quart	= 0.25 gallon
Evaporated milk	
4-12 oz. cans	= 0.75 gallon
Powdered milk	
25.6 oz. box	= 2.0 gallons
12 oz. can powdered Meyenberg goat milk	= 0.75 gallons

Participants may not be familiar with using powdered milk, so it is helpful to give them suggestions for using it, such as:

- Making yogurt.
- Extending the fresh milk supply by mixing it half and half with reconstituted powdered milk.
- Using it in cooking – especially cream soups, custards, puddings, or cheese sauce.
- Making "milk shakes" with powdered milk, crushed ice, and any variety of fruits, fruit juices, and flavorings (for example vanilla or cinnamon).

Canned evaporated milk can be used in ways similar to powdered milk. Four 12-oz cans of evaporated milk may be substituted for three quarts of fluid milk (see table for conversion amounts).

Can participants purchase flavored milk?

Participants may substitute one gallon of white milk for one gallon of chocolate milk each month. Like non-flavored milk, whole fat chocolate milk is allowed for children less than 2 years. Chocolate milk for older children and women must be low fat or nonfat.

Can participants purchase kosher milk or organic milk?

The Iowa WIC Program does not authorize any type of kosher milk. Organic milk is not WIC-approved.

Did you know . . .?

Kosher laws state what kinds of animal products can be eaten and also set rules on which foods can be eaten together. Kosher laws separate foods into three different groups:

- Meat foods: all kosher four legged animals and poultry.
- Dairy foods: any food made from milk, including yogurt, cheese, and butter.
- Pareve foods: foods that contain neither milk nor meat, including fruits, vegetables, nuts, grains, fish and eggs.

Kosher laws do not allow eating milk and meat together at the same meal. Therefore, someone keeping kosher would not eat a meat sandwich with cheese. Pareve foods, however, may be eaten with either milk or meat.

Since soy milk is pareve (see "Did you know. . ." section above), it may also be offered for women and children following kosher diets. Soy milk can be substituted for cow's milk on a quart-for-quart basis.

What is available for participants who are lactose intolerant?

Food packages can be tailored so that participants may receive lactose-free milk. Lactose-free whole milk is available for children under two years of age; lactose-free 1% or fat free milk is available for women and children two years and older.

Lactose Intolerance

Lactose intolerance is a condition where the body is not able to digest the sugar (lactose) in milk. People with this condition may have diarrhea, gas and bloating after eating or drinking dairy products.

What is available for participants who are allergic to milk or vegan?

As a substitute for cow's milk, soy milk and/or tofu may be issued to children and women for situations that include, but are not limited to, milk allergy, lactose intolerance, or vegan diets. Authorization must be based on an individual nutritional assessment and discussion with the participant's health care provider if necessary. When soy milk or tofu are issued, assessment information and determination of need must be documented in the participant care plan.

Participants who are lactose intolerant can typically consume hard cheeses and yogurt. Most hard cheeses contain no lactose because of how it's made. Yogurt contains lactose, but the probiotics also found in this help break down the lactose. Cheeses, yogurt, and lactose-free milk should be offered before soy milk or tofu to participants with lactose intolerance who cannot drink milk.

What forms of goat milk are allowed?

Goat milk is allowed for women and children. Evaporated and powdered goat milk is WIC approved. As with cow's milk, the goat milk must meet the specified fat content for the participant category. Fat free, powdered goat milk is approved for women and children two years of age and older. Evaporated and powdered whole goat milk is approved for children less than two years of age.

Can participants purchase yogurt?

Participants may substitute 1 quart of yogurt for 1 quart of milk, with a limit of no more than 1 quart of yogurt per month. Whole milk yogurt is allowed for children less than 2 years, while yogurt for older children and women must be low fat or nonfat. The yogurt can be plain or flavored, and traditional or Greek style. Yogurts must have no more than 40 grams of sugar per cup of yogurt and not contain any added ingredients, sugar substitutes or non-nutritive sweeteners. Soy, non-dairy, and organic yogurts are not WIC approved.

Allowable Foods List

Refer to the Approved Foods list for specific brands of food Iowa WIC allows.

What is the nutritional difference between soy milk, tofu and milk?

WIC approved soy milk brands must meet federal regulations for specific nutrient levels in amounts similar to cow's milk. Thus, WIC-approved fortified soymilks provide calcium, protein, and vitamins A and D in amounts similar to cow's milk. Soy milk is low in saturated fat and does not contain cholesterol. It can be used in place of cow's milk in recipes when cooking.

Tofu is produced from soy milk by further steps of curdling and then draining the results into soft white blocks. WIC approved tofu brands must be calcium enriched and may not contain added fats, oils, or sodium. Tofu is high in protein but usually a poor source of vitamin D compared to milk and soymilk*. For this reason, when tofu replaces milk in the diet for children, WIC participants should be informed that vitamin D intake may not be adequate and other sources of vitamin D should be obtained from fortified foods and/or supplements.

*Actual vitamin D and calcium varies among brands of tofu. Read the labels to determine vitamin D and calcium levels in various brands.

Maximum allowed substitution of milk for soymilk, tofu, cheese or yogurt

Category	Food	Substitutes for	Restrictions
Children	1 quart soy milk	1 quart milk	
	1 lb. tofu	1 quart milk	Max 1-4 lb. tofu*
	1 lb. cheese	3 quarts milk	Max 1 lb. cheese**
	1 quart yogurt	1 quart milk	Max 1 quart yogurt
Women (pregnant/partially BF or non-BF)	1 quart soy milk	1 quart milk	
	1 lb. tofu	1 quart milk	Max 1-4 lb. tofu*
	1 lb. cheese	3 quarts milk	Max 1 lb. cheese**
	1 quart yogurt	1 quart milk	Max 1 quart yogurt
Women (Exclusively BF & exclusively BF multiples)	1 quart soy milk	1 quart milk	
	1 lb. tofu	1 quart milk	Max 3-6 lb. tofu*
	1 lb. cheese	3 quarts milk	Max 2 lb. cheese**
	1 quart yogurt	1 quart milk	Max 1 quart yogurt

*No more than a total of 4 quarts of milk may be substituted for a combination of cheese, tofu, or yogurt for children and women who are pregnant, partially breastfeeding, or not breastfeeding. Exclusively breastfeeding women may substitute no more than 6 quarts of milk for a combination of cheese, tofu, or yogurt. Exceptions can be made if there is a medical or nutritional need. More information can be found in Food Package policies beginning 235.00.
**Maximum amount of cheese that can be provided as a substitute for milk. In addition to the cheese as a substitute for milk, exclusively breastfeeding women are given 1 pound of cheese.

Why is a there a limit on cheese?
Cheese is offered as an alternative to milk to increase the variety in the WIC food package and because cheese is a well-liked food, however, cheese is not as good a source of calcium and vitamin D as milk and is higher in sodium (salt) and fat. For these reasons, cheese is limited.

Can participants purchase low fat cheese?

Yes. To provide lower-fat food options, reduced fat versions of the allowed types of cheese are included in the "All Authorized" cheese listing. A food package with low-fat cheese may be issued if low-fat cheese is the <u>only</u> type of cheese prescribed. Another option is to purchase cheeses that are naturally lower in fat, such as part skim milk mozzarella.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. True or false? The WIC food package for children provides enough milk to meet their calcium requirements.

2. True or false? Whole milk (not 1% or skim) is the only type routinely provided to children who are less than 2 years of age.

3. True or false? Milk can be purchased in any size container the participant prefers.

4. Which of these is an Iowa WIC approved milk?

a. Goat milk
b. Kosher milk
c. UHT packaged milk
d. Organic milk

5. List 2 suggestions for using powdered milk.

_____

_____

6. True or false? Lactose free milk is a good option for women and children who are lactose intolerant.

7. True or false? One pound of cheese is the maximum amount that can be issued to children and non-exclusively breastfeeding women.

8. True or false? Lactose-free or lactose-reduced fortified dairy products should be offered before soy milk and/or tofu to participants with lactose intolerance who cannot drink milk.

ANSWERS

1. True
2. True
3. True.
4. Goat milk is WIC-approved.
5. Any two of the following: 1) in cooking (custards, soups, etc.), 2) in "milk shakes," 3) to extend the fresh milk supply, 4) to make yogurt. (Other answers may also be correct.)
6. True.
7. True.
8. True.

Breakfast Cereals

Why are breakfast cereals provided?

Breakfast cereals are provided to supply iron and folic acid. In addition, breakfast cereals can be a good source of fiber. Federal regulations require that at least half of the cereals offered must be whole grain. On the *Iowa WIC Allowable Foods List* (policy 235.20) cereals that are whole grain are noted with an asterisk (*). Breakfast cereals also provide a low-sugar source of nutrition; all allowed breakfast cereals must have no more than 6 grams of sugar per one ounce serving. Breakfast cereals can be either ready-to-eat or cooked cereals.

How much breakfast cereal and whole grains are provided?

The maximum amount of breakfast cereal provided for each participant category is shown below:

Participant Category	Ounces breakfast cereals
Children (12-59 months)	36
Not breastfeeding/Partially breastfeeding (out of range) women	36
Pregnant/Partially breastfeeding (in range) women	36
Exclusively breastfeeding women	36
Women exclusively breastfeeding multiples	54

Why are only certain brands of cereal allowed on the WIC Program?

Cereals on the WIC Programs are all:

- Low in sugar. They contain no more than 6 gm of sugar per ounce.
- High in iron. They must supply at least 28 mg of iron per 100 grams of dry cereal.

In addition, most of the WIC-approved breakfast cereals are a good source of fiber.

High-iron, low-sugar cereals, such as those allowed in WIC, are important for young children because:

Children's iron need is high due to their rapid growth rate. Iron deficiency is the most common nutrient deficiency among young children. A good iron source in the diet, such as cereal, can help to prevent iron-deficiency anemia. The consequences of anemia may impair growth, development, behavior and intellect. Since the consequences may persist even after the iron deficiency is resolved, it is very important to prevent it.

High levels of sugar in the diet can increase cavities and contribute to an inadequate diet since sugar provides calories, but no nutrients (also referred to as "empty" calories). It is important children do not eat a lot of sugar.

Can infant cereal be purchased instead of the breakfast cereal for children?

There may be instances where a child is not developmentally ready for breakfast cereals and needs to continue with infant cereal and formula. In those situations, you can tailor the child's food package to substitute 32 ounces of infant cereal for 36 ounces of breakfast cereal. The same substitution of infant cereal for breakfast cereal is allowed for women receiving WIC-eligible nutritionals, or "specialty" formulas.

Can a participant purchase more than one kind of WIC approved cereal at a time?

Yes, a variety of WIC approved cereals may be purchased up to the amount of ounces issued.

Are any of the WIC approved cereals gluten-free?

Yes. Rice Chex, Corn Chex, Cheerios, Multigrain Cheerios and Cream of Rice are some of the WIC-approved cereals that the manufacturers list as wheat-free and gluten-free.

SELF-CHECK: TEST YOUR KNOWLEDGE

1. Here are labels from two boxes of cereal. Which box is most likely a WIC-approved cereal:

A

Nutrition Facts

Serving Size 3/4 Cup (29g/1.1 oz.)
Servings Per Container About 17

Amount Per Serving	Cereal	Cereal with 1/2 Cup Vitamins A&D Fat Free Milk
Calories	90	130
Calories from Fat	5	5
	% Daily Value**	
Total Fat 0.5g*	**1%**	**1%**
Saturated Fat 0g	**0%**	**0%**
Polyunsaturated Fat 0g		
Monounsaturated Fat 0g		
Trans Fat 0g		
Cholesterol 0mg	**0%**	**0%**
Sodium 210mg	**9%**	**11%**
Potassium 170mg	**5%**	**11%**
Total Carbohydrate 23g	**8%**	**10%**
Dietary Fiber 5g	**20%**	**20%**
Soluble Fiber 1g		
Insoluble Fiber 4g		
Sugars 5g		
Other Carbohydrate 13g		
Protein 3g		
Vitamin A	15%	20%
Vitamin C	100%	100%
Calcium	0%	15%
Iron	100%	100%
Vitamin D	10%	25%
Vitamin E	100%	100%
Thiamin	100%	100%
Riboflavin	100%	110%
Niacin	100%	100%
Vitamin B_6	100%	100%
Folic Acid	100%	100%
Vitamin B_{12}	100%	110%
Phosphorus	15%	25%
Pantothenate	100%	100%
Magnesium	10%	15%
Zinc	100%	100%
Copper	6%	8%

B

Nutrition Facts

Serving Size 3/4 Cup (31g/1.1 oz.)

Amount Per Serving	Cereal	Cereal with 1/2 Cup Vitamins A&D Fat Free Milk
Calories	120	160
Calories from Fat	10	10
	% Daily Value**	
Total Fat 1g*	**2%**	**2%**
Saturated Fat 0.5g	**3%**	**3%**
Trans Fat 0g		
Cholesterol 0mg	**0%**	**0%**
Sodium 150mg	**6%**	**8%**
Potassium 60mg	**2%**	**8%**
Total Carbohydrate 27g	**9%**	**11%**
Dietary Fiber less than 1g	**1%**	**1%**
Sugars 12g		
Other Carbohydrate 15g		
Protein 1g		
Vitamin A	25%	30%
Vitamin C	25%	25%
Calcium	4%	15%
Iron	25%	25%
Vitamin D	10%	25%
Vitamin E	25%	25%
Thiamin	25%	30%
Riboflavin	25%	35%
Niacin	25%	25%
Vitamin B_6	25%	25%
Folic Acid	25%	25%
Vitamin B_{12}	25%	35%
Phosphorus	2%	15%
Zinc	10%	15%

2. Only certain types of cereal are allowed on the WIC Program because: (check all that apply)

___a) They are fortified with Vitamin D
___b) They are high in iron
___c) They are the least expensive
___d) They are low in sugar
___e) They are high in all major vitamins and minerals
___f) The fiber content of at least half the cereals meets the federal requirement for being a good source of whole grain

3. True or false? Children on formula and not developmentally ready for breakfast cereals may be issued infant cereal instead of breakfast cereal.

4. True or false? Participants can "mix and match" cereals to purchase up to the amount of ounces issued.

ANSWERS

1. Box A. It has less than 6 grams of sugar per ounce AND, with 5 grams fiber per serving, is also a high fiber cereal. (1 oz. = approximately 28 grams)
2. b, d, f
3. True
4. True

Whole Grains

Why are whole grains provided?

Whole grains are provided to supply fiber and B vitamins. Whole grains are complex carbohydrates that contain the entire grain kernel that has fiber and more vitamins and minerals than refined grain foods (such as white bread). Fiber helps maintain a healthy colon, and reduces the risk for a variety of illnesses, including obesity, cardiovascular disease, and colorectal cancer. Foods considered good sources of fiber contain 2.5 to 4.9 grams fiber per serving. High fiber foods have 5 or more grams of fiber per serving.

Whole grains WIC provides include brown rice, oatmeal, soft corn and whole wheat tortillas, whole wheat pasta, and 100% whole wheat bread, buns, and rolls.

How many whole grains are provided?

The maximum amount of whole grains provided for each participant category is shown below:

Participant Category	Ounces whole grains
Children (12-59 months)	32
Not breastfeeding/Partially breastfeeding (out of range) women	None
Pregnant/Partially breastfeeding (in range) women	16
Exclusively breastfeeding women	16
Women exclusively breastfeeding multiples	24

Can a participant purchase more than one kind of whole grain at a time?

Yes, a variety of WIC approved whole grain foods may be purchased up to the amount of ounces issued. For example, if 32 ounces of whole grains are issued, the participant could choose a 16-ounce loaf of bread and a 16-ounce package of corn tortillas.

Are any of the WIC approved whole grains gluten-free?

Yes. Brown rice, corn tortillas, and oatmeal are wheat-free and gluten-free whole grains. (Note that corn tortillas and oatmeal could contain trace amounts of wheat if they are manufactured in facilities that also process wheat, barley or rye.)

SELF-CHECK: TEST YOUR KNOWLEDGE

1. A food considered to be high in fiber contains at least how many grams of fiber per serving?
2. True or false? The maximum amount of whole grains for all categories of women is 16 ounces.
3. Which of these are Iowa WIC approved whole grains? (check all that apply)

___a) Corn tortillas
___b) Granola bars
___c) Brown rice
___d) Whole wheat pasta
___e) 100% whole wheat bread
___f) White rice

ANSWERS

1. 5 grams
2. False. Postpartum women do not receive any whole grains; women exclusively breastfeeding multiple infants receive 24 ounces of whole grains.
3. a, c, d, e

Beans, Peanut Butter, Eggs, and Canned Fish

Why are these foods provided?

The protein provided in these WIC-allowable foods is needed for growth and maintenance of body tissues. High quality protein is especially needed during the period of rapid growth in childhood and during pregnancy, lactation, and postpartum.

How much of the protein foods are provided?

The maximum amount of beans, peanut butter, eggs and canned fish provided for each category of participant is shown below:

Participant Category	Beans* and/or Peanut butter	Dozen eggs	Ounces canned fish
Children (12-59 months)	1 lb. beans **-or-** 18 oz. peanut butter	1	None
Not breastfeeding/ Partially breastfeeding (out of range) women	1 lb. beans **-or-** 18 oz. peanut butter	1	None
Pregnant/Partially breastfeeding (in range) women	1 lb. beans **-and-** 18 oz. peanut butter	1	None
Exclusively breastfeeding women	1 lb. beans **-and-** 18 oz. peanut butter	2	30
Women exclusively breastfeeding multiples	1 ½ times exclusively breastfeeding woman allowance	3	45

* Four (4) 16-oz cans beans may be substituted for 1 pound of dry beans

Can participants "mix and match" beans and peanut butter?

