

Questions & Answers

Food Package for Qualifying Conditions

Formula

- 1) Nutramigen LIPIL is no longer available in powdered form as of August 1st? Powder form alternative will only be available in the Enflora LGG is this a new name for the powdered Nutramigen?

A: Nutramigen LIPIL powder is already not available to be assigned in MI-WIC. Nutramigen LIPIL with Enflora LGG is the new product replacing Nutramigen LIPIL, in the powder form only.

- 2) Will the shopping list show fluid ounces or number of formula cans?

A: The shopping list will show the number of formula cans.

- 3) Can Neosure be given to an infant that is a full term infant or small for gestational age?

A: No, Neosure and Enficare should only be approved for premature infants.

- 4) How many cans are 806, 624, and 640 fluid ounces?

A: The number of cans varies depending on the formula and the form of formula. MI-WIC has calculated the number of cans of formula in order for infants to receive the full nutritional benefit. For example, for infants to receive 806 fl oz of reconstituted Nutramigen LIPIL concentrate per month they would be issued 31 cans per month. Each can of Nutramigen LIPIL reconstitutes to 26 fl oz and provides 806 fl oz in 31 cans.

- 5) Can a fully formula fed infant (IFF) 6-11 months old receiving contract formula via a tube feeding also receive the maximum amount of formula for a 4-5 month old if they cannot receive the supplemental foods?

A: The federal regulations do not allow us to issue more than the maximum amount of formula for a 6-11 month old when they receive a contract formula. The regulations only allow 6-11 month olds to receive the same maximum monthly allowance as a 4-5 month old in lieu of supplemental foods when they have a qualifying condition and receive a Class II or Class III formula.

6) We need clarification on Pediasure and qualifying conditions?

A: The health care providers qualifying condition should indicate the need for Pediasure.

7) If a 2 year old child is diagnosed with failure to thrive and brings in a Medical Documentation form completed by the MD, can the client receive Pediasure as well as the other foods in the food package?

A: A 2 year old may receive Pediasure and other supplemental foods up to the maximum monthly allowance. The health care provider will indicate what additional foods may be provided and the amounts.

8) Can physicians order ready-to-feed (RTF) formula for better tolerance?

A: No, this is not included in the conditions for issuing RTF in our policy.

9) Who qualifies for RTF formula?

A: Ready-to-feed formula may be authorized when the following conditions exist:

- 1. Poor refrigeration*
- 2. Problems with the water source (documented unsanitary or restricted water supply)*
- 3. Parent/caregiver exhibits difficulty in correctly diluting powder/concentrate formula*
- 4. Formula is only available in the ready-to-feed form.*

10) Will the State WIC office be providing a conversion chart from ounces to the number of cans of formula for all approved WIC formulas?

A: A chart for Class I (contract) formulas has been provided with the Policy Overview webcast. Charts containing the number of cans for Class II and III powder infant formulas are being prepared.

Coordination of Services

11) Can you please provide the coordination expected between WIC and Medicaid and CSHCS. Is WIC the first provider or is Medicaid or CSHCS the first provider?

A: We have significantly reduced the number of special formulas Michigan WIC will authorize. If a client is enrolled in CSHCS or Medicaid and also in WIC, and the formula is one that CSHCS or Medicaid may authorize under certain conditions, WIC should work collaboratively with CSHCS and

Medicaid to assure that the nutritional needs of mutual clients are met.

- 12) Can a client receiving special formula such as cyclenex and arginine from the metabolic clinic receive other WIC foods if a medical documentation form is completed by the MD?

A: WIC should work collaboratively with the metabolic clinic to assure that the nutritional needs of mutual clients are met. If a client is receiving a metabolic formula from the metabolic clinic, the WIC clinic should coordinate services with them in order to supply any additional WIC formula and/or supplemental foods prescribed by the health care provider as indicated on a Medical Documentation form. In order to assign a WIC client whole milk, the client will need to simultaneously be assigned a Class II or Class III formula in MI-WIC.

- 13) Please clarify the policy regarding the partially breastfeeding (BP) women who request the partially breastfeeding infant (IBP) full formula package for their infants. It was stated that we should keep the mom on WIC to provide breastfeeding support and other services. If mom is giving up her food package, can she go to Focus Hope (CSFP)?

