

New Hampshire WIC Policy & Procedure Manual

Chapter 2. NUTRITION SERVICES & BREASTFEEDING SERVICES

B. Food Package Design

Contract Formula

Purpose To provide standard milk-based and soy-based infant formulas through a sole-source contract to partially breastfed and fully formula fed healthy infants.

Policy The New Hampshire WIC Program's standard milk and soy based formulas for healthy formula fed infants is provided through a sole source contract with an approved national formula company. Contract formulas must meet the requirements of Table 4 of section 247.10 (e) and do not need medical documentation (See NH WIC Formulary).

Standard formulas are provided in powder and liquid concentrate.

Requests received for non-contract standard milk and soy-based formulas are not permitted.

Special formulas such as protein hydrolysates, hyper-caloric, elemental, metabolic, and other formulas are available through the NH WIC Program. Minor symptoms of intolerance involving increased spitting, fussiness, colic or gas are not qualifying medical conditions for the provision of special formulas. See Food Package III policy and Special Formula Provided Through NH Medicaid policy.

Authority CFR 246.2, 246.10(d)(vi), 246.10(e)(iii), 246.10(e)Table 4

Procedure The nutritionist/Competent Professional Authority (CPA) shall review the current feeding history of the infant including an evaluation of formula preparation and storage. The nutritionist/CPA shall provide anticipatory guidance on normal infant feeding issues and behaviors. The nutritionists/CPA shall offer parents a choice of the primary contract formulas available. When appropriate, discuss the formulas available for intolerance symptoms such as increased spitting, fussiness, colic or gas, although these symptoms are common infant behaviors, that do not necessarily necessitate a change in formula and may be associated with overfeeding or issues with the preparation and handling of the formula. (See Formula Assessment tool). Local agency nutritionist shall:

- Offer available forms within the contract formulas, such as powdered or concentrate, milk or soy formula. See Food Package I and II policies.
- Document a summary of the feeding history.
- Provide education on proper mixing, handling and storage of infant formulas.
- Consult with State WIC nutritionists on any infant formula questions or concerns.
- Refer parent to the infant's healthcare provider for further

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guidance.

Exception

Infants 6 through 12 months of age with a qualifying medical condition receive a Food Package III.

Medical documentation is required prior to issuing contract soy-based formula to premature infants.

Ready-to-feed formula may be provided when the CPA determines and documents:

1. The participant's household has unsanitary or restricted water supply or poor refrigeration;
2. The person caring for the participant may have difficulty in correctly preparing the concentrate or powder formula; or
3. The formula is only available in ready-to-feed.
4. Medical documentation is provided with a follow-up conversation between the CPA and the ordering physician (or someone working under the physician's orders) that substantiates the need for RTF.
 - o Documentation of RTF provided under this circumstance shall be completed in the participant's StarLINC record (Tailoring Screen Note and Nutrition Ed Goals Screen) and must include: reference of conversation—date and with whom, reference of written documentation provided, Dr. Name and credentials (and name of person working under physician's orders as applicable), date, reason of RTF issuance/request.
 - o Written RTF request acceptable on Dr's Letterhead, Dr Rx, or on NH RSF by MD, DO, NP or ARNP.
 - o RTF issued in this situation may be may be provided for up to 3 months at a time only.
 - o Re-evaluation is necessary for continued issuance following the requirements above—contact with the ordering Dr. to confirm continued need, and re-evaluation if concentrate or powder may be used at this time. Documentation shall be updated in the participant's StarLINC record (Tailoring Screen and Nutrition Ed Goals Screen) with the ordering Dr. name/credentials (or name of person working under physician's orders as applicable), date contact made for confirmation of on-going need for RTF issuance.

RTF formula shall be provided in the largest container possible that aligns with the infant's feeding requirements/intake and need to dispose of RTF formula w/in 48 hours of opening. Smaller single serve units RTF formula may be provided in situations such as but not limited to the participant lacks refrigeration and powdered formula is not suitable to the situation.

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Best Practice

Conduct an assessment of the infant's growth by taking length and weight measurements. Offer a one-month follow-up appointment with a nutritionist/CPA.