Participants issued "peanut butter/beans & peas– all authorized" have the choice of purchasing peanut butter, dry beans, or canned beans. Four (4) 16-oz cans of beans may be substituted for 1 pound of dry beans or 1 jar of peanut butter.

If the WIC benefits states "2.00 jars peanut butter," can the participant purchase a 36-oz jar?

No. Only 16 and 18-oz size jars of peanut butter are approved.

Why are canned beans issued as a quantity of 1 if participants can buy 4?

Canned beans are issued as 1 can, instead of 4, so that participants with the all authorized subcategory can choose to buy peanut butter, dried beans, or canned beans at the store. Each can of beans purchased will remove a quantity of 0.25 from their available benefits.

If a participant doesn't want eggs, can they substitute beans or peanut butter for eggs?

Federal regulations allow substitution of peanut butter or beans for eggs ONLY for homeless participants. Other participants may choose to not purchase the eggs or, by participant request, staff may tailor the food package and remove the eggs.

Why do only exclusively breastfeeding women receive canned fish?

Cold-water fish such as salmon and tuna are good sources of protein, some vitamins and minerals, and a healthy type of fat called omega-3 fatty acids (ALA, DHA, & EPA). Among the many health benefits of these fats, they are beneficial for brain development, and are protective against heart disease. These types of canned fish are offered to exclusively breastfeeding women to supplement their diet to improve the nutritional value of their breast milk.

If an exclusively breastfeeding woman doesn't want salmon or tuna, can she substitute a different type of canned fish – or – another protein food, such as beans or peanut butter or eggs?

No. Only the types of canned fish listed are authorized, and federal regulations do not allow for any substitutions for canned fish. Participants may choose to not purchase the fish or, by participant request, staff may tailor the food package and remove the fish.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. Which categories of participants are allowed both beans and peanut butter each month? (check all that apply)
   ___a) Children
   ___b) Pregnant women
   ___c) Breastfeeding women
   ___d) Infants
   ___e) Non-breastfeeding women
   ___f) Exclusively breastfeeding women

2. True or false? Four (4) cans beans can be substituted for 1 pound dry beans.

3. True or false? When a participant is issued "peanut butter/beans & peas– all authorized" they can buy either peanut butter, dry beans, or canned beans.

4. True or false? Canned fish is an approved WIC food for all women.

ANSWERS

1. b, c, f
2. True
3. True
4. False. Only exclusively breastfeeding women are eligible to receive canned fish

Fruits and Vegetables (Cash Value Benefit)

Why are fruits and vegetables provided?

Fruits and vegetables are provided to help participants meet one of the Dietary Guidelines for Americans - "choose a variety of fruits and vegetables every day." Fruits and vegetables are low in calories and fat, and high in fiber, vitamins and minerals. Different fruits and vegetables are rich in different nutrients, so choosing a variety of colors every day may reduce the risk for chronic illnesses such as heart disease, type 2 diabetes, or obesity.

How many fruits and vegetables are provided?

The maximum amount of fruits and vegetables provided monthly for each category of participant is shown below:

Participant Category	Fruit and vegetable cash value benefit
Children (12-59 months)	$9.00
Not breastfeeding/ Partially breastfeeding (out of range) women	$11.00
Pregnant/Partially breastfeeding (in range) women	$11.00
Exclusively breastfeeding women	$11.00
Women exclusively breastfeeding multiples	$16.50

Fruit and Vegetable Cash Value Benefit– Allowed items

Fruits and vegetables are provided for women and children in the form of **cash value benefits** (CVB). The CVB may be used to purchase any combination of fresh and/or frozen fruits and/or vegetables up to the dollar amount, including:

- Organic fruits and vegetables.
- Salad mixes and mixed greens.
- Whole or cut fruits and vegetables in bags or containers.

Cash Value Benefit

The fruit and vegetable benefit (CVB) is fixed-dollar amount benefit used by participants to purchase allowed fruits and vegetables from grocery stores that take WIC.

Fruit and Vegetable Cash Value Benefit– NOT Allowed items

The intent of the cash value benefit is to provide fruits and vegetables for the individual participant. Items such as fruit or vegetable party trays are not allowed since they are intended for group consumption. Likewise, items that are considered herbs or spices are not allowed. The following items are NOT allowed to be purchased with the cash value benefit:

- French fries, hash browns, tater tots with added sugar, fat or oil
- Added ingredients that are not fruits or vegetables (such as rice, noodles, meat, cheese, dressing, croutons, sugar, salt, flavoring, etc.)
- Herbs or spices (cilantro, parsley, basil, etc.)
- Items from a deli or salad bar
- Dried fruits and/or vegetables
- Fruits and vegetables in cans or jars (metal or glass containers)
- Juices or soups
- Jams, jellies, or preserves
- Edible blossoms and flowers
- Frozen smoothie mixes
- Ornamental and decorative fruits and vegetables such as gourds or carving pumpkins
- Fruit baskets and party vegetable/fruit trays
- Mature legumes (dry beans and peas) unless purchased as frozen vegetables
- Fruit leathers and fruit roll-ups

Cashing the Cash Value Benefit (CVB)

The fruit and vegetable cash value benefit is listed on the *Family Food Benefits* list along with other WIC foods. Participants may purchase up to the dollar amount listed. If the purchase is more than the dollar amount, the participant has the option to pay the difference. The participant may use any payment option the store allows, such as cash, credit, debit, or SNAP benefits.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. Which categories of participants are provided an $11 cash value benefit for fruits and/or vegetables? (check all that apply)
   ___a) Children
   ___b) Pregnant women
   ___c) Partially breastfeeding women
   ___d) Infants
   ___e) Not breastfeeding women
   ___f) Exclusively breastfeeding women

2. True or false? Any fresh fruit, vegetable, or herb is allowable for purchase with the Cash Value Benefit (CVB).

3. True or false? Cut up fresh fruit and mixed salad greens can be purchased with the Cash Value Benefit (CVB)

4. Which of these are NOT allowed when using the fruit and vegetable (CVB) benefits? (check all that apply)
   ___a) Paying the difference with SNAP benefits if the purchase is over the dollar amount.
   ___b) Paying the difference with cash if the purchase is over the dollar amount.
   ___c) Receiving cash back if the purchase is less than the dollar amount of the CVB.

ANSWERS

1. b, c, e, f
2. False (fruits/vegetables from salad bars, edible blossoms & flowers, decorative gourds, herbs and spices are not allowed)
3. True
4. c

Juice

Why is juice provided?

Specific fruit and vegetable juices are also provided in the WIC food package. Although eating whole fruits and vegetables instead of juice provides more vitamins, minerals and fiber, juice is still provided for women and children in order to supply an easy source of vitamin C.

Vitamin C helps:

- Produce collagen, a connective tissue that gives structure by holding muscles, bones and other tissues together.
- Form and repair red blood cells, bones and other tissues.
- Keep capillary walls and blood vessels firm, and as such protects from bruising.
- The body absorbs iron from plant foods.
- Keep gums healthy.
- Heal cuts and wounds.
- Protect from infection by keeping the immune system healthy.

Juices allowed on the WIC Program must meet these guidelines:

- Be 100%, unsweetened real fruit or vegetable juice.
- Supply at least 30 mg vitamin C per 100 ml of juice (72 mg/cup) – which is 80% of the Daily Value.

Citrus juices, such as orange or grapefruit juice, are naturally high in vitamin C and are allowable WIC juices. Other juices, such as apple, grape, tomato and vegetable that have added vitamin C are also allowed. Juices that are not fortified with vitamin C do not meet the federal requirements and are not allowed for WIC.

How much juice is provided?

The maximum amount of juice provided monthly for each category of participant is shown below:

Participant Category	Juice (oz.)
Children (12-59 months)	128
Not breastfeeding/Novel Partially breastfeeding (out of range) women	96
Pregnant/Partially breastfeeding (in range) women	144
Exclusively breastfeeding women	144
Women exclusively breastfeeding multiples	216

What size juice containers are approved?

The chart shows the size containers and number of juice containers approved for the various categories of WIC participants:

Participant Category	Juice 12 oz. frozen	Juice 48 oz. Convenient Pack	Juice 64 oz. refrigerated or shelf stable containers
Children (12-59 months)			2
Not breastfeeding/ Partially breastfeeding (out of range) women	2		
Pregnant/Partially breastfeeding (in range) women	3		
Exclusively breastfeeding women	3		
Women exclusively breastfeeding multiples		4	

Can participants purchase less juice or smaller size containers?

Participants can choose to purchase less juice (such as only 1 container of juice instead of the 2 or 3 provided in their WIC benefits), but must purchase the juice in the size container listed on the *Family Food Benefits* list. For example, if the participant is issued 64-oz juice, the participant may NOT substitute a 48-oz container.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. Only certain juices are allowed on the WIC program because they: (check all that apply)

___a) Have no added sugar
___b) Supply vitamin C (at least 80% DV)
___c) Are the least expensive
___d) Are 100% real juice

2. True or false? Participants may choose to purchase less juice by buying smaller size cans of juice than those listed on the Allowable Foods List.

ANSWERS

1. a, b, d
2. False

Infant Foods

The foods available for infants support the American Academy of Pediatrics recommendations on infant feeding and the introduction of solid foods. In particular the infant food packages:

- Promote and support breastfeeding.
- Provide complementary foods at appropriate ages.
- Include fruits and vegetables and no juice.
- Tie formula amounts to feeding practice and age of baby.

Breastfeeding

Breastfeeding is best for babies and moms, and the WIC food packages provide incentives to both baby and mom to not only breastfeed, but also exclusively breastfeed. Promoting and supporting breastfeeding is part of WIC's Federal Regulations. Breast milk is the best or ideal food for young babies because:

- Breast milk is nutritionally superior to any formula for the baby.
- It has just the right amount of protein, fat, carbohydrate, vitamins, and minerals.
- It is a complete food for the first 6 months of life and no other liquids or solids are needed. Breast milk is easy for the baby to digest.

How does WIC help to support and protect breastfeeding?

The Iowa WIC Program promotes breastfeeding as the normal, expected, and healthiest way to feed babies. To successfully establish milk supply, WIC encourages mothers to exclusively breastfeed and not use formula during the first 4 to 6 weeks postpartum. Therefore, formula will not be offered routinely to breastfed infants.

How can you prepare moms to choose exclusive breastfeeding?

Refer to the Breastfeeding Module and the *USDA WIC Breastfeeding Support website* . It discusses WIC's role in breastfeeding promotion and support, and provides detailed instructions for discussion with moms during pregnancy and after delivery.

Guidelines on providing supplemental formula to partially breastfed babies

- Breastfeeding women should receive information about the potential impact of formula on breastfeeding.
- Provide formula benefits only when requested by the mom of the breastfed baby. Offering formula to a breastfeeding mom who has not requested it weakens her confidence that she can breastfeed successfully, especially in the first few weeks. Also, she may find it hard to turn down the free formula even though she had not planned to use it.
- Provide only the amount of formula that the baby is drinking at the time of benefit issuance.

- Issue powdered rather than concentrate or ready to feed formula.

Why is powdered formula provided to partially breastfed infants?

Due to its longer storage life, formula in the powdered form is more appropriate for breastfed babies than the liquid concentrate. Once opened, the liquid concentrate may only be stored (under refrigeration) for 48 hours. This means that a mother may feel "pressured" into giving her baby more formula than needed in order to use up the formula, or she may end up throwing away unused formula. The powdered formula gives her the flexibility to mix exactly the amount of formula she wants each day.

How many cans of formula does a partially breastfed infant need?

Partially breastfed infants should only be issued the number of cans needed to cover their current formula intake in order to promote breastfeeding. Every can of formula, when prepared correctly, makes a certain number of fluid ounces. This is referred to as the formula's reconstituted ounces. The number of reconstituted ounces in every WIC approved formula can be found in the Iowa WIC Formula Product Guide.

To determine how many cans of formula an infant needs for one month, complete the following steps:

1. Determine how many ounces of formula the infant drinks in 24 hours. Multiply this by 30 to determine how many ounces they are drinking in a month.
2. Determine how many reconstituted ounces one can of the required formula makes. Keep in mind, not all formulas reconstitute to the same number of ounces!
3. Divide the number of ounces the infant is predicted to drink in a month by the number of reconstituted ounces one can will make. This will tell you how many cans should be issued.

Here is an example:
Annie is a 3 month old partially breastfed infant. She drinks 3 4-oz bottles of Similac Advance every day. How many cans should the CPA put on her food package?

- How many ounces does Annie drink?
  - 3 bottles x 4 oz. each = 12 oz. formula/day
  - 12 oz./day x 30 day/month = **360 oz./month**
- How many reconstituted ounces are in 1 can?
  - The CPA consults the Iowa WIC Formula Product Guide and determines that 1 can of powdered Similac Advance reconstitutes to **90 oz.**
- How many cans are needed?
  - 360 oz. needed/month ÷ 90 oz./can = **4 cans/month**

Infant Formula

WIC recognizes that despite encouragement and support, not all moms choose to breastfeed. Sometimes special circumstances such as illness, medical issues, foster care placement, etc. don't allow for the baby to be breastfed or receive breastmilk. In those situations, WIC provides the best alternative, which is iron-fortified commercial infant formula. WIC-eligible nutritionals and metabolic formulas are also provided to children and women when medically needed. The two main types of infant formula are cow's milk-based and soy-based.

- Cow's milk formulas are most often given to babies and are considered to be the standard or routine formulas. Cow's milk is modified to make it easier to digest and nutritionally complete for the baby.

- Soy formulas are also nutritionally complete formulas and standard contract soy formula may be issued upon request from caregivers. Soy formulas contain no cow's milk and use soy beans as the base. Soy formulas may be fed to babies who have an allergy or intolerance to cow's milk formula.

Formula Definitions

Primary Contract Brand Infant Formula
Any standard infant formula Iowa WIC has a formula rebate contract with. A prescription is not required to issue.

Exempt Infant Formula
Any infant formula designed for babies with special medical conditions who require a modified infant formula. Issuance is only allowed with medical documentation from a physician. .

WIC-Eligible Nutritionals
Products meant to provide nutritional support for children and women with a diagnosed medical condition, when the use of regular foods is not possible, restricted, or inadequate. Issuance is only permitted with medical documentation from a physician.

What is a contract formula?

Federal regulations require WIC programs to contract with infant formula companies for cost-saving purposes. WIC receives a cash refund for all the contract formula purchased by participants. This rebate amount, which is used to serve more children and women on WIC, supports approximately 42% of the Iowa WIC caseload. No other standard infant formulas are provided, as federal regulations also require formula-fed babies to use primary contract brand infant formulas except when contraindicated by a specific medical condition.

Contraindicated means a type of formula or food is not appropriate for the participant's medical condition (for example, milk allergy). In those situations, the health care provider can prescribe a specialized formula or suggest that a WIC food should not be provided.

The Iowa WIC primary brand contact infant formulas are produced by Abbott:

- **Similac Advance** – a milk-based formula
- **Similac Isomil Soy** – a soy-based formula which is lactose-free and intended for babies who have a sensitivity to cow's milk-based formulas
- **Similac Sensitive –** a milk-based formula which is 99.8% lactose free
- **Similac Total Comfort -** a milk-based formula containing 100% partially hydrolyzed whey protein and 98% less lactose than standard milk-based formulas
- **Similac Sensitive for Spit Up –** a milk-based formula with added rice starch

Are other formulas available?

Other brands of standard infant formulas (such as Enfamil Gentlease, Enfamil AR, or Gerber Good Start Soy) are not available. These non-contract formulas do not qualify for a formula rebate. Because there is a comparable contract version available, even with medical documentation, these formulas cannot be issued. On rare occasions, some of these non-contract formulas are visible in Focus when infants with severe medical conditions need them. However, even then, they can only be provided with State approval and is usually for a limited time.

Iowa WIC does not provide any other standard milk or soy-based infant formulas; however, sometimes there is a need to issue a specialized (exempt infant or WIC-eligible nutritional) formula. There are a variety of specialized formulas available, which may be issued if there is a medical need and a written medical documentation from the participant's health care provider. *The Special Formula Medical Documentation form* or other written documentation with all the required information must be scanned to the participant's record.

Required documentation

- Name of formula and amount
- Supplemental foods
- Length of time
- Qualifying conditions
- Prescribing authority's signature
- Date

The specialized formulas are used for infants, children, and women who have medical or metabolic problems which affect their nutritional needs and/or their ability to digest regular formulas. It is important that these individuals are seen by a health care provider who can reevaluate the need for the specialty formula on an ongoing basis. Additional information on specialty formulas is provided in the Special Dietary Needs section.

What forms of formula can be issued?

Powdered formula is the most commonly issued form of formula. Concentrate formula can also be issued to a participant upon request. The benefits of using powdered formula are:

- Easy to transport
- Higher reconstituted yield than liquid formulas
- Long shelf life once can is opened
- Flexibility in mixing

WIC vendors, at a minimum, must stock either 6 cans of any contract powdered formula or 24 cans of any contract concentrated formula. Store are not required to carry both. Stores are not required to stock ready-to-feed formula.

When can ready-to-feed formula be issued?

Ready-to-feed (RTF) formula means that it is ready to use as is and requires no mixing with water. Due to its high cost, RTF formula may only be issued under these conditions:

- The household has an unsanitary or restricted water supply or poor refrigeration
- The person caring for the participant may have difficulty correctly diluting concentrated or powder formula
- For a medically fragile baby (including premature and immune-compromised infants)
- The prescribed formula is only available in RTF

Why is iron-fortified formula required?