A: No, the client would still be counted as a WIC participant and can receive other WIC services like nutrition education and breastfeeding support. The client may not participate in both the WIC Program and CSFP simultaneously.

Whole Milk

- 14) Why the requirement to have a special formula along with whole milk for clients over age two? Why would a client receive a package with milk and a Class II or III formula?

A: The Institute of Medicine (IOM) committee recommended that "the package should be restrictive only to the extent dictated by the participant's health condition...any foods contained in the food package that ordinarily would apply to that individual's life stage are to be provided if suitable considering the participant's special dietary needs."

The federal regulations allow up to the maximum allowance of supplemental foods with WIC formula appropriate for the client's condition. The health care provider must make a determination and indicate on the Medical Documentation form if the client may receive milk in addition to a Class II or Class III formula.

15) Why would overweight be a qualifying condition for whole milk?

A: Overweight is not a qualifying condition.

16) Will we be able to give Class III and Class II formulas to children 24 months and over without also giving whole milk?

A: Yes, Class II and Class III formulas may be issued without also providing whole milk. The health care provider must indicate on the Medical Documentation form (DCH-1326) if whole milk is allowed.

17) Is it possible to issue whole milk without a physician's order to clients who are underweight, or at high risk of becoming underweight? Can a 2-4 year old underweight child be issued whole milk?

A: No. Women and children 24 months or older who have a qualifying condition and require a Class II or Class III formula may also be issued whole milk if indicated on a Medical Documentation form (DCH-1326 or 1327) completed by a health care provider. A client cannot be issued a WIC formula solely for the purpose of managing weight without an underlying qualifying condition.

A 2-4 year old child must have a qualifying condition, such as failure to thrive, and require a Class II or Class III formula in order to also receive whole milk in place of reduced fat or skim milk.

18) Do women and children 24 months and older need to be on a Class II or III formula to receive whole milk? Can they be issued whole milk?

A: Yes, women and children 24 months and older must be issued a Class II or III formula to receive whole milk. If medically warranted, they may also receive up to the maximum allowance of supplemental foods for their age and category.

19) Class III formulas seem to be an expensive way to go for increasing calories for an underweight child over 2 years. In the past we have recommended Carnation Instant Breakfast added to whole milk to increase calories. Should we be suggesting Boost Kid etc. instead?

A: Underweight is not a qualifying condition. A client can only receive a Class II or III formula if they have a qualifying condition, such as failure to thrive. If a child is underweight and over 2 years of age and does not have a qualifying condition, they may benefit from nutrition education.

Medical Documentation Form

- 20) Is the State WIC Office going to be providing these forms for us to order as in the past or are we going to have to copy the forms as needed or requested?

A: The Medical Documentation forms will be available through the E-form process. The forms may also be accessed through the WIC website at www.michigan.gov/wic then go to the link "New WIC Foods".

- 21) If the MD approved a Class III formula with proper documentation, and then the RD approved it, but the mother says she wants a different package, must we get the MD to fill out new forms with a new diet prescription?

A: If the RD determines that the mother has concerns regarding the prescribed formula, the RD should refer the mother back to the physician.

- 22) When does the Medical Documentation form have to be used? What date does this go into effect?

A: The effective date for the Medical Documentation forms are August 1st. Medical Justification forms or prescriptions are valid until the formula expiration date.

- 23) On the copy of the Medical Documentation form it lists the option for ready to feed formula, but does not make a notation that this is only under the conditions you mentioned. Will the final form have this notation? If not, doctors may select this type of formula and then the request may be denied forcing the client to resubmit a new form.

*A: The current versions of the Medical Documentation forms do not specify the policy criteria for ready-to-feed (RTF) formulas. The State will consider including this detail on future revisions of the forms. If the Medical Documentation form indicates RTF, but the WIC staff cannot approve the order as written because the WIC policy conditions are not met, the WIC CPA or RD may substitute an alternate form of the same formula without requiring the health care provider to re-submit a new form.
[Note: Nutramigen and Nutramigen LIPIL with Enflora LGG are not considered the same product, due to slightly different nutrient formulations]*

- 24) If a client requests a change from a Class III to a non-contract formula, is a Medical Documentation form required?