All routinely used cow's milk-based formulas in the United State are now available only in "iron-fortified" versions. Iron-fortified formula is required because The American Academy of Pediatrics, Committee on Nutrition, recommends that non-breastfed babies receive iron-fortified formula for the entire first year of life. The iron in the formula helps to prevent iron-deficiency anemia. Iron deficiency is the most common nutritional deficiency among young children. The consequences of lack of iron may include impaired growth, development, behavior, and intellect.

You may find that some health care providers or parents disagree with this recommendation. Many claim that the iron in formula causes gastrointestinal problems such as constipation, colic, spitting up, vomiting, or diarrhea. Studies consistently do not show any increase in fussiness, colic, or constipation with the use of iron-fortified formulas. The American Academy of Pediatrics states there is no role for low-iron formulas for healthy babies. (*American Academy of Pediatrics Pediatric Nutrition Handbook.7th ed.)*

How much formula does a baby need to drink?

Table 1 is a guide to the amount of formula or breastmilk babies of varying ages can be expected to drink daily. The intake of formula among healthy babies varies widely, and this table should only be used as an approximate guide. It is important to monitor the growth of the baby to judge whether an appropriate amount of formula is being given. In general, a baby should be drinking an amount of formula within the range listed for his/her age.

TABLE 1

General Guidelines for Healthy Full-Term Infants*

Bottle-Fed Infants (formula or breast milk):

- Newborn infant may drink 1-2 ounces every 2-3 hours
- 1-2 month old infant may drink 2-3 ounces every 2-3 hours
- 2-3 month old infant may drink 4-5 ounces every 3-4 hours
- 3-4 month old infant may drink 5-6 ounces every 3-4 hours
- 4-6 month old infant may drink 6-8 ounces 4-6 times a day

*These ranges may not apply to all babies.

Feeding Cues

Participants should be educated on infant hunger and fullness cues.

An infant who is hungry may:

- Wake and toss
- Suck on a fist, open their mouth, and turn their mouth towards you if you stroke their cheek
- Cry or fuss
- Appear like he or she is going to cry

Do not overfeed the infant. Stop feeding when the infant:

- Closes his or her mouth
- Stops sucking, spits out the nipple, or turns away from the bottle
- Wants to play instead of eat

How much formula does WIC provide?

The formula amounts provided by WIC vary with the baby's age, breastfeeding status, and the form of formula provided. As you can see from Table 1 above, this may not be enough formula to provide for the baby's total needs at certain ages. However, remember WIC is a supplemental nutrition program and does not provide the total diet for any participant. Point out to parents/guardians that they may need to purchase some additional formula on their own. It is important to know community resources in your area that parents can be referred to if they need help finding additional formula.

Infant formula amounts by age and feeding status

Maximum Monthly Amounts

Age	Fully Formula-Fed		In Range Partially BF Infant		Out of Range Partially BF Infant	
< 1 month	Concentrate	823 oz.	Concentrate	104 oz.	Concentrate	105 oz.
	RTU	832 oz.	RTU	104 oz.	RTU	105 oz.
	Powder	870 oz.	Powder	104 oz.	Powder	105 oz.
1 - 3 months	Concentrate	823 oz.	Concentrate	388 oz.	Concentrate	389 oz.
	RTU	832 oz.	RTU	384 oz.	RTU	385 oz.
	Powder	870 oz.	Powder	435 oz.	Powder	436 oz.
4 - 5 months	Concentrate	896 oz.	Concentrate	460 oz.	Concentrate	461 oz.
	RTU	913 oz.	RTU	474 oz.	RTU	475 oz.
	Powder	960 oz.	Powder	522 oz.	Powder	523 oz.
6 -11 months	Concentrate	630 oz.	Concentrate	315 oz.	Concentrate	316 oz.
	RTU	643 oz.	RTU	338 oz.	RTU	339 oz.
	Powder	696 oz.	Powder	384 oz.	Powder	385 oz.

***Formula amounts listed are fluid ounces of reconstituted formula**

Breastfeeding Descriptions

Breastfeeding Status	Definition
Exclusively breastfeeding woman	A breastfeeding woman whose baby receives no formula from WIC.
Partially breastfeeding woman	A woman who is breastfeeding and also offering formula. May be in range or out of range.
Exclusively Breastfeeding Infant	Has been fed only human milk, vitamins, minerals and/or medications. (No food package from WIC)
Primarily Exclusive/No Formula Package	-Has been fed something other than human milk, vitamins, minerals and/or medications either one time or on rare occasions. This includes infant formula, human milk fortifier, cow's milk, juice, sugar water, water, rehydration solution, baby food or anything else. -Exclusive breastfeeding is interrupted because of special circumstances such as acute illness, hospitalization or caregiver misinformation. (No food package from WIC)
Primarily Exclusive/Complementary Foods	Has been fed any complementary foods (e.g. cereal, baby foods or table foods) in addition to only being fed human milk, vitamins, minerals and/or medications. These foods are provided on a routine or ongoing basis regardless of the amount. (Infant receives age-appropriate food package from WIC with no WIC formula)
Partially Breastfeeding	Infant is breastfeeding and receiving formula. May also be fed complementary foods. (Infant receives a WIC food package that includes formula and may include WIC foods)
No Longer Breastfeeding	Infant or child stopped breastfeeding.
Never Breastfed	Infant or child was never breastfed.
Breastfeeding Child	Greater than or equal to 12 months of age and continuing to breastfeed.

Complementary Infant Foods

At 6 months of age, babies receive infant cereal and baby food fruits and vegetables. Fully breast-fed babies also receive commercially prepared baby food meat, and twice as much baby food fruits and vegetables. The table on the following page summarizes the amount of food provided based on baby's breastfeeding level.

Infant Food Packages

Age	Feeding status	Mom's priceless breastmilk	Infant formula (12.4-oz cans powder)	Infant cereal (oz.)	Baby food fruits & vegetables (4 oz. jars)	Baby food meats (2.5 oz. jars)
0-6 mo.	Exclusively Breastfed	✓	--	--	--	--
0-1 mo.	Partially BF	✓	1 in range 2-9 out of range	--	--	--
1-3 mo.	Partially BF	✓	1-4 in range 5-9 out of range	--	--	--
0-3 mo.	Formula fed	--	9	--	--	--
14-5 mo.	Breastfed	✓	--	--	--	--
4-5 mo.	Partially BF	✓	1-5 in range 6-10 out of range	--	--	--
4-5 mo.	Formula fed	--	10	--	--	--
6-8 mo.	Breastfed	✓	--	24	64	31
6-8 mo.	Partially BF	✓	1-4 in range 5-7 out of range	24	32	--
6-8 mo.	Formula fed	--	7	24	32	--
9-11 mo.	Breastfed	✓	--	24	64 **-OR-** 32 jars baby food F/V + $8 CVB fresh F/V	31
9-11 mo.	Partially BF	✓	1-4 in range 5-7 out of range	24	32 **-OR-** 16 jars baby food F/V + $4 CVB fresh F/V	--
9-11 mo.	Formula fed	--	7	24	32 **-OR-** 16 jars baby food F/V + $4 CVB fresh F/V	--

Why are complementary foods provided at 6-11 months of age?

Around 6 months of age, babies go through developmental changes that prepare them to eat solid foods. An infant may be ready for solids when they can:

- Sits up alone or with support
- Holds head steady and straight
- Opens his mouth when he sees food coming
- Keeps tongue low and flat to receive a spoon
- Closes lips over the spoon and scrapes food off as the spoon is removed from the mouth
- Keeps food in the mouth and swallows, rather than pushing it back out onto the chin (the baby has outgrown the tongue-thrust reflex)

For more information, refer to the Infant Nutrition Module as part of Level II of the New Employee Training Course and the USDA Infant Nutrition and Feeding Guide.

Infant Cereal

Iron-fortified single-grain infant cereal is provided because it is a well-accepted food and a good source of iron and zinc. Twenty-four ounces of infant cereal are provided monthly. Breakfast cereal cannot be purchased in lieu of infant cereal.

Infant Food Fruits and Vegetables

Baby food fruits and vegetables are provided to ensure that all infants get enough fruits and vegetables. The amount provided for formula-fed infants is about one jar per day. As an incentive to breastfeed, exclusively breastfed infants receive about two jars of baby food fruits and vegetables per day. Offering fruits and vegetables around 6 months of age exposes babies to a variety of foods. These foods are nutrient dense, meaning they are high in vitamins, minerals, and fiber.

Cash Value Benefit (CVB) for Fresh Fruits and Vegetables

At 9 to 11 months a cash value benefit for purchase of fresh fruits/vegetables may be issued in lieu of some baby food fruits and vegetables. As babies develop, they will benefit from trying new foods and textures. The addition of the CVB when a baby turns 9 months of age encourages caregivers to make their own baby foods using fresh fruits and vegetables. Consistency should progress from pureed to fork-mashed and eventually to diced and finger foods. Issuing a cash value benefit for fresh fruits and vegetables must be based on an individual nutrition assessment to ensure that appropriate nutrition education is provided to the caregiver that addresses safe food preparation, storage techniques, and age-appropriate feeding practices.

As infants get older, they may lose interest in pureed foods. You can offer parents/guardians suggestions on using infant foods such as:

- Making pancakes or muffins with baby cereal
- Mixing infant meats or vegetables into pasta sauce
- Incorporating infant foods into yogurt to make dips
- Adding infant fruits to smoothies

Baby Food Meats

The baby food meat for breastfed babies provides needed iron and zinc in a form that is highly absorbed by the baby. Infant formulas provide these two minerals in amounts that meet or exceed the needs of most babies. Thirty one (2.5 oz.) jars of baby food meats are provided monthly to exclusively breastfed babies.

Purchasing Infant Foods

Infant cereal

Barley, multigrain, oatmeal, rice, or whole wheat infant cereal may be purchased, but it cannot contain added fruit, milk, or other non-cereal ingredients. Only the dry, iron and zinc fortified infant cereal in 8 and 16 oz. boxes is allowed. Cereal in jars is not allowed.

Baby Food Fruits and Vegetables

The *Family Food Benefits* list shows the specific number of ounces of fruits and vegetables a participant may buy. Multi-packs of 4-ounce jars may also be purchased. Each container counts as one jar. For example, a 2-pack of 4-oz containers (each) of baby food counts as 2 jars.

Depending on the brand, only Stage 2 or 2nd Foods are approved. The only brands which may be purchased are:

- Beechnut Stage 2
- Gerber 2nd Foods
- Tippy Toes Stage 2

Approved baby foods:

- Are fruits and vegetables with no added ingredients
- Do not contain any added sugar, salt or starches
- Have simple and gentle textures, and are easy for baby to swallow

Meats

The *Family Food Benefits* list shows the specific number of ounces of baby food meats that can be purchased. WIC approved baby food may be Stage 1, Stage 2, or 2nd Foods, depending on the brand. Any single flavor, plain meat with or without broth or gravy may be purchased.

The following are not allowed:

- Food with added DHA or ARA
- Stage 3 or 3rd foods
- Graduates or dinners
- Fruit or vegetable combinations with meat, rice or noodles

Cash Value Benefit for Fresh Fruits and Vegetables

Participants choosing a CVB in lieu of some of the baby food fruits and vegetables for 9 to 11 month old babies may purchase up to the total dollar amount of any **fresh** fruit or vegetables. Frozen vegetables are not allowed for infants per federal regulations. If the purchase is more than the dollar amount, the participant has the option to pay the difference. The participant may use any payment option the store allows, such as cash, credit, debit or SNAP benefits.

What if a participant doesn't want all the baby food?

As with any of the WIC food benefits, participants can choose to buy less food than is listed on the *Family Food Benefits*, or none at all.

Can baby food fruits and vegetable be issued to special needs children or women?

With medical documentation, children and women whose special dietary needs, such as prematurity, developmental delays, and dysphasia (swallowing disorders) require the use of pureed foods (in addition to requiring the use of special formula or WIC eligible nutritionals) may receive jarred baby food fruits and vegetables in lieu of the cash value benefit. Children may receive 144 oz.; women may receive 160 oz. Additional information about special needs babies who are not developmentally ready for solid foods by 6 months of age is covered in the Special Dietary Needs section.

Selecting, Serving, and Storing Commercially Prepared Baby Foods

This is a basic review of what caregivers should know about using commercially prepared baby food.

When selecting commercial baby food:

- Do not buy sticky or stained jars or containers. Sticky or stained jars of baby food may be cracked, which exposes the food to bacteria, or they may have glass pieces on them from being packed with other cracked jars.
- Throw away jars with chipped glass or rusty lids.
- Wash or wipe off the jar or container before opening.
- Follow "Use By" dates for buying and storing unopened baby food. If the "Use By" date has passed, throw away the food.

- Check the container's vacuum seal on the lid. Baby food jars have a button or depressed area on the lid that indicates if the vacuum seal has been broken. Do not buy or use any jar of baby food if the vacuum seal has been broken (the button is popped out).

When serving and storing commercial baby food:

- Wash hands.
- Check the container's vacuum seal. A popping sound should be heard when the jar is opened. If a jar is difficult to open, run it under warm water for a few minutes. Do not tap the lid with a utensil or bang it on a hard surface; this could chip glass into the food. If a grating sound is heard when opening the jar, check if there are any glass pieces under the lid.
- Serve food from a bowl. Avoid feeding baby directly from the container. Babies usually don't finish a whole jar of food in one feeding. If a spoon used for feeding is put back into the jar, bacteria from the baby's mouth can enter the food and spoil it. Instead, take out small amounts of food from the jar with a clean spoon, and put it into a bowl for serving.
- Always throw away any leftover food from a bowl used to feed a baby; do not put it back into the container.
- Immediately store an open jar of unused food, and then use it quickly. After a jar of baby food is opened, immediately store it in a refrigerator and use the food within 48 hours. The exceptions are baby food meats and egg yolks, which should be used within 24 hours. If not used within these time limits, throw away the food.
- Be cautious when heating food in the microwave. This is because the food may heat unevenly and some parts of the food may burn baby's mouth. If using a microwave, let the food sit a few minutes, then stir well and check the temperature. Other methods for heating baby food include warming on a stove or in a food warmer.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. Breastfeeding is considered the ideal way to feed young babies because: (check all that apply)
   __a) It provides immunizing protection against certain diseases.
   __b) It is clean and not easily contaminated.
   __c) It promotes a close, affectionate relationship between mother and baby.
   __d) It is a nutritionally complete food for the baby's first 6 months.

2. Which of the following are ways WIC staff can help moms be confident and successful with breastfeeding? (check all that apply)
   __a) Embrace breastfeeding as the natural and normal way to feed all babies.
   __b) Educate pregnant moms; discuss her concerns and help her establish breastfeeding goals.

__c) Approach all women with the assumption that they are breastfeeding or plan to breastfeed.
__d) Offer formula "just in case" breastfeeding doesn't work.
__e) Offer support, resources, information; remind moms of the breastfeeding benefits to herself and her baby.

3. True or false? In situations where moms choose to not breastfeed or when circumstances that don't allow for breastfeeding, WIC provides iron-fortified commercial formula.

4. True or false? Federal regulations require WIC programs to contract with infant formula companies for cost-saving purposes.

5. True or false? If a participant doesn't want the contract infant formula, they can purchase another standard formula with their WIC benefits.

6. Which of these formulas require a health care provider's prescription before they can be provided to WIC participants? (check all that apply)
   ___a) Contract soy formula
   ___b) Exempt infant formula
   ___c) WIC-eligible nutritionals

7. Under what situations can ready-to-feed formula be given? (check all that apply)
   ___a) The family's water supply is contaminated
   ___b) The caregiver doesn't want to mix the formula
   ___c) The baby is medically fragile and needs a sterile ready-to-feed formula
   ___d) The store is out of powdered formula but has ready-to-feed

8. What would you think about a 2 month old formula-fed baby who is drinking 15 oz. of formula per day?
   ___a) The amount of formula is probably OK as long as it is iron fortified
   ___b) The amount is probably too low and the baby's weight gain and growth should be checked
   ___c) The amount is definitely too low

9. True or false? The formula amounts provided to a WIC participant vary with the baby's age, breastfeeding status, and the form of formula provided.

10. A mom of a 7-month-old calls you 3 weeks after she received her last WIC benefits and tells you she is out of formula. She thinks there must have been a mistake in the amount of formula issued. What would you tell her?
    ___a) The amount of formula provided was probably too low
    ___b) She is probably feeding her baby too much formula and needs to cut back

___c) WIC is a supplemental nutrition program and does not provide the total diet for any participant, including babies. She may need to purchase some additional formula on her own

11. A woman who is partially breastfeeding a 3-month-old and also giving her baby 3 (4-oz) bottles of formula a day (which she receives from WIC) is classified as:
    ___a) Exclusive breastfeeding.
    ___b) Partial breastfeeding – in range
    ___c) Partial breastfeeding – out of range

12. Which type of formula is best suited to give a partially breastfed 6-month-old baby?
    ___a) Powdered
    ___b) Concentrate
    ___c) Ready-to-feed

13. Why is that type of formula more appropriate?
    _____
    _____
    _____

14. Which complementary infant foods are provided to formula-fed 6 to8-month-old babies?
    ___a) Iron fortified infant cereal
    ___b) Fresh bananas
    ___c) Baby food fruits & vegetables
    ___d) Cash value benefit for fresh fruits and vegetables
    ___e) Baby food meats

15. List two developmental signs of readiness that indicate a baby is ready to start eating solid foods.

    1._____

    2._____

16. True or false? A fruit and vegetable cash value benefit is an option for 9 to 11-month-olds in lieu of some of the baby food fruits and vegetables, which gives the caregiver the opportunity to offer different textures as baby gets older.

17. Breakfast cereals can be substituted for infant cereals for babies who don't like baby cereal.

ANSWERS

1. a, b, c, d
2. a, b, c, e
3. True
4. True
5. False
6. b, c
7. a, c
8. b
9. True
10. c
11. b
12. a;
13. Due to its longer storage life, powdered formula is more appropriate for breastfed babies. It gives the mother the flexibility to mix exactly the amount needed each day and will avoid wasting the formula or encouraging her to give more formula to the baby than needed.
14. a, c
15. Any two of the following:
    - Sits up alone or with support.
    - Holds head steady and straight.
    - Opens his mouth when he sees food coming.
    - Keeps tongue low and flat to receive a spoon.
    - Closes lips over the spoon and scrapes food off as the spoon is removed from the mouth.
    - Keeps food in the mouth and swallows, rather than pushing it back out onto the chin (the baby has outgrown the tongue-thrust reflex).
16. True
17. False

Food Package Key Messages & Policy for Breastfeeding Participants

As an important team member of the Iowa WIC Program you have the following responsibilities according to our policy:

- Promoting and supporting breastfeeding is the responsibility of all WIC staff
- Educating all mothers throughout the prenatal and early postpartum period about the benefits of exclusive breastfeeding
- Not routinely providing formula to breastfed babies during the first four to six weeks of life while mother is establishing her milk supply*
- Performing assessments, providing education and using participant centered approaches to understanding each individual request for formula from a breastfeeding mother, and to determine the appropriateness of supplementation*
- Documenting a mother's plan for breastfeeding in her nutrition education record*
- Creating a care plan for an infant when formula is issued for the first time and when/if the amount of formula increases*

*Responsibilities that are for CPAs only

For medical situations, formula may be appropriate to use to supplement (short-term and long-term) breastfeeding in the first month.

When formula is issued to breastfeeding infants, you should provide the least amount needed. Mothers will have greater breastfeeding success if they continue to nurse frequently.

Highlight the value of the exclusive breastfeeding food package.

The infant food packages are based on the infant's breastfeeding description (Excl BF, Prim Excl/No F Pkg, Prim Excl/Comp, Part BF, No Longer BF, Never BF).

Background

Purpose

The WIC program is federally required to promote and support long term breastfeeding. Extensive research documents advantages to babies, mothers, families, and society due to breastfeeding and the use of human milk. In agreement with all major medical organizations and the American Academy of Pediatrics Policy Statement, *Breastfeeding and the Use of Human Milk*, each woman enrolled in the WIC Program will be encouraged to breastfeed exclusively for the first six months after birth, at which point gradual introduction of iron and zinc-enriched solid foods should complement the breast milk diet. The Academy also recommends

that breastfeeding continue for at least 12 months, and afterward for as long as mutually desired between mother and baby**. In order for mother and baby to receive the greatest health benefits from breastfeeding, breastfeeding should be exclusive and continue over time**. The longer the time, the greater the protection breastfeeding provides mom and infant. You will promote breastfeeding as the norm and will recommend every woman breastfeed, unless breastfeeding is contraindicated for health reasons. You must support the goal to have the majority of participants breastfeed exclusively.

The majority (72%) of Iowa WIC mothers start breastfeeding. Breastfeeding success is dependent upon the protection of a mother's milk supply. The amount of milk a mother produces depends on the frequency and effectiveness of the baby's suckling at the breast. When a mom is able to breastfeed her growing baby, she will develop confidence in her ability to feed. Early supplements of formula are associated with breastfeeding complications and early weaning. Giving formula supplements during the first four weeks of life is generally harmful to successful long-term breastfeeding.

Promoting and supporting breastfeeding is your responsibility as a WIC staff member. Any request for formula by a breastfeeding mom, regardless of baby's age, requires readily available breastfeeding support and advice from you and your WIC co-workers. In situations where you are unable to determine if formula is necessary, the situation must be appropriately assessed by a specially trained staff member to determine the appropriateness of supplementation for the baby. There will be some moms who choose not to breastfeed and they will continue to be treated with respect.

Infant Food Package Issuance Based on Age of Infant and Breastfeeding Assessment

Infant younger than 1 month of age

1. **Infant is exclusively breastfed**: The mother should receive a model or tailored food package for an exclusively breastfeeding woman. No food package is needed for the infant.

2. **Infant is <u>not</u> breastfed**: A fully formula-fed infant should receive a formula food package, and the mother should get a model or tailored food package for postpartum, non-breastfeeding women.

3. **Feeding breast milk and formula**: An infant who is being breastfed and formula-fed will not routinely receive a food package for formula unless medically indicated (examples below) or you conduct a thorough assessment and determine that the mother will not be breastfeeding long-term. If the mother reports she is breastfeeding and offering formula, you must find out why formula is being used or requested, and consider the age of the infant and amount of formula being routinely offered.

Medical indication: Some medical indications, such as hospitalization or illness, pose a temporary or long-term problem for breastfeeding and require supplementation of formula or banked human milk (not available through WIC). You must work with moms to determine the amount of formula that the food package will contain. You should provide the least amount of formula needed, remembering that WIC is a supplemental program and that moms will have greater breastfeeding success with maintaining milk production by emptying their breasts. Based on the amount of formula given, the mother will receive a model or tailored food package for part or not breastfeeding women since she is not exclusively breastfeeding.

You will ask mothers of infants who are receiving medically-indicated temporary supplementation what length of time the doctor recommended the supplement, particularly if the need is for a standard formula and there is no prescription. If the mother does not know, encourage she have a conversation with the doctor to clarify.

No medical indication: If there is no medical indication, provide information and troubleshoot with the mother in order for the mother to receive the Exclusively Breastfeeding food package. Find out mother's plan or goal for breastfeeding. Inform the mom of alternatives to formula such as expressing breast milk by hand or with a manual or electric breast pump. Lack of confidence in her ability to breastfeed may be a key factor explaining early formula supplementation. Address the mom's issues by suggesting ways to handle them. For example, if "baby acts hungry," then you should offer ways to increase milk supply. If "baby is doing great with combined formula feedings and breastfeeding," then you should educate about fully breastfeeding to establish a milk supply.

Situations in which moms choose to receive some formula and not receive a food package for exclusively breastfeeding women should occur only after extensive evaluation and counseling by the WIC CPA. Some non-medical reasons mothers may present could include:

- Returning to work soon and has no desire/ability to pump.
- Intent to wean over the next couple of weeks.

If after counseling and education the mother still insists she receive formula, change the infant's breastfeeding status to "part BF" and **provide only the minimum amount of formula needed.** The amount of formula the infant receives will determine which food package the mother receives.

The mother will receive a model or tailored food package for part or not-breastfeeding women since she is not exclusively breastfeeding. The mother and infant should be issued one month of food benefits and scheduled and appointment the following month to assess breastfeeding and adjust the mother's and infant's food packages as needed.

Work with the mother to create food packages that best support her breastfeeding plan, explaining that smaller formula packages may allow her to receive more food for herself with a food package for partially breastfeeding women.

Infants over 1 month of age

1. **Infant is exclusively breastfed:** The mother should receive either a model or tailored food package for an exclusively breastfeeding woman. Congratulate and praise the mother for her breastfeeding efforts, and encourage her to continue exclusively breastfeeding through her infant's first six months of life. No food package is needed for the infant until he/she is 6 months old.

2. **Feeding breast milk and formula:** If the mother reports she is breastfeeding and offering formula, find out why formula is being used or requested. Ask what the mom's breastfeeding plan or goal is. Discuss with the mom the alternatives to formula, such as breast milk collected by hand, or manual or electric breast pump expression. After counseling and education, if the mom insists she receive formula, verify that the infant's breastfeeding status is "part BF" and **provide only the minimum amount of formula needed**. The amount of formula the infant receives will determine which food package the mother receives. Explain that smaller formula packages may allow her to receive more food for herself with a food package for partially breastfeeding women.

Women's Food Packages

Women's Food Package Issuance Based on Breastfeeding Assessment

A mother's food package is based on breastfeeding assessment, the age of her baby, and how much, if any, supplemental formula her baby receives from WIC. A mother's food package is reduced if she accepts formula to supplement her breastmilk. Food package options for breastfeeding women are:

- **Exclusively Breastfeeding**. These food packages are also issued to 3 other categories of women:
    - Women pregnant with multiples
    - Women partially breastfeeding (*in range)* multiple babies from the same pregnancy
    - Pregnant women who are also partially (*in range*) breastfeeding one baby
- **Pregnant or Part BF In Range**, receiving an ***in range*** amount of formula for her baby. These food packages are also issued to pregnant women.
- **Not BF or Part BF Out of Range**, receiving an ***out of range*** amount of formula for her baby. These food package are also used for *postpartum, non- breastfeeding* woman receiving a full formula package for baby.
- **Exclusively Breastfeeding Multiples**. Women who exclusively breastfeed multiple babies, such as twins, receive 1.5 times the normal exclusively breastfeeding package.

The charts on the following pages summarize the Iowa WIC Foods and the components and corresponding nutrition principles of the food packages for each category of participant.

Summary of Iowa WIC Food Packages

Infants

	Infant 0-3 mo.	Infant 4-5 mo.	Infant 6-8 mo.	Excl BF Infant 6-8 mo. [a]	Infant 9-11 mo.	Excl BF Infant 9-11 mo.
Infant Formula [b]	870 oz. pwd 823 oz. conc -or- 832 oz. RTF	960 oz pwd 896 oz conc -or- 913 oz RTF	696 oz pwd 630 oz conc -or- 643 oz RTF	--	696 oz pwd 630 oz conc -or- 643 oz RTF	--
Infant Cereal	--	--	24 oz.	24 oz.	24 oz.	24 oz.
Baby Food Fruit/Veg.	--	--	128 oz.	256 oz.	128 oz. **-or-** 64 oz. + $4 CVB	256 oz. **-or-** 128 oz. + $4 CVB+ $8 CVB
Baby Food Meat	--	--	--	77.5 oz.	--	77.5 oz.

Children and Women

	Child 1 year	Child 2-4 yr.	Pregnant/ Part BF In Range Woman	Postpartum/ Part BF Out Range Woman	Excl BF Woman [c]	Excl BF Multiples
Milk [d, e, f]	16 qt. whole	16 qt. 1%/fat free	22 qt. 1%/fat free	16 qt. 1%/fat free	24 qt. 1%/fat free	36 qt. 1%/fat free
Cheese [g]	1 lb. may replace 3 qt. milk	1 lb. may replace 3 qt. milk	1 lb. may replace 3 qt. milk	1 lb. may replace 3 qt. milk	1 lb. – *and* 1 lb. may replace 3 qt. milk	1 ½ lb. – *and* 1/2 lb. may replace 2 qt. milk
Eggs	1 dozen	1 dozen	1 dozen	1 dozen	2 dozen	3 dozen
Juice	2 64-oz containers	2 64-oz containers	3 12-oz frozen conc	2 12-oz frozen conc	3 12-oz frozen conc	4 -48 oz. Convenience packs
Breakfast Cereal	36 oz.	36 oz.	36 oz.	36 oz.	36 oz.	54 oz.
Whole Grains	32 oz.	32 oz.	16 oz.		16 oz.	24 oz.
Beans and/or Peanut Butter	1 lb. dry beans or 4 15-16 oz. canned beans or 18 oz. peanut butter	1 lb. dry beans or 4 15-16 oz. canned beans or 18 oz. peanut butter	1 lb. dry beans or 4 15-16 oz. canned beans or 18 oz. peanut butter	1 lb. dry beans or 4 15-16 oz. canned beans or 18 oz. peanut butter	1 lb. dry beans or 4 15-16 oz. canned beans or 18 oz. peanut butter	1 lb. dry beans or 4 15-16 oz. canned beans or 18 oz. peanut butter
F/V CVB	$9.00	$9.00	$11.00	$11.00	$11.00	$16.50
Canned Fish	--	--	--	--	30 oz.	45 oz.

[a] Reconstituted ounces of infant formula.

[b]Exclusively BF infants 0-6 months are counted as WIC participants even though they are not issued food benefits.

[c] Exclusively BF woman's package also issued to women pregnant with multiples, women partially (mostly or "in range") breastfeeding multiples from the same pregnancy, pregnant women who are also partially (mostly or "in range") breastfeeding singleton infants.

[d] Soy milk may be substituted for cow's milk at the rate of 1 quart soy milk per 1 quart cow's milk. The CPA may determine and document the need for soy milk. Determination must be based on an individual nutritional assessment and consultation with the participant's health care provider if necessary. Such determination can be made for situations that include, but are not limited to milk allergy, lactose intolerance, vegan diets or religious reasons (i.e. kosher).

[e] Tofu may be substituted for cow's milk at the rate of 1 lb. tofu per 1 quart milk. The CPA may determine and document the need for tofu. Determination must be based on an individual nutritional assessment and consultation with the participant's health care provider if necessary. Such determinations can be made for situations that include, but are not limited to milk allergy, lactose intolerance, vegan diets or religious reasons (i.e. kosher diet).

[f] Yogurt may be substituted for cow's milk at the rate of 1 quart yogurt per 1 quart milk. A maximum of 1 quart of milk may be substituted. Additional amounts of yogurt are not authorized. Whole yogurt is the standard yogurt for issuance to 1-year-old children (12 through 23 months). Low fat or nonfat yogurt may be issued to 1-year old children for whom overweight and obesity are a concern. Low fat or nonfat yogurts are the only types of yogurt authorized for children $\geq$ 24 months of age and women.

[g] Maximum substitution of milk for cheese:
Children: 3 quarts (maximum 1 pound cheese)
Pregnant, Postpartum and Partially (Mostly) BF Women: 3 quarts (maximum 1 pound cheese)
Exclusively BF Women: 6 quarts (maximum 2 lb. cheese).

Allowed Substitutions:

- When both beans and peanut butter are provided, beans may be substituted for peanut butter and vice versa (no peanut butter and either 2 lb. beans or 8 cans beans or 1 lb. beans and 4 cans beans -or- 36 oz. peanut butter and no beans)
- Canned evaporated milk may be substituted for fresh at the rate of one 12-oz can per quart fresh milk.
- Powdered milk may be substituted for fresh at an equal reconstituted rate.
- Infant cereal (32 oz.) may be substituted for 36 oz. breakfast cereal for women and children receiving WIC-nutritionals (formulas).
- A maximum of one quart yogurt may be substituted for one quart fluid milk.

Standard milk types:

- Whole milk is the standard milk for one year old children (12-23 months).
- Low fat (1% or fat free) milk is the standard milk for women and 2-4 year old children (24-59 months).

Summary of the WIC Food Packages

Pregnant and Partially Breastfeeding In Range Women

Food Package	Nutrition Principle
1. The food package contains milk, eggs, cereals, whole grains, juice, fruits and vegetables, beans and peanut butter.	These foods are high in protein, iron, calcium, vitamin A, vitamin C; they represent servings from each of the major foods groups and can be used to supplement a well-balanced diet.
2. The amount of milk allowed is 22 quarts per month.	This amount is adequate to meet nutrient needs, especially calcium, without supplying an excess amount.
3. One pound of cheese may be substituted for 3 quarts fresh milk.	Limits the use of this higher fat food item, but still allows variety in the food package.
4. One percent or fat free milk.	1% or fat free milk contains the equivalent vitamins and minerals found in whole milk & helps reduce the overall fat and cholesterol level in the diet.
5. Cereals limited to those high in iron and low in sugar.	The iron requirement for pregnancy is very high and iron-deficiency anemia is a common and significant problem; low sugar foods reinforce principles of good nutrition and dental health.
6. One pound of whole grains.	Whole grains contain fiber and more vitamins and minerals than refined grain foods. Fiber helps maintain a healthy digestive system, and reduces the risk of obesity and diseases such as coronary heart disease and type 2 diabetes.
7. $11 cash value benefit for purchasing fruits and/or vegetables.	Fruits and vegetables are low in calories and high in fiber, vitamins and minerals. Eating more fruits and vegetables reduces the risk of certain chronic diseases.
8. Juices high in vitamin C and with no sugar added. Three (3) 12 oz. cans frozen concentrate juice may be given.	Foods without added sugar reinforce principles of good nutrition and dental health; juices, which are highest in vitamin C, can best help meet the daily nutrient needs.

Exclusively Breastfeeding Women

Food Package	Nutrition Principle
1. 30 oz. canned salmon or tuna fish.	Cold water fish such as salmon and tuna are good sources of protein and healthy omega-3 fatty acids that is beneficial for brain development, and is protective against heart disease. The addition of fish in the food package provides an extra incentive to continue exclusively breastfeeding.
2. The food package contains milk, cheese, eggs, cereals, whole grains, juice, fruits and vegetables, canned fish, beans and peanut butter.	These foods are high in protein, iron, calcium, vitamin A, vitamin C; they represent servings from each of the major foods groups and can be used to supplement a well-balanced diet.
3. The amount of milk allowed is 24 quarts per month, plus one pound of cheese.	This amount is adequate to meet nutrient needs, especially calcium, without supplying an excess amount.
4. One percent or fat free milk.	1% or fat free milk contains the equivalent vitamins and minerals found in whole milk. Use of 1% or fat free milk helps reduce the overall fat and cholesterol level in the diet.
5. One pound of additional cheese may be substituted for 3 quarts of fresh milk. Note: One pound of cheese is a part of the standard food package and is not a substitution for milk nor can it be replaced with other milk products.	Limits the use of this food item that is also higher in fat, but still allows variety in the food package.
6. Cereals that are limited to those high in iron and low in sugar.	The iron requirement for breastfeeding is high and iron-deficiency anemia is a common and significant problem; low sugar foods reinforce principles of good nutrition and dental health.
7. One pound of whole grains.	Whole grains contain fiber and more vitamins and minerals than refined grain foods. Fiber helps maintain a healthy digestive system, and reduces the risk of obesity and diseases such as coronary heart disease and type 2 diabetes.
8. $11 cash value benefit for purchasing fruits and/or vegetables	Fruits and vegetables are low in calories and high in fiber, vitamins and minerals. Eating more fruits and vegetables reduces the risk of certain chronic diseases.