A: Currently, we do not have "non-contract" standard formulas. To assign a contract formula (Class I), medical documentation is not required. If it is determined that the authorized person (AP) has concerns regarding a prescribed formula, WIC staff should refer the AP back to the physician.

- 25) Do we need a Medical Documentation form completed for lactose free milk if we don't increase the cheese?

A: No, you do not need a Medical Documentation form completed for lactose free milk.

- 26) You indicated that the Medical Documentation form must be renewed every 6 months with the exception that a request for cheese would only need to be renewed every certification period. Isn't the recertification period usually 6 months or did that apply more to pregnant women who are certified for up to 6 weeks postpartum?

A: Yes, the comment applied to pregnant and breastfeeding women. Certification periods for clients generally last 6 months, except for pregnant women who are certified for the duration of pregnancy and up to 6 weeks postpartum, and breastfeeding women are certified up to one year postpartum.

Health Care Providers

- 27) What would be the maximum amounts of foods that could be ordered from the doctor with Class II and Class III formulas?

A: With a Class II or III formula the doctor can order any supplemental foods allowed for the client up to the maximum monthly allowance.

- 28) Do we withhold benefits if a medical provider does not submit a written confirmation within two weeks of the telephone order?

A: Correct - the Class II or III formula, whole milk, and/or cheese substitution as prescribed would be withheld. If written confirmation was not received within two weeks of a telephone order, then the order is no longer valid and the food package should be modified accordingly.

- 29) What is the experience of other states regarding the requirement of physicians to provide detailed food prescriptions? How have physicians responded?

A: Other states are just now beginning to implement the new food packages. As we learn more about this, we can share this information with

you.

- 30) Are MDs and DOs the only medical professionals licensed to complete the Medical Documentation forms? What about RDs from specialized practices, certified nurse practitioners, and physician assistants?

A: A health care provider is one that is licensed to write prescriptions under State law. In Michigan, nurse practitioners, nurse midwives, and physician assistants may have prescriptive authority as a delegated act of a supervising physician (MDs and DOs). Registered dietitians are not licensed to write prescriptions under state law.

- 31) Can a staff person from the doctor's office complete the forms and have the doctor sign them?

A: A medical determination must be made by a health care provider licensed to write prescriptions under state law. The Medical Documentation forms must be signed by a health care professional licensed by the State to write prescriptions in accordance with State law.

- 32) Can an agency complete a Medical Documentation form using the Rx with a diagnosis from the signed hospital discharge or prescription forms and attach/scan the signed Rx?

A: No. The health care provider must complete and sign the Medical Documentation form. They must also include the qualifying condition(s), WIC formula including amount needed per day, supplemental foods appropriate for the qualifying condition, and the length of time the prescribed WIC formula and/or supplemental food is required by the client.

- 33) When an RD is making a dietary recommendation to a physician, can the RD complete the form and send it to the physician for approval and signature?

A: No. An RD is not qualified to diagnose a qualifying condition, which is the basis of the Medical Documentation form. Any WIC formula and supplemental foods indicated would be contingent upon the qualifying condition.

- 34) We were told the DCH-1326 and DCH-1327 forms were going to be sent to physicians directly by WIC. Is this correct or do we need to obtain the forms and forward them to physicians at the local agency level?

A: Family practitioner, pediatrician, and the primary care association

members have been sent a memo referring them to the WIC website to access the Medical Documentation forms. As needed, local agencies may refer physicians to the website (www.michigan.gov/wic, select "New WIC Foods" and scroll down to "Medical providers: What you need to know about new WIC foods" to access the forms, or local agencies may send the forms to physicians by email or US Mail.

- 35) I am considering putting together a presentation for physicians to explain all of the changes. I think they will be very confused by all of this. Does anyone have a PowerPoint presentation that would be appropriate for this audience?

A: Thank you for getting the word out to your physicians. You may contact the State WIC office to obtain an electronic version of the Power Point slide presentation which may be modified to meet your needs. In addition, the web site contains a memo to health care providers which you may use as needed.

Lactose Free Milk/Formula/Lactose Intolerance

- 36) Why is lacto-free formula no longer available?