Food Package	Nutrition Principle
9. Juices high in vitamin C and with no sugar added. Three (3) 12 oz. cans frozen concentrate juice may be given.	Foods without added sugar reinforce principles of good nutrition and dental health; juices, which are highest in vitamin C, can best help meet the daily nutrient needs.

Postpartum and Partially Breastfeeding Out of Range Women

Food Package	Nutrition Principle
1. Postpartum women receive less food than pregnant or breastfeeding women.	In general, the nutrient needs of postpartum women are less than for pregnant or breastfeeding women.
2. The food package contains milk, eggs, cereals, juice, fruits and vegetables, and beans **or** peanut butter (no whole grains).	These foods are high in protein, iron, calcium, vitamin A, vitamin C; they represent servings from each of the major foods groups and can be used to supplement a well-balanced diet.
3. The amount of milk allowed is 16 quarts per month.	This amount is adequate to meet nutrient needs, especially calcium, without supplying an excess amount.
4. One pound cheese may be substituted for 3 quarts fresh milk.	Limits the use of this food item that is also higher in fat, but still allows variety in the food package.
5. 1% or fat free milk.	1% or fat free milk contains the equivalent vitamins and minerals found in whole milk. Use of 1% or fat free milk helps reduce the overall fat and cholesterol level in the diet.
6. Cereals are limited to those high in iron and low in sugar.	The iron requirement for postpartum women is not as high as pregnancy, however, iron-deficiency anemia is a significant common in the WIC population and low sugar foods reinforce principles of good nutrition and dental health.
7. $11 cash value benefit for purchasing fruits and/or vegetables	Fruits and vegetables are low in calories and high in fiber, vitamins and minerals. Eating more fruits and vegetables reduces the risk of certain chronic diseases.

Food Package	Nutrition Principle
8. Juices are limited to those high in vitamin C and with no sugar added. Two (2) 12 oz. cans frozen concentrate juice may be given.	Foods without added sugar reinforce principles of good nutrition and dental health; juices, which are highest in vitamin C, can best help meet the daily nutrient needs.

Child Food Packages

Food Package	Nutrition Principle/Rationale
1. The food package contains milk, eggs, cereals, whole grains, juice, fruits and vegetables, and beans **or** peanut butter.	These foods are high in protein, iron, calcium, vitamin A, vitamin C; they represent servings from each of the major foods groups and can be used to supplement a well-balanced diet.
2. The amount of milk allowed is 16 quarts per month.	This amount is adequate to meet nutrient needs, especially calcium, without supplying an excess amount.
3. One pound of cheese may be substituted for 3 quarts fresh milk.	Limits the use of this relatively expensive food item that is also higher in fat, but still allows variety in the food package.
4. Whole milk is required for children under two years of age to supply essential fats needed for growth. 1% or fat free milk is required for children after 2 years of age.	1 to 2 years of age: Whole milk is given to provide adequate fats to support growth and development in the age group. After two years of age: 1% or fat free milk contains the equivalent vitamins and minerals found in whole milk. Use of 1% or fat free milk helps reduce the overall fat and cholesterol level in the diet.
5. Cereals are limited to those high in iron and low in sugar.	The iron requirement for young children is very high and iron-deficiency anemia is a common and significant problem; low sugar foods reinforce principles of good nutrition and dental health.
6. Two pounds of whole grains.	Whole grains contain fiber and more vitamins and minerals than refined grain foods. Fiber helps maintain a healthy digestive system, and reduces the risk of obesity and diseases such as coronary heart disease and type 2 diabetes.
7. $9 cash value benefit for purchasing fruits and/or vegetables	Fruits and vegetables are low in calories and high in fiber, vitamins and minerals. Eating more fruits and vegetables reduces the risk of certain chronic diseases.

Food Package	Nutrition Principle/Rationale
8. Juices are limited to those high in vitamin C and with no sugar added. Two 64-oz containers of refrigerated or bottled juice is provided.	Foods without added sugar reinforce principles of good nutrition and dental health; juices, which are highest in vitamin C, can best help meet the daily nutrient needs.

Infant Food Packages

Nutrition Principle	Rationale
• Breastfeeding is encouraged for all WIC babies.	Breast milk is nutritionally complete, easy to digest, requires no mixing or preparation so it is clean and not easily contaminated or subject to incorrect mixing; it provides immunizing protection.
• For non-breastfed babies, iron-fortified commercially prepared formula is provided.	Formula is the best alternative to breast milk. They are nutritionally complete for the first 4-6 months. The iron in the formula is important to help prevent iron-deficiency anemia.
• Powdered formula is issued for breastfed babies if supplemental formula is needed.	Powdered formula provides the flexibility to mix exactly the amount of formula wanted; it is less apt to lead to waste or over supplementation of formula.
• Ready-to-feed (RTF) formula may only be issued under special circumstances.	RTF formula is more expensive than powdered or concentrated formula.
• Food packages with infant foods can be issued when the baby is 6 months of age.	Babies have no nutrition need for solids until around 6 months of age; developmentally, they are not ready for solids until around 6 months of age.
• Infant Cereal must be plain and iron-fortified.	When introducing solids to babies, plain (not mixed or combination) foods should be used to make it easier to identify intolerances or allergies; food iron sources in the diet are important for babies.
• Jarred baby food fruit and vegetables issued when the baby is 6 months of age.	Jarred baby foods provide a good variety of ready-to-serve fruits and vegetables for babies. The small size of the containers allows the food to be consumed within the safe storage period for refrigerated opened baby foods.

Nutrition Principle	Rationale
• Babies 9 to 11 months old may be issued a cash value benefit in lieu of some commercial jarred infant foods.	Providing fresh fruits & vegetables for older babies is an opportunity to provide developmentally appropriate textures as babies transition to table foods.
• Exclusively breastfed babies receive twice as much baby food fruit and vegetables and 31 (2.5-oz) jars of baby food meat.	Baby meats provide a good source of iron and zinc. Fully breastfed babies receive more food as an incentive to continue breastfeeding.

SECTION III: ASSIGNING FOOD PACKAGES

When assigning food packages in Focus, **model food packages** meeting the participant's specific category and "profile" (such as breastfeeding status or formula range) will display in a drop down box. From the food package screen, you have the ability to:

- Assign one of the displayed model food packages.
- Select a model and then tailor it.
- Create a new food package.

Model Food Packages are specific combinations of foods most frequently issued to participants.

This section gives general information about food packages and assigning model food packages; tailoring and creating new food packages will be discussed in section IV: *Food Package Tailoring*.

When infant packages are assigned, Focus will automatically "update" the food package for all infants to add baby foods when the infant is 6 months old, as well as to change the amount of formula at 4 and 6 months of age for fully formula fed infants. Issuing food packages with the infant CVB for 9 to 11 month olds is an option that requires a thorough nutritional assessment, and is not automatically updated. With breastfeeding mom/baby pairs, Focus looks at the amount of formula provided – if any- to determine the appropriate package for the mom. Verifications in Focus ensure that the types of foods issued (such as whole milk vs. 1% or fat free milk) are appropriate for the category and age of participant and that the amounts issued do not exceed the federal maximum amounts.

The participant's age or category at the first day of the month is used to determine the appropriate package. For example, a baby who turns 4 months old July 5 will receive a "0-3 month" package for July and "4-5 month" packages for August and September. Starting in October the baby will receive "6-8 month" package.

A participant's return appointment may not necessarily coincide with when they run out of WIC benefits.

For example, a participant is given a July 11 appointment even though they already have benefits until July 31.

eWIC food benefits are valid from the first day of the month to the last day of the month, regardless of when they were issued, with one exception. The first month issuance for newly enrolled participants will have a "first date to use" matching the actual day of enrollment.

Participants who are issued benefits mid-to-late month will receive prorated amounts of food for that month. Proration means that a participant's food package is decreased to meet the participant's needs for a shorter period– typically when the participant enrolls on WIC after the 10th of the month. The food in the prorated food package is to supplement the participant's diet in the days remaining in the month.

The following chart shows when a participant will receive a full, 2/3, or 1/3 package depending on when benefits are issued during the month. These are predetermined by the WIC data system and Focus will automatically prorate the food package appropriately.

Days in a Month	Days to Issue a Full Package	Days to Issue a 2/3 Package	Days to Issue a 1/3 Package
28 Days - February	1,2,3,4,5,6,7,8	9,10,11,12,13, 14,15,16,17,18	19,20,21,22,23, 24,25,26,27,28
29 Days - February	1,2,3,4,5,6,7,8,9	10,11,12,13,14, 15,16,17,18, 19	20,21,22,23,24, 25,26,27,28, 29
30 Days – April, June, Sept., Nov.	1,2,3,4,5,6,7,8,9, 10	11,12,13,14,15, 16,17,18,19, 20	21,22,23,24,25, 26,27,28,29, 30
31 Days – Jan., March, May, July, August, Oct., Dec.	1,2,3,4,5,6,7,8,9, 10, 11	12,13,14,15,16,17,18,19, 20,21	22,23,24,25,26, 27,28,29,30, 31

Iowa is on a tri-monthly food benefit issuance system, which means that the majority of WIC participants are issued benefits for 3 months at one time. Prorated benefits are considered one month of issuance; therefore participants receiving prorated benefits may be issued two months of full benefits in addition to the prorated food package.

Redeeming Benefits

WIC participants may redeem all Iowa WIC benefits at Iowa WIC-authorized grocery stores. Only formula may be redeemed at WIC-authorized special purpose vendors.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. True or false? The monthly WIC food package provides foods to supplement the participant's diet for a period of 30 days, and will be prorated if there are only 25 days left before the next month of benefits are valid.

2. True or false? A prorated month's benefit counts as one month of food issuance.

3. True or false? Model food packages contain the maximum amount of WIC foods in the most commonly used combinations.

4. True or false? When a baby turns 6 months old, the computer system automatically changes the food package to add baby foods.

5. True or false? When a baby turns 9 months old, the computer system automatically changes the food package to add the infant cash value benefit.

6. True or false? Participants may redeem WIC benefits at any authorized grocery store or special purpose vendor in Iowa.

ANSWERS

1. False – proration occurs when there are closer to <20 days left before the next set of benefits are valid
2. True
3. True
4. True
5. False
6. False (non-formula benefits, such as milk, cereal, and juice, may not be purchased at authorized special purpose stores)

Section IV: Food Package Tailoring

Food package tailoring means assigning a specific WIC food package to meet the special nutritional needs and preferences of individual participants. The food packages as described in the previous section are tailored according to federal and state guidelines. Federal regulations require that the full maximum monthly allowances of all supplemental foods must be made available to participants if medically or nutritionally warranted. Providing less than the maximum monthly allowances of supplemental foods to an individual WIC participant is appropriate only when:

1) Medically or nutritionally warranted. For example, to remove a food due to a food allergy.
2) A participant refuses or cannot use the maximum monthly allowance.

An equally important part of food package tailoring is **individual tailoring.** Individual food package tailoring involves development of a unique food prescription based on individual factors about a participant. This approach helps ensure that the types and amounts of WIC foods issued are best suited to the needs, preferences, and home environment of the participant. You may choose a couple options when assigning food packages:

- Select a model (easiest).
- Select a model and tailor it by modifying selected food items.
- Create a food package "from scratch."

Note: When tailoring or creating a new food package, the federal and state maximums apply; participants may never be issued foods in amounts that are more than the federal maximum.

Advantages to food package tailoring include the following:

- Strengthens nutrition education and counseling provided to participants.
- Helps to best meet the specific nutrition needs of participants and may better contribute to lessening the participants' specific nutrition risk factors.
- Prevents food waste and is a responsible use of WIC funds.

Factors to consider when individually tailoring a participant's food package include:

- Typical food intake patterns
- Food aversions
- Household production of WIC foods
- Religious reasons prohibiting intake of WIC foods

Participant Category

The category and profile (such as breastfeeding status, formula range) of the participant defines which food package to assign. Some of the variations allowed by federal regulation are described below.

Women pregnant with multiples (twins, triplets or more) are eligible to receive a food package that is equal to that of exclusively (fully) breastfeeding women.

Category change after delivery. When a woman's category changes from pregnant to fully breastfeeding, she becomes eligible for the exclusively breastfeeding food package. You will complete a recertification first, thus changing the woman's category to breastfeeding. Model food packages appropriate for the women's category will display in Focus.

Breastfeeding women and babies. As discussed in the Infant Foods section, the amount of breastfeeding determines the food packages for breastfeeding women and baby pairs. The WIC foods packages help to support and protect breastfeeding. WIC's goal is that all babies are breastfed. You will need to do a thorough assessment, select the baby's breastfeeding description (such as Excl BF, part BF), and assign the baby's food package before Focus will display the appropriate model food packages for the breastfeeding mom. Refer to the table on the following page showing descriptions of food packages for mother/baby pairs. Some food package combinations are:

- Exclusively breastfeeding mom and baby pair.
    - Issue mom an exclusively breastfeeding food package until her baby turns one year old (she will receive this through the end of the month in which her child turns one).
    - At 6 months of age, issue the baby a food package containing infant cereal, baby food fruits and vegetables, and baby food meats.
- Partially breastfeeding in range mom and baby pair.
    - Assess the amount of formula the baby is taking and identify the baby's breastfeeding description in Focus. As long as baby is receiving no more than the "in range" amount of formula, Focus will allow the mom to be issued a "pregnant and partially breastfeeding" food package.
    - Assign the baby a "BF Part In Range" food package. The formula amounts listed in the model food packages are the maximum "in range" amount. You can tailor to decrease the formula amount as appropriate.
    - Assign the mom a "pregnant and partially breastfeeding" food package and continue issuing it until her baby turns one year old or she stops breastfeeding.
- Partially breastfeeding out of range mom and baby pair.
    - Assess the amount of formula the baby is taking, and identify the baby's breastfeeding description in Focus. Select a "BF Part Out Range" model food package and tailor as needed to provide no more formula than the amount needed (which, in this example, will be "out of range"). Focus will then allow the mom to be issued a "Not BF or Part BF Out of Range" food package.
    - Assign mom a "Not BF or Part BF Out of Range" food package. When her baby turns 6 months old Focus will no longer issue a food package to the mom, but will

count the woman as a participant until her baby turns one year old or she stops breastfeeding.

Exclusively breastfeeding multiple babies. Women who are exclusively breastfeeding multiple babies are entitled to 1 ½ times the amount of food as for exclusively breastfeeding women. Women exclusively breastfeeding multiples babies receive the "exclusively breastfeeding multiples" food packages.

Partially breastfeeding multiple babies. Women who are partially breastfeeding multiples may be issued an exclusively breastfeeding food package as long as the total amount of formula provided keeps her in-range. In the case of twins, if both infants are using WIC formula, they both should be given a food package to ensure accurate breastfeeding is being collected. Assigning formula to just one twin will not result in a greater food package for mom.

Pregnant woman and breastfeeding a baby. Women who are pregnant and either exclusively or partially ("in range") breastfeeding a baby are entitled to the "exclusive breastfeeding" food package. Women who are pregnant and exclusively breastfeeding multiple babies are entitled to the "exclusively breastfeeding multiples" food package. Women who are pregnant and partially breastfeeding a baby out of range are entitled to the "pregnant and partially breastfeeding" food package.

Why does WIC not provide food benefits for Partially Breastfeeding Out of Range women after 6 month postpartum?
To promote exclusive breastfeeding, all women who choose to breastfeed are encouraged to breastfeed exclusively in the first month after delivery, and will receive the exclusively breastfeeding food package. After the first month postpartum, partially breastfeeding women may receive up to half the maximum amount of formula for a formula-fed baby of the same age. Moms requesting more than that amount of formula are no longer eligible for the partially breastfeeding food package. If the request for additional formula is made before 6 months postpartum, moms can receive a postpartum/partial breastfeeding food package. If the request is made after 6 months postpartum, mom remains on the Program and is eligible to receive education and breastfeeding support, but not provided WIC foods for themselves. Whenever possible, you should encourage the mom to breastfeed more, accept less WIC formula, and thus be eligible to continue receiving food benefits for herself.

Summary Tables of Food Packages

Fully breastfed			Partially (mostly) breastfed		Fully formula-fed	
Foods	**I-BF 0-5 mo.**	**II–BF 6-11 mo.**	**I-BF/FF and III BF/FF A: 0 to 1 mo. B: 1-3 mo. FNB 364 oz. C: 4-5 mo. FNB 442 oz.**	**II-BF/FF and III BF/FF 6-11 mo. FNB 312 oz.**	**I-FF and III-FF A: 0-3 mo. FNB 806 oz. B: 4-5 mo. FNB 884 oz.**	**II-FF and III-FF 6-11 mo. FNB 624 oz.**
WIC formula						
Powder	---	---	A: 104 oz. B: 435 oz. C: 522 oz.	384 oz.	A: 870 oz. B: 960 oz.	696 oz.
Concentrate	---	---	A: 104 oz. B: 388 oz. C: 460 oz.	315 oz.	A: 823 oz. B: 884 oz.	630 oz.
Ready-to-feed	---	---	A: 104 oz. B: 384 oz. C: 474 oz.	338 oz.	A: 832 oz. B: 913 oz.	643 oz.
Infant foods						
Cereal	---	24 oz.	---	24 oz.	---	24 oz.
Fruits & vegetables	---	256 oz.**	---	128 oz.**	---	128 oz.**
Meats	---	77.5 oz.	---	---	---	---

Definitions:
Full nutrition benefit (FNB) is the minimum amount of reconstituted fluid ounces of liquid concentrate infant formula as specified for each infant food package category and feeding variation.
Maximum monthly allowance (MMA) is specified in reconstituted fluid ounces for liquid concentrate, RTF liquid and powder forms of infant formula and exempt infant formula.
****Note:**
A $4 CVV can be provided in lieu of 64 oz. of infant fruits and vegetables in the Partially (mostly) Breastfed and the Fully Formula-fed infant food packages once the infant reaches 9 months of age. An $8 CVV can be provided in lieu of 128 oz. of infant fruits and vegetables for a Fully Breastfeeding infant during the 9-11 month time period if the parent chooses.

The "Exclusively Breastfeeding" food package for babies is only for those babies who are identified with a description of "Excl BF," "Prim Excl/No F Pkg," or "Prim Excl/Comp" and is the only category of participant that may receive baby food meats and twice the amount of baby food fruits and vegetables. Babies with the above breastfeeding descriptions are not routinely receiving any formula from WIC or an outside source. (Refer to the table on page 31 for the baby's breastfeeding descriptions.) Note that if a baby is formula fed, even if the mom does not receive any formula from WIC (such as mom buys formula on her own or formula is provided through Medicaid) the baby is NOT eligible for the baby food meats or extra baby food fruits and vegetables. Nor is the mom entitled to an exclusively breastfeeding food package, as the breastfeeding food packages exist to support the unique nutritional requirements for breastfeeding mothers and babies. In those situations, the baby's breastfeeding description in Focus should be "Part BF," "No Longer BF" or "Never BF" and the mom will then be assigned a "Preg/Part BF in Range or "Not BF/ Part BF out of Range" food package and the baby should be assigned a food package with infant cereal and baby food fruits and vegetables.

WIC foods are for participants only

The foods WIC provides are for the participant only and are not intended for the rest of the family. If a participant doesn't want all the foods in their food package, do not recommend that they purchase the food and give it to other family members.

Children between the age of 12 and 23 months are assigned child packages that contain whole milk. Children 24 months up to 5 years of age are assigned child packages that contain 1% or fat free milk.

Personal Preference

Participants may not always want all the foods or the amounts that are available in the model food packages. They may also have limited cooking and food storage or have religious or cultural concerns about specific foods. In those situations, you have several options to offer:

- Use the foods list to suggest an option that works for their situation (such as cold cereal instead of hot cereal; purchasing milk in quarts or half gallons instead of full gallons)
- Suggest that the participant only purchase what they will need or use.
- Select a different model food package (such as a model that contains cheese and yogurt if the participant doesn't want the maximum amount of milk)
- Tailor the food package to substitute other allowed WIC foods or remove ones that are unwanted

The option you choose depends on the participant's needs. Below are some participant preferences and possible solutions.

Participant wants only organic foods

- Explain to the participant that due to the higher cost, WIC does not provide organic foods except for fruits and vegetables. The Cash Value Benefit (CVB) may be used to purchase organic fruits and vegetables.

Participant requests a vegetarian or vegan food package

- With the exception of canned fish and baby food meats for exclusively breastfeeding mom/baby pairs, all of the WIC foods are vegetarian.
- A participant who wants vegan foods could be offered a food package with soy milk and tofu as substitutions for milk and cheese. No vegan substitution is provided for eggs. You can remove the eggs from the food package.

Participant can't use all the food

- Either suggest that the participant only purchase the amount of foods that they can use or reduce the amount of food per the participant's request. Offer suggestions as appropriate. For example, a participant who has too much peanut butter may choose to purchase canned or dry beans; a participant with too much brown rice may choose to purchase corn tortillas or whole wheat bread. If you reduce the amount of food, make sure the participant knows they will be receiving less than the maximum they are eligible for. Document this in Focus by leaving a comment on the Food Package panel.
- Offer an infant CVB for fresh fruit and vegetables for 9 to 11 month old babies in lieu of half of the baby food fruits and vegetables. Assignment of these food packages does not require additional documentation.

Participant doesn't like certain foods in the package and won't buy them

- Start with a model food package and tailor out the foods that the participant doesn't want or need.
- If the participant doesn't want cheese, tailor a food package to remove the cheese and offer additional milk. Three additional quarts of milk may be provided in lieu of 1 pound of cheese.

Living Situation

Some participants live in situations where they may have unsafe water, or limited refrigeration or food storage. Below are food package options in those specific situations.

Participant has an unsafe water supply

- For women and children, encourage the purchase of fluid milk. You may also assign "bottled" juices instead of frozen concentrate.

- Encourage participant to purchase foods that do not require water for preparation (such as bread instead of brown rice, cold cereal instead of hot cereal, peanut butter instead of dry beans).
- For babies on formula, assign food packages with ready-to-feed formula.

Participant is institutionalized (such as hospital or jail)

- If a participant is in an institution that is responsible for feeding them, such as a hospital, long term care facility or jail, a WIC food package cannot be provided until they are discharged. In those situations, document why no foods are being provided to the participant.

Participant is going to be out of the country or state for several months and requests purchasing food in advance of leaving

- WIC provides food benefits for participants that are valid on a monthly basis. You may issue 3 months of benefits at a time, however, the participant may only redeem benefits within the valid period. Iowa WIC benefits may not be redeemed in other states.

Participant is homeless, in a shelter, or has limited safe storage for food

- Assess the living situation to determine the best food package options.

Homeless Food Package Guidelines

WIC Food	Refrigeration, dry storage, and cooking	NO refrigeration and NO cooking facilities with dry storage
Milk	Same as regular food package whereby participant may receive benefits for fluid milk in quarts, half-gallons or gallons - or- powdered or evaporated milk.	Powder
Cheese	Substitute for milk - same as regular food package	Don't substitute powdered milk for cheese
Eggs	Same as regular food package	No substitution available
Juice	Same as regular package	Same as regular package
Breakfast cereal & infant cereal	Same as regular package	Same as regular package
Whole grains	Same as regular package	Same as regular package
Peanut butter and Beans	Same as regular package: participant has a choice of peanut butter, dry or canned beans	Encourage purchase of peanut butter or canned beans
Canned fish	Same as regular package	Encourage purchase of single serving size cans
Fruit & Vegetable voucher	Same as regular package	Encourage purchase of items that do not require cooking or refrigeration such as apples, oranges, carrots, etc.
Formula	Powder or liquid conc. or ready-to-feed	Powder

- Information regarding storage, transportation, ability to access the grocery store, and use of specific food items should be asked to help you determine, in partnership with the participant, what food package would best meet their needs when certifying the participant. Provide the maximum food package that will be safe and sanitary.

- If the person is living in a shelter, the WIC foods must be kept separate from the facility's general food supply and be used by the participant only.

- Iowa WIC regulations allow local agency staff to tailor the WIC food package to accommodate the unique individual needs, circumstances and living situations of homeless participants.

- No exemptions or exceptions are allowed from the requirement for medical documentation to support the issuance of exempt infant formulas and WIC-eligible medical foods.

- Participants can purchase as many or as few items as desired per shopping trip.

- Participants who do not have access to a safe water supply, no refrigeration, or limited storage should be offered options such as powdered milk.

- If proper refrigeration is not available fluid milk, including evaporated, should not be issued to the participant.

- Breastfeeding should be encouraged as the easiest and safest way to feed the infant. Formula-fed infants should be offered powdered formula, mixed one bottle at a time. Ready-to-feed formula may be issued according to Iowa WIC Food Package Tailoring Guidelines.

Nutrition Risk Factors

Consider the participants' nutrition risk factors (NRFs) when assigning food packages. In fact, this is the clearest link between your counseling and the food packages. Dietary recommendations made to participants based on their NRFs should be reflected and reinforced by the WIC foods they receive.

Because there are so many risk factors and so many different combinations of risk factors seen among our participants, there are no blanket rules for the types and amounts of foods that should be issued. However, below are examples of changes to consider. Many others may occur to you as you work with the individual participants.

Underweight or inadequate weight gain

An underweight participant or a participant with inadequate weight gain may need to choose higher calorie foods. Provide counseling on ways to increase calories, such as:

- Purchasing peanut butter instead of beans
- Adding shredded cheese to eggs or casseroles
- Including sliced avocado on sandwiches and wraps
- The CPA may authorize whole milk for women and children over the age of two if they are on a special medical formula AND the CPA determines a need for higher calorie whole milk

Overweight or excessive weight gain

Overall, WIC foods are fairly low in calories and options for lowering the calories come more from food preparation methods than from the specific WIC food choices. Provide counseling on ways to prepare foods that do not add extra calories, such as:

- Choosing lower-calorie foods (i.e., fat free milk instead of 1%)
- Purchasing beans instead of peanut butter
- Buying reduced fat cheese
- The CPA may authorize 1% or fat free milk to children less than two years of age who meet certain criteria (refer to the Milk, Cheese, Soy Milk, Tofu, Yogurt section of this module)

Anemia

- Encourage participants to purchase the WIC cereals that are highest in iron
- Encourage participants to purchase beans instead of peanut butter since most beans are higher in iron than peanut butter (see sidebar above)
- Provide counseling on ways to increase dietary iron. Encourage participants to have WIC juice and cereal at the same meal, because the vitamin C in the juice will enhance the absorption of the iron in the cereal
- Encourage participants to limit excessive dairy intake as this inhibits iron absorption

Food Allergies

Special considerations must be given to participants with allergies or intolerances to certain WIC foods. In some situations, dietary recommendations are needed but the food package doesn't need to be altered. In other situations, you will need to alter the food package to provide an appropriate substitute. In still other situations, you will need to remove one or more allergy-causing foods.

Food intolerances or food sensitivities are not the same as food allergies because the immune system is not causing the problem. Lactose intolerance is an example of a food intolerance that is often confused with a food allergy.

Examples when dietary recommendations are needed for food allergies but the food package doesn't need to be changed"

- If a participant is allergic to wheat, has celiac disease, or is gluten intolerant (see sidebar on page 65), advise the participant to purchase Rice Chex, Corn Chex, Cheerios, or Cream of Rice cereal, as well as brown rice or corn tortillas (instead of whole wheat bread), which are wheat-free and gluten-free
- If a participant is allergic to peanuts, encourage the purchase of beans, peas, or lentils

Examples when dietary recommendations are needed for food allergies and substitutes need to be provided.

- If a participant is allergic to peanuts, tailor the food package to provide beans instead of peanut butter
- If a woman or child is allergic to milk and dairy products, issue a food package with soy milk and tofu. A prescription is not needed
- If a baby is allergic to cow's milk, issue a soy-based formula
- If a baby is allergic to standard contract formulas, with a prescription and approval from a WIC CPA, issue an exempt infant formula

Examples when dietary recommendations are needed for food allergies and one or more food must be removed from the food package.

- If a participant is allergic to eggs, issue a food package without eggs (remove the eggs from a model food package)
- If a woman or child is unable to eat regular foods, with an approved prescription, issue an exempt infant formula or WIC-eligible nutritionals, and any additional supplemental foods prescribed by the physician

Celiac Disease/ Gluten Intolerance

Celiac disease is an inherited, autoimmune disease in which the lining of the small intestine is damaged from eating gluten and other proteins found in wheat, barley, rye, and to some degree, oats.

When affected individuals ingest foods containing gluten, the lining (mucosa) of the intestine becomes damaged due to the body's immune reaction. Because the lining of the intestine contains essential enzymes for digestion and absorption, its destruction leads to difficulty in absorption of food and essential nutrients.

Persons with celiac disease experience improvement in the condition when on a strict, gluten-free diet. Gluten free cereals are indicated on the food flyer and approved product list.

Certain WIC cereals, although they may appear to be wheat-free, actually contain traces of gluten. Examples are:
Corn Flakes – contains malt flavoring, which is typically made from barley.
Store-brand Crispy Rice – contains malt flavoring, which is typically made from barley.

Additionally, products that appear to contain no wheat or gluten ingredients, such as oats and oatmeal, could contain traces of wheat if they are manufactured in facilities that process wheat. The words "Gluten Free" on the label ensure that the product is wheat free and gluten free.

Lactose Intolerance

Lactose is the name for milk sugar (the type of carbohydrate present in both human and cow's milk). Some people do not tolerate or digest lactose well because they do not have enough of the special enzyme (lactase) that is needed to digest and absorb lactose. More than two-thirds of non-white and 5 to 20 percent of white American adults have trouble digesting lactose. This is a problem that primarily affects adults and is not commonly found in young children.

Individuals may experience symptoms such as gas, cramps, bloating, or diarrhea when they consume lactose-containing foods such as milk. Participants who exhibit a severe response to lactose should be referred to their doctor. A tailored food package may be assigned according to the degree of intolerance exhibited.

Individuals display varying degrees of lactose intolerance and many can consume up to a cup of milk at a time without experiencing unpleasant symptoms. Using milk in smaller amounts in recipes or with meals can reduce the likelihood and/or severity of symptoms.

Lactose-free milks, such as Lactaid®, have been processed to reduce the amount of lactose and can be well tolerated by lactose-intolerant individuals. One percent or skim lactose-free milk is issued to women and children age two and older; whole lactose-free milk is provided for children less than two years of age.

Soy milk and tofu are lactose-free and also available for participants with lactose intolerance.

Dental or Chewing Problems

Participants with dental or chewing problems may not be able to handle foods of certain textures or consistencies. Consult with them on a regular basis to determine what foods they are able to eat. Suggestions for participants who have trouble chewing are:

- Purchasing a hot cereal, such as Cream of Wheat, instead of the harder, crunchier cold cereals
- Buying the softer whole grain bread instead of brown rice or corn tortillas
- Offer a package with yogurt, or more milk and no cheese (3 quarts milk replaces 1 pound cheese)

Tips to recommend to the lactose-intolerant participant

Use fermented (or "cultured") dairy products such as yogurt or hard cheeses like cheddar and Swiss. Fermented milk products are generally better tolerated than milk.

Try using milk in cooking (pudding, soup, white sauce, hot cereal) since this is often better tolerated than drinking fresh milk.

Try drinking small amounts of milk (¼ - ½ cup) and gradually increase the quantity until a tolerance level is determined. In general, small amounts of milk taken frequently with meals are better tolerated than drinking a large amount at one sitting.

It is important for participants to receive the nutrients provided by dairy products especially protein, calcium, and riboflavin (a B vitamin). Help participants who are intolerant to milk find alternative ways of consuming dairy products.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. Individual food package tailoring takes into account a participant's: (check the correct answers)

__ a) Category
__ b) Personal preferences
__ c) Living situation
__ d) Nutrition risk factors
__ e) Special dietary needs

2. True or false? Exclusively breastfeeding babies are the only category of participant that receives baby food meats.

3. True or false? If a participant can't use all the WIC food, staff should encourage the Participant/Guardian to purchase it anyway to share with the rest of the family.

4. Check the best food package option for a breastfeeding woman who is vegan.

__ a) Tailor the food package to remove all dairy products and eggs.
__ b) Provide soy milk and tofu in lieu of dairy products.
__ c) Provide soy milk and tofu in lieu of dairy products and remove the eggs.
__ d) Provide soy milk and tofu in lieu of dairy products and extra beans in lieu of the eggs.
__ e) Advise her to drink milk to provide the needed calcium and protein.

5. Check the foods that could be provided to a participant who has no refrigeration and no cooking facilities.

__ a) Powdered eggs
__ b) Powdered milk
__ c) Juice
__ d) Breakfast cereals
__ e) Canned fruit

6. Check appropriate food package options for an overweight child (over 2 years of age).

__ a) Encourage purchase of beans instead of peanut butter
__ b) Encourage purchase of low fat cheese
__ c) Remove the fruit and vegetable voucher
__ d) Encourage purchasing 1% or skim milk
__ e) Replace some of the milk with additional cheese

7. True or false? Most dried beans or legumes are higher in iron than peanut butter.

8. Name two WIC cereals that might be best suited to a participant with a chewing problem.

a) _____
b) _____

9. True or false? Rice Krispies are not gluten-free since they contain malt flavoring.

10. True or false? If a WIC participant does not like eggs, it would be acceptable to issue a tailored food package that does not contain eggs.

11. Check nutrition education tips that could be given to a participant with lactose intolerance:

__ a) Drink a large amount of milk with lunch and dinner.
__ b) Use yogurt or cheese
__ c) Try milk in cooking rather than fresh milk.
__ d) Try lactose-free milk.
__ e) Drink very small amounts of milk at a sitting and see if this is tolerated.

ANSWERS

1. All answers are correct (a, b, c, d, and e)
2. True
3. False
4. c
5. b, c, d
6. a, b, d
7. True
8. Any two of the following: Cream of Rice, Cream of Wheat, Cream of Wheat Whole Grain, Malt-O-Meal, COCO Wheats (the hot cereals require no chewing)
9. True (Malt flavoring is made of barley)
10. True
11. b, c, d, e

Section V: Special Dietary Needs–Food Packages Requiring Medical Documentation

When a participant has a qualifying medical condition which requires a special diet, WIC can provide the special medical formula if the participant has an approved prescription from a health care provider. In addition, it is the responsibility of the WIC CPA to ensure that the appropriate type and amounts of supplemental foods prescribed by the participant's health care provider or authorized by WIC are issued in the participant's food package.

How much exempt infant formula or WIC-eligible nutritionals and supplemental foods can WIC provide?