A: Mead Johnson discontinued their Lactofree LIPIL product and it has thus been removed from our list of authorized formulas. Other Mead Johnson products that contain a reduced level of lactose or are lactose free include Gentlease and Nutramigen, respectively. Note that true congenital lactase deficiency is extremely rare.

- 37) On the medical portion of the MI-WIC system, Medical Condition is highlighted and does address "lactose intolerance". Question #9 on page 1 asks about allergies and is not highlighted. Will this be changed due to the new qualifying conditions? Severe food allergies are not addressed in any other area.

A: This risk is not auto assigned by MI-WIC and that will not change since the CPA must assess whether a food allergy actually has an impact on the nutritional status of a client.

- 38) Will lactose free/reduced whole milk still be available for children over age 2?

A: Yes, but only with medical documentation for whole milk. Children 24 months and older with a qualifying condition may receive lactose free/reduced whole milk if they are also receiving a Class II or III formula.

- 39) What are the qualifying conditions to justify the use of Nutramigen, Pregestimil or Alimentum? Does the infant need to have intolerance to soy and milk protein?

A: An infant must have one of the qualifying medical conditions, as determined by the health care provider. The health care provider would prescribe a formula for the infant's qualifying medical condition based on the indications for use of the formula. The infant is not required to have an intolerance to soy or milk protein (e.g., one indication specified by the manufacturer for Pregestimil LIPIL is fat malabsorption).

Cheese

- 40) Can you please give an example of a qualifying condition appropriate for assigning anything above 4 lb of cheese?

A: The Federal Register indicates, "Amounts of cheese that exceed the maximum substitution amounts may be authorized with medical documentation in cases of lactose intolerance or other qualifying conditions." (7 CFR Part 246.10 Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revision in the WIC Food Packages; Interim Rule December 6, 2007).

- 41) Are you sure you want us to be issuing cheese to a client with a milk protein allergy?

A: The health care provider would differentiate between food intolerance and food allergy, and if appropriate, complete the Medical Documentation form specifying a qualifying condition and allowance or disallowance of WIC foods based on that qualifying condition.

MI-WIC System

- 42) What I really need to know is how do we do all this? Where's the information on what buttons to push in the system? Where are the pictures of the actual MI-WIC system?

A: There are only very minor changes to the MI-WIC screens. For example, the RD approval buttons and Expiration Date are the same, but new policy determines when they are required.

Post Implementation Note: Release Notes for Release 2.0 were emailed on 7-31 and provide an overview of screen changes. The document also references the updated CLINIC User's Manual sections 20.0 and 21.0.

- 43) Are we going to have to go into each of the client records and change their

food packages right after August 1st or are we waiting to see each client for a recertification before we make the changes?

A: Some food packages changed automatically, others can be changed when the client comes in for their next benefit pick up or recertification.

- 44) Is it still required for us to fill out the alternate formula screening forms to determine if a special formula is truly needed? If so, do we scan it into MI-WIC?

A: No, the alternate formula screening forms are not required but the CPA/RD should evaluate the appropriate use of the WIC formula (Refer to Exhibit 7.03F Evaluating Appropriate Use of WIC Formulas).

- 45) Will client food packages change over in the middle of issuance or at the end of BVT date?

A: Client's food package will change over after the current BVT date.

- 46) Can you clarify what the CPA does when a standard package has been customized to remove beans, or milk allowance was altered to provide more cheese in preparation for package change?

A: This package will appear in MI-WIC as a custom package and will not automatically convert to the maximum food package. When clients with customized packages are due for their next benefit issuance, the CPA will need to assign a new package, consistent with the new requirements.

- 47) Will I need to go into those records with customized packages and change them to standard packages before implementation on August 1st?

A: No. Customized food packages may be changed at the client's next appointment/benefit issuance.

- 48) Food packages will not be changed that already have benefits issued past August 1st until the next time benefits are generated/issued?

A: Some food packages will automatically be changed, but the clients benefits will not change to the new package until the next benefit issuance.
Post Implementation Addendum: *Refer to the 8-3-09 Coordinator Notice regarding "New Food Package Transition Issues" and implications related to milk benefits for clients receiving an 'old' food package.*

- 49) Is there a report I can run to identify clients with customized packages?

A: There is not currently a MI-WIC report staff can run at the local agency to identify clients with customized packages. See Q&A below also.

- 50