Monthly Maximum Amounts					
	Infant 0-3 mo.	**Infant 4-5 mo.**	**Infant 6-11 mo.**	**Child 1-4 years**	**Women**
Formula (reconstituted ounces) (Exempt infant formula or WIC-eligible nutritionals only)	870 oz. powder -or- 823 oz. concentrate -or- 832 oz. RTF	960 oz. powder -or- 896 oz. concentrate -or- 913 oz. RTF	696 oz. powder -or- 630 oz. concentrate -or- 643 oz. RTF		
Formula (Infant formula, Exempt infant formula or WIC-eligible medical food)				910 ounces reconstituted formula (powdered, concentrate or ready-to feed)	910 ounces reconstituted formula (powder, concentrate or ready-to feed)
Supplemental foods *	None	None	** Supplemental infant foods may be added to the food package	Supplemental age-appropriate foods may be issued as determined by the WIC CPA.	Supplemental category-appropriate foods may be issued as determined by the WIC CPA

* The WIC CPA may determine the type and amount of supplemental foods (including the fat content of milk) that are provided to participants who are receiving an approved special medical formula prescribed by a health care provider.
** With approved medical documentation, in lieu of infant foods (infant cereal, baby fruits, and vegetables), babies 6-11 months of age may receive the same amount of contract formula, exempt infant formula, or WIC-eligible nutritionals as 4-5 month old babies.

What are medical formulas?

Medical formulas, classified as "exempt infant formula" and "WIC-eligible nutritionals" provide nutrition in a form or in a combination that meets the unique feeding and/or nutrient needs of participants with medical conditions. They are prescribed by a health care provider when a normal diet is not adequate or appropriate for the participant due to their medical condition. Participants using these medical formulas usually require special follow-up and counseling.

When does WIC provide special medical formulas?

To receive medical formulas from WIC, the health care provider must have diagnosed a qualifying condition (see list of qualifying conditions on page 73). Qualifying conditions are typically risk factors and should be documented in Focus as Nutrition Risk Factors (NRFs). These risk factors often make the participant high risk, which requires counseling by a licensed dietitian. A care plan is also required.

Participants who are eligible to receive a food package with special formula must have one or more qualifying conditions that impair ingestion, digestion, absorption or the utilization of nutrients that could adversely affect the participant's nutrition status as determined by a health care professional licensed under State law to write medical prescriptions.

The qualifying conditions include but are not limited to premature birth, low birth weight, failure to thrive, inborn errors of metabolism and metabolic disorders, gastrointestinal disorders, malabsorption syndromes, immune system disorders, severe food allergies that require an elemental formula, and life threatening disorders, diseases and medical conditions that impair ingestion, digestion, absorption or the utilization of nutrients that could adversely affect the participant's nutrition status.

Participants requiring medical formulas or foods can also receive appropriate supplemental foods as long as they are not contraindicated. Because special medical formulas are only allowed in situations where conventional foods are not tolerated, restricted, or inadequate to meet the participant's nutritional needs it is appropriate that the physician provide documentation regarding which if any specific foods (in addition to the special formula) can be tolerated. The physician may also authorize the WIC RD to make decisions about supplemental foods. If the participant can eat all the regular foods, he/she may not need the special formula.

When does WIC NOT provide special medical formulas?

WIC wants to ensure that all participants receive the foods and/or formula packages that best meet their medical needs. Because of the cost of the special medical formulas, it is important to ensure that they truly are necessary for the health of the participant. WIC does not provide special medical formulas if other food package options meet the needs of the participant. Some examples of when special medical formulas cannot be provided are:

- Babies whose only condition is:
    - 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
    - A non-specific formula or food intolerance
- Women and children who have an intolerance to lactose or milk protein that can be successfully managed with the use of another WIC food packages
- Any participant solely for the purpose of enhancing nutrient intake or managing body weight without an underlying qualifying condition. For example, Pediasure should not be issued for a healthy child for the purpose to enhance the child's nutritional intake. Issuance of Pediasure is allowed when the child's health provider specifies its use as part of an overall nutritional plan for a child diagnosed as failure to thrive
- Personal preference

Qualifying conditions for issuance of specialty formulas

Participant category	Qualifying conditions Not limited to the following:	Non-qualifying conditions
Infants	Premature birth Low birth weight Failure to thrive Inborn errors of metabolism/metabolic disorders Gastrointestinal disorders Malabsorption syndromes Immune system disorders Severe food allergies requiring an elemental formula Life threatening disorders, disease and medical conditions that impair ingestion, digestions, absorption, or the utilization of nutrients that could adversely affect the participant's nutritional status	Non-specific formula or food intolerance Diagnosed formula intolerance or food allergy to lactose, sucrose, milk protein or soy protein that does not require use of an exempt infant formula
Children (1-5 years)	Premature birth Failure to thrive Inborn errors of metabolism/metabolic disorders Gastrointestinal disorders Malabsorption syndromes Immune system disorders Severe food allergies requiring an elemental formula Life threatening disorders, disease and medical conditions that impair ingestion, digestions, absorption, or the utilization of nutrients that could adversely affect the participant's nutritional status	Food intolerance to lactose or milk protein that can be successfully managed with the use of one of the other WIC food packages Solely for the purpose of enhancing nutrient intake or managing body weight without an underlying qualifying condition
Women	Inborn errors of metabolism/metabolic disorders Gastrointestinal disorders Malabsorption syndromes Immune system disorders Severe food allergies requiring an elemental formula Life threatening disorders, disease and medical conditions that impair ingestion, digestions, absorption, or the utilization of nutrients that could adversely affect the participant's nutritional status	Food intolerance to lactose or milk protein that can be successfully managed with the use of one of the other WIC food packages Solely for the purpose of enhancing nutrient intake or managing body weight without an underlying qualifying condition

Role of the health care provider in providing medical documentation

A health care professional licensed to write medical prescriptions under Iowa law must determine that the participant has a qualifying medical condition that requires the use of a special formula and that conventional foods are inadequate or inappropriate to meet the participant's special nutritional needs.

Iowa health care providers with prescriptive authority:

- Physician
- Physician Assistant
- Advanced Registered Nurse Practitioner (pediatric and family practice practitioners)

The health care provider prescribes the medical formula, educates the participant/family on its use, and monitors tolerance and continued use.

The health care provider completes the *Iowa WIC Special Medical Formula Documentation form* (see form on next page) or provides the required information on a medical prescription pad. Written documentation must include:

- The name of the prescribed formula including the amount needed per day
- The prescribed supplemental food(s) and their prescribed amounts per day
- Length of time the formula and/or supplemental food is required
- The qualifying conditions for the formula and/or supplemental food(s)
- Signature of the prescribing authority
- Date

Medical documentation provided by telephone.

The collection of the required information by telephone for medical documentation purposes only when absolutely necessary on an individual participant basis. The local clinic must obtain written confirmation of the medical documentation within a reasonable amount of time (such as one or two weeks' time) after accepting the initial medical documentation by telephone.

The WIC CPA must:

- **Record all of the required documentation listed above**
- **Document the phone call in a nutrition care plan include the contact information of the prescribing authority**
- **Follow-up to obtain written confirmation of the documentation with a reasonable amount of time**

IOWA WIC PROGRAM
REQUEST FOR SPECIAL FORMULA AND FOOD

Medical documentation is required for the Iowa WIC Program to authorize special formulas and supplemental foods for WIC participants. Approval is subject to USDA and WIC Program policies.

A. PARTICIPANT INFORMATION

Participant Name: _____ Date of Birth (DOB): _____

Parent/Guardian Name: _____ Phone: _____

B. MEDICAL FORMULA

Formula requested: _____ ☐ Powder ☐ Concentrate ☐ Ready to Use

Prescribed ounces per day: _____ Preparation/Feeding Instructions: _____

**If not specified, up to the WIC maximum allowable may be provided. Maximum allowed might not meet participant's full needs.*

Length of Use: ☐ 1 month ☐ 2 months ☐ 3 months ☐ 4 months ☐ 5 months ☐ 6 months

C. QUALIFYING MEDICAL CONDITION (include ICD-10 Code)

☐ Premature birth ≤ 37 weeks gestation (P0710)

☐ Failure to thrive (specify underlying medical condition)

_____

☐ Severe food allergies (Specify) _____

☐ Immune system disorder (Specify) _____

☐ Metabolic disorder/inborn errors of metabolism (Specify) _____

☐ Gastrointestinal disorder/malabsorption syndromes (Specify) _____

☐ Medical condition that impairs nutrition status (Specify) _____

*Symptoms such as spitting up, milk/formula intolerance, fussiness, gas or picky eating are **not** considered acceptable medical diagnoses and will not be approved by WIC for issuance of a special formula. WIC **cannot** provide formula to enhance nutrient intake or manage body weight without underlying medical conditions.*

D. SUPPLEMENTAL FOODS

☐ I authorize the WIC RD/Nutritionist to determine supplemental foods and amounts based on medical needs.

☐ I do NOT authorize WIC RD/Nutritionists to make decisions about supplemental foods. Select any of the following that apply below:

- ☐ **Formula only**- No foods and increased amount of formula past 6 months of age due to inability/delay consuming solid foods.
- ☐ **Infant foods**- In addition to formula, provide infant foods due to medical condition and inability to consume table foods.
- ☐ **Omit**- The foods indicated here need to be **omitted** from the participant's WIC food package:

☐ Milk ☐ Juice ☐ Peanut Butter ☐ Wheat bread ☐ Oatmeal ☐ Fruits/Vegetables ☐ Infant Fruits/Vegetables

☐ Eggs ☐ Cereal ☐ Beans ☐ Brown rice ☐ Tortillas ☐ Infant cereal

E. HEALTH CARE PROVIDER INFORMATION

Provider's signature (MD, DO, PA, ARNP): _____ Date: _____

Provider's name *(please print)*: _____ Medical Office: _____

Phone: _____ Fax: _____

F. RELEASE OF INFORMATION

I give permission to the WIC Program to release confidential information from my WIC record. I also give permission to the person or agency named above to share requested information. I understand the WIC Program will use this information to provide nutrition services to my family.

Doy el permiso al programa de WIC a la información confidencial del lanzamiento de mi expediente de WIC. También doy el permiso a la persona o a la agencia nombrada arriba compartir la información solicitada. Entiendo que el programa de WIC utilizará esta información para proporcionar servicios de la nutrición a mi familia.

Participant/Parent/Caregiver Signature: _____ Date: _____

G. WIC USE ONLY

WIC Clinic: _____ WIC Phone: _____ WIC Fax: _____

FID #: _____ Comments: _____

10/2015

Role of the WIC CPA in medical documentation

The WIC CPA

- Contacts the health care provider when more information is needed or when the product is not available and makes recommendations as appropriate.
- Reviews the prescription for completeness and appropriateness for the participant's needs.
- Makes the determination to individually tailor the food packages to provide smaller quantities of formula or supplemental foods based on the following:
    - Medically or nutritionally warranted (for example, in cases where the participant is using fewer ounces/day than the prescription was written for, or in cases where the prescribing authority writes "maximum" as the prescribed number of ounces).
    - The participant refuses or cannot use the maximum monthly allowance.
- When the medical provider has not prescribed supplemental foods or noted any contraindicated foods, the WIC CPA determines the appropriate supplemental food.
- Determines when new medical documentation will be needed. Communicate with the health care provider regarding concerns about formula type or prescription duration.
- Scans and electronically files the Special Formula Medical Documentation form or prescription into the WIC data system.
- Ensures completion of the "Documentation" pop-up on the Food Package screen in Focus and that the correct food package is assigned and issued.
- Reinforces the physician's recommendations for use of the medical formula or food.
- If high risk, provides additional counseling and documents in the participant's Care Plan.
- Assists the participant in locating the products; as appropriate contacts the WIC retailer to arrange for the product to be stocked, gives timelines for expected use, and determines when it will be available.
- When the prescribed product is not readily available in grocery stores, grocery store pharmacies, or the retailer is unwilling to break cases for highly specialized formulas, contact the agency's assigned State Nutrition Consultant for help with the Formula Warehouse Process. (See *Ordering Instructions for Products Not on Retail Shelves* at the end of this section)

What criteria should the WIC CPA use to evaluate the appropriateness of the prescribed medical formula or food?

Appropriateness: Evaluate the appropriateness of the medical formula or food for the participant's age, development, symptoms, and diagnosis. For assistance, refer to the *Iowa WIC Program Formula Product Guide* or call your nutrition consultant.

Intended use: What is the intended use? Can the participant's medical nutritional needs be met with another food package (such as Lactaid milk for a participant with lactose intolerance)? Formulas to manage body weight or used solely for the purpose of enhancing

nutrient intake (without an underlying medical condition) are not allowed by federal regulations.

Timelines for use: Does it seem reasonable, in light of the child's status, to use the product for the prescribed time period? Is there a reasonable likelihood the child will return to the MD for appropriate follow up? Will safety and tolerance be concerns if the product is issued?

Availability: If the formula is authorized for use by WIC, arrange with the retailer to obtain it (or contact the state office to order the formula from a formula warehouse). It is important to have good relationships with local vendors and to try and find specialty formulas locally before contacting the State Office. The physician or hospital may be able to provide a small supply of formula until the retailer gets stock. Almost all participants who are discharged by, or were treated by a hospital will be given a starter supply of formula.

Safety: Is there assurance the family can offer the formula safely? Can the MD provide the ongoing needed follow up? While formula issuance should not be refused due to safety concerns, any concerns should be discussed with, and referred to, the physician.

Frequently Asked Questions

1. **Can the WIC CPA authorize one month of "special" formula, based on his/her professional judgment, before obtaining verbal or written approval from the MD?**

   Yes – issue one month of food benefits when the written medical documentation from the medical provider is pending. When adequate documentation is provided, issue two more months of benefits to the family.

2. **Can WIC accept a prescription on a prescription pad in lieu of the Iowa WIC Program's Special Formula Medical Documentation form (SFMD)?**

   Yes – as long as it contains all the required information, which includes:
   - Name and prescribed amount of formula.
   - Authorized supplemental foods –or- authorization for the WIC to determine approved supplemental foods
   - Length of time formula and/or supplemental foods are prescribed.
   - Medical diagnosis or qualifying medical condition that warrants prescription.
   - Signature, date and contact information.

3. **Is a prescription needed in order to give baby foods to a 6-month old that is on a special formula?**

   A prescription is not needed to provide baby foods.

4. **If the parent requests more formula in lieu of baby foods can I give more formula?**

A small group of 6-11 month olds can receive additional formula in place of baby foods. Those using a special formula or who have medical conditions which preclude them from consuming solids may receive the same quantity of formula as 4-5 month olds. Medical documentation is required in order to give the additional formula and these infants should be reassessed for readiness to consume solids on a regular basis.

5. **Can a "special needs" participant (for example, tube fed one year old) get baby foods and baby cereal instead of the regular women's or children's foods?**

   Along with a prescription for a special formula, the medical provider can prescribe baby food cereal and jarred baby foods. 32 ounces of baby cereal may be issued in lieu of 36 ounces breakfast cereal. Children may receive 128 oz. of baby fruits and vegetables in lieu of the $9 CVB. Women may receive 176 oz. of baby fruits and vegetables in lieu of the $11 CVB.

6. **If I have a SFMD from a physician saying "I authorize the WIC CPA to determine supplemental foods and amounts based on medical needs" for a woman or child, what is the scope of practice for the WIC CPA to tailor those prescribed foods?**

   The WIC CPA can make the determination to individually tailor the package based on the following:

   a. Medically or nutritionally warranted (for example, to eliminate a food due to a food allergy).
   b. The participant refuses or cannot use the maximum monthly allowance.

   Based on the CPA's assessment, it may be appropriate to provide a food package without a certain food or with smaller quantities of milk or formula. Documentation of the tailoring should be made in the comments field on the Food Package Screen or in the participant's care plan.

7. **Can I issue whole milk to a 2-5 year old child?**

   If the child is on an approved special or therapeutic formula and also requires the additional calories from whole milk, the medical provider can prescribe the specific supplemental foods, including the appropriate milk fat content. The prescription noting the formula and the supplemental foods (including the specific milk type) must be signed by the medical provider and scanned into Focus. Completion of the "Documentation" pop-up on the Food Package screen in Focus is also required.

8. **If I have a prescription for whole milk for a thin 2-5 year old and the parent is purchasing some Pediasure on their own, can I issue whole milk to the child?**

   No. As noted in question #10, an approved prescription for a special or therapeutic formula along with a prescription for the additional calories from whole milk is required in order to issue whole milk for a child over two years of age. If the child is not

receiving a special formula, WIC staff may not issue whole milk but can counsel the family on other ways to increase calories.

Ordering Instructions for Products Not on Retail Shelves

There are times when a special WIC eligible formula is not available from a special purpose vendor in the local agency service area. In these situations, a specific process must be ordered to obtain the formula for the participant. This process is called the **Formula Warehouse Process.**

PROCEDURE:
Perform the following steps to order formula through the Formula Warehouse:

1. Contact you State WIC Nutrition Consultant who will help determine whether the product is available through the "Formula Warehouse."
2. Once determined that the product is available, the State WIC staff will contact the CPA. At that time, create the appropriate food package and issue the benefits. The State office will generate an authorization code that the vendor will use to ensure payment. Be prepared to provide the State office staff with the participant's FID, name, and PAN.
    - **Note:** If State WIC staff is not immediately available, benefits can be issued, however the participant must be instructed to not purchase the product until the State office contacts the local agency.
3. The State WIC office will contact the "Formula Warehouse" vendor to ensure the requested product is available and place the formula order. The State office will contact the CPA to inform them that the product has been ordered.
    - **Note:** Document in the care plan the product has been ordered and when it is expected to arrive.
4. The "Formula Warehouse" vendor will order the formula and will ship it directly to the local agency.
5. Once the local agency receives the formula, the product should be inspected to ensure that the correct formula has been delivered, to ensure the product is not expired, and to ensure the packaging/containers have not been opened and/or tampered with.
6. Notify the participant that the formula is ready to be picked up at the local agency or local agency clinic location.
    - **Note**: The local agency must ensure the formula is stored in a safe and secured manner until the participant picks up the formula.
7. Once the participant picks up the formula, document in the care plan the participant has received the formula.

When the parent/guardian/participant does not pick up the special formula
Make every effort to contact them to learn whether the formula will be picked up. If formula will not be picked up, learn why and document details in the participant's care plan.

If the formula is not issued to the participant for whom it was originally intended, the formula may be issued to another WIC participant as long as the formula has not left your agency since delivery. If a recipient is not identified within the local agency, email your nutrition consultant.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. True or false? An approved prescription from a health care provider is required in order to issue special formula.

2. True or false? A women or child who has lactose intolerance should be issued a special medical formula.

3. True or false? WIC parents can choose to receive additional formula for their 6-11 month old babies instead of receiving baby foods.

4. True or false? The "Documentation" pop-up on the Food Package screen in Focus must be completed in order to issue low-fat milk to 1 year old children.

ANSWERS

1. True
2. False
3. False
4. False

Section VI: Encouraging the Use of WIC Foods

One of the simplest and most important messages you can give to your WIC participants is to eat their WIC foods. Don't underestimate the importance of this message or assume that participants will automatically eat the foods on their own. Remember, the WIC foods were chosen because they are nutritious and are high in nutrients that our WIC participants especially need. Having participants eat their WIC foods is vitally important to our success at helping them. In most cases, use of the WIC foods may help resolve the participant's nutrition risk factors. Clearly emphasize this with each participant.

Education Tips:

- Keep easy recipes on hand to share.
- Keep copies of nutrition labels from WIC foods, or the actual container, to educate participants on where to find and how to read the nutrient information.
- Find out if there are foods that are new to the participant. Some participants may have never tried brown rice or tofu before.

How can WIC foods be incorporated into the nutrition education you provide?

When discussing nutrition practices with a participant, specific examples of ways to increase the intake of certain food groups can be given. For example, if a participant eats few protein-rich foods, suggest that they try eggs for breakfast, peanut butter or egg salad sandwiches for lunch, peanut butter and crackers for snacks, or bean soups for lunch or dinner. If they eat limited calcium-rich foods, suggest yogurt, or a cheese omelet for breakfast, cheese sandwiches for lunch, powdered milk in soups, milk shakes, cheese sauces in baking, or milk with meals and snacks.

When discussing nutrition practices, you may also notice that the pattern of meals and snacks is not appropriate. Again, with WIC foods you can provide specific suggestions for improving the diet. For example, if the participant skips breakfast because they don't have time, suggest some breakfast ideas that can be prepared to go such as:

- Some dry WIC cereal in a bag with a cup of milk or juice
- Peanut butter sandwich with juice or milk
- Overnight oats with fruit

The nutrient benefits of the WIC foods should be mentioned. For example, participants can be told that iron is an important nutrient and that WIC cereals are high in iron. Or, that low-sugar snacks should be given to children and that WIC cereals are low in sugar. Or, that we all need a source of vitamin C each day and that WIC juices are high in vitamin C.

The food package can be used to reinforce many principles of infant nutrition. Examples are:

- Telling parents that solids should be delayed until around 6 months and that's why the WIC Program does not provide baby foods until 6 months.

- Encouraging exclusive breastfeeding and helping moms establish an abundant milk supply and that's why supplemental formula is discouraged in the first month.

Education Tip:

Focus on the participant's specific needs. Topics for possible discussion include:

- Use of WIC foods with an emphasis on food safety, sanitation, and storage
- Fast and easy nutritious snacks
- Preparation of foods that require little or no cooking

Food Group	WIC Food
Vegetables & Fruits	Cash value voucher for fruits and vegetables Fruit and vegetable juice Baby food fruits and vegetables
Milk	Milk Cheese Soy milk Tofu Yogurt
Grain	Cereal Whole grains (whole wheat/whole grain bread, brown rice, corn or whole wheat tortillas, whole wheat pasta, oats) Baby cereal
Protein	Beans Peanut butter Eggs Canned fish Tofu Baby food meats

Is it necessary to explain to participants how to use WIC foods?

Yes, it is very important to explain to participants how to use the WIC foods. There may be certain foods such as dried beans that are unfamiliar. It is possible that they won't use these foods unless you give them specific recipes or ideas. Even for foods such as fruits and vegetables, brown rice, fresh milk, cheese, yogurt, cereal, or peanut butter that most people are

very familiar with, it is helpful to give nutritious recipes and perhaps some new ways of using them. This may increase the frequency with which these foods are used and may lead to generally more nutritious meals and snacks.

Are there special nutrition education requirements for homeless individuals?

Yes, providing effective and appropriate nutrition education to homeless persons requires that you have an understanding of the participant's transient lifestyle. Because a participant may only be enrolled for a short period of time, ongoing, long-term education goals may not be appropriate. Priority topics to be covered include:

- How to use the eWIC card
- Explaining WIC-allowable foods
- Referral to other services

Education Tip:

Have a developmental stages pamphlet available for caregivers to help cue them in on signs their infant is ready for solids.

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

1. True or false? Most participants will eat their WIC foods and it's probably not worth your time to encourage that they do so.

2. If a participant reports eating few meat/meat alternative foods, list 3 specific suggestions for improving the diet through use of WIC foods.

3. True or false? Participants should be given recipes for using WIC foods.

ANSWERS

1. False
2. Any 3 of the following are examples:
    - Egg salad sandwich
    - Peanut butter and jelly sandwich
    - Eggs for breakfast
    - Peanut butter and crackers for snacks
    - Bean soups for lunch or supper
3. True

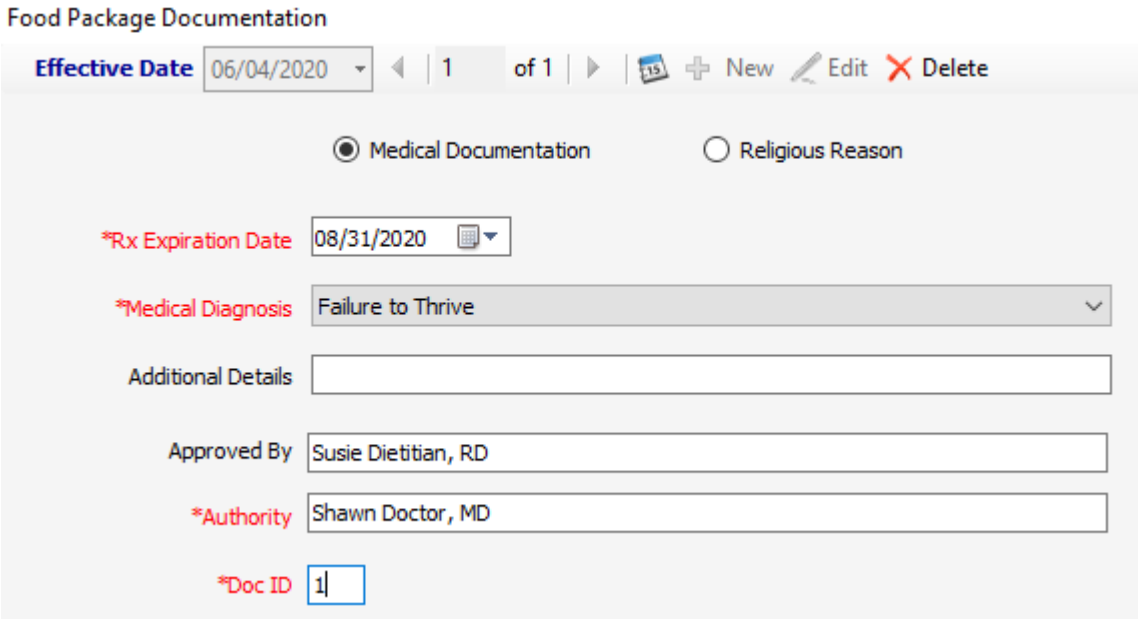
Section VII: Documentation Of Food Packages

Any time a specialty formula is issued or a food package is tailored to remove or reduce food items, documentation must be provided. Documentation is critical so that all staff providing follow up can readily see that a specific tailored food package was purposefully assigned. If the tailoring is purely for participant preference additional documentation is not necessary.

What information should be documented and where?

Medical documentation for issuance of any specialized formula must be recorded in the "Documentation" pop-up on the Food Package screen. Required information includes the following:

- Rx Expiration Date: Date the prescription expires
- Medical Diagnosis: The diagnosis should be consistent with the requested formula. Staff can choose from the drop down list
- Additional Details: Specific information describing the medical condition or intolerance can be documented here. If "other" is selected from the medical diagnosis drop down list, the diagnosis should be included on this line
- Approved By: the name and credentials of the WIC CPA who approved the specialized formula. This field is optional
- Authority: Name and credentials of the medical provider who prescribed the specialized formula
- Doc ID: Number assigned by staff that references documentation of this prescription



The reasons for removing a food item from a food package or reducing the amount of any food (other than for infant formula) should be documented on the "Comments" field in the Food Package screen. Documentation can be brief, such as "no eggs due to allergy" or "participant requested only 1 gallon milk".

Anytime a model food package is altered, the word "tailored" appears before the name of the food package, such as "Tailored C – 24-60 months".

Participant Tony Test 3 of 4
Category: Child (Male) Never BF FM BW
Date of Birth: 02/05/2017 (3 y 3 m) WIC Status: Active Cert. End: 10/2020 Last FB:
Food Package
Effective Date 06/04/2020 5 of 5 New Edit Delete
End Date: Do Not Auto-Update
Verified Special Diet (Prescribed Formula/Food, Religious Reason) Documentation
Verify Self-Reported Details
Copy Model Food Package
View Full 2/3 1/3 FB Issuance 3 Months 1st Day: 1
Food Package Name: Tailored C - 24-60 months / Low-Fat Milk / Yogurt / Cheese
Food Package
Add Food
Remove Food

Category	Subcategory	Qty	UOM	Month	Doc ID
02 Cheese	000 Cheese- All Authorized	1.0	Pound	All	
05 Breakfast Cereal	000 Breakfast Cereal - All Authorized	36.0	Ounce	All	
06 Peanut Butter/Legumes	000 Peanut Butter/Beans & Peas-All Authori...	1	Jar/Bag	All	
16 Bread/Whole Grains	000 Whole Wheat Bread or Whole Grains - A...	32	Ounce	All	
19 Fruits and Vegetables ...	000 Fruits and Vegetables - Cash Value Benefit	9.00	$$$$	All	
50 Yogurt	000 Yogurt - All Authorized	32	Ounce	All	

Comments requests no eggs

Any additional information that is helpful in providing follow-up, such as medical information, should be documented in the participant's care plan.

When can food packages be tailored and what documentation is required?

The following describe regulations around food package issuance and documentation of specific conditions and situations:

Exempt Infant Formulas, and WIC-Eligible Nutritionals

May be issued only with physician's authorization The "Documentation" pop up on the Food Package screen must be completed and the *Special Formula Medical Documentation Form* or prescription scanned to the participant's chart.

Higher Amount of Formula and no Baby Foods for 6-11 Month Olds

May be issued with health care provider authorization and approval. The "Documentation" pop-up on the Food Package screen must be completed and there must be a *Special Formula Medical Documentation Form* or prescription scanned to the participant's chart.

Ready-To-Feed (RTF) Formula

May be issued only under these circumstances:

- The household has an unsanitary or restricted water supply or poor refrigeration
- The person caring for the participant may have difficulty correctly diluting concentrated or powder formula.
- For a medically fragile baby (including premature and immune-compromised infants).
- The prescribed formula is only available in RTF.

Supplemental Foods in Addition to WIC-Eligible Nutritionals for Women and Children

Along with the prescription for the WIC-Eligible Nutritional, the medical provider may prescribe the supplemental foods, or defer the supplemental food authorization to the WIC CPA. Medical documentation must be recorded in the "Documentation" pop-up on the Food Package screen. The food package issued must match the specific formula and foods prescribed (such as, not include any of the contraindicated foods).

Whole Milk for Women and 2-4 Year Old Children

May be authorized by the medical provider or deferred to the WIC CPA for issuance only in addition to a prescription for an appropriate WIC-eligible nutritional – and determination (by either the medical provider or the WIC CPA) that the woman or child also requires the additional calories from whole milk.

Soy Milk & Tofu

May be issued to women and children as a substitute for cow's milk. Determination for women and children must be based on an individual assessment and consultation with the health care provider if necessary. Such determination can be made for situations that include, but are not limited to milk allergy, lactose intolerance, vegan diets, or religious reasons (such as kosher diet).

Fat-reduced and fat free milks for overweight one year old children

May be issued by the WIC CPA to overweight one year old children meeting the criteria described below. Determination must be based on an individual nutritional assessment and consultation with the child's health care provider if necessary.

- Definition of high weight-for-length: child's weight for length is at or above the 97.7th percentile on the CDC Birth to 24 months gender specific growth chart.
- Risk Code 115 (high weight-for-length birth to <24 months) must be assigned.

Documentation of issuance of low fat milk must be included in the participant care, as well as overweight/obesity concerns, assigned risk, input from the parent/guardian, and education provided to the parent/guardian.

Other

Other situations in which food package tailoring should be documented are:

- When a participant is issued less than or none of the maximum allotment of a food due to a medical condition such as allergy, food preference, food habits or living environment (such as not issuing eggs to homeless individuals who have no cooking or storage facilities).

Documentation should be provided in the "comments" section of the Food Package screen.

Examples of food package tailoring documentation

1. Mateo Jimenez is a 3-month-old infant who is receiving RTF (ready-to-feed) formula because his family's water supply is contaminated and unsafe to drink.

   In addition to information in the Care Plan concerning the nutrition education provided, the following documentation should be included in the "comments" field on Mateo's Food Package screen: "Family water supply contaminated; issue RTF formula."

2. Jaime McNeil, a pregnant woman, is homeless. The shelter in which she has temporary residence allows her to store and prepare food. However, Jaime does not have pitchers to mix frozen juice in and prefers the blended juices she can buy in 64 oz. plastic bottles.

   In addition to information in the Care Plan concerning the nutrition education provided, the following documentation should be included in the comments field on the Food Package Screen: "prefers bottled juice"

3. Keisha Simmons is a 6-month-old baby with developmental delays which prohibit the intake of solid foods. She has been prescribed Similac Expert Care Neosure formula. The

prescription states to issue "maximum allowable" amount of formula and "no WIC supplemental foods; provide formula only."

In addition to information in the Care Plan concerning the nutrition education provided, the "Documentation" pop-up on the Food Package screen must be completed and the following documentation included in the "comments" field on the Food Package screen: "no supplemental foods; formula only."

NOTE: The health care provider's prescription for Neosure must be scanned into Focus.

4. Jerome Williams is a 3-year old child who has been diagnosed as failure-to-thrive, related to a heart defect. His mother brought in a prescription for 2 cans of Pediasure per day plus whole milk. In addition, the health care provider noted that eggs are contraindicated due to food allergies.

   In addition to information in the Care Plan concerning the nutrition education provided, the "Documentation" pop-up on the Food Package screen must be completed, and the following included in the "comments" field on the Food Package screen: "Rx for Pediasure and whole milk; no eggs due to allergies."

5. Annalise Martin is an exclusively breastfeeding woman who is allergic to milk and dairy products. She prefers to receive soy milk and 4 pounds of tofu per month.

   In addition to information in the Care Plan concerning the nutrition education provided, the following documentation should be included in the "comments" field on the Food Package screen: "allergic to milk and all dairy: issue tofu & soy milk; no cheese."

SELF-CHECK: PRACTICE YOUR KNOWLEDGE

Indicate appropriate documentation of food package tailoring in each of the cases below:

1. Amy Saunders is an exclusively breastfeeding woman. She dislikes drinking milk but will use it in cooking. She would like some of her milk benefits as powdered milk.

2. Eddie Vasquez is a 13-month-old child. He is allergic to peanuts. Eddie's mom requested canned beans instead of dry beans.

3. Carleigh Whitten is a 6-month-old premature baby. She has a prescription for the maximum allowable amount of Enfamil EnfaCare. The doctor also noted "no WIC supplemental foods; provide formula only."

ANSWERS

1. This is an example of a participant preference and not related to NRF's unless calcium intake is low due to Amy's dislike of milk. Since the standard food package provides only fluid cow's milk, additional tailoring of the food package is necessary. Tailor the food package to provide the amount of powdered milk that Amy will use. Documenting the fact that Amy doesn't like milk is not required, however, it could be helpful in assisting with follow up.

2. Since Eddie is allergic to peanut butter, the option to purchase them must be removed from the food package. Staff should tailor the food package to provide canned beans instead of the standard "peanut butter/beans – all authorized." Documentation in the "comments" field on the Food Package screen should state something like "allergic to peanuts – issue beans only; no peanut butter."

3. Completion of the "Documentation" pop-up on the Food Package screen is required in order to provide both an exempt infant formula and a "special diet" food package with additional formula in lieu of baby foods. Documentation in the "comments" field on the Food Package screen should state: "no supplemental foods; formula only."

Training Activity

Now that you have completed this module, please take the Food Package Module on-line post-test located on the Web Portal Training Personnel page. **Good Luck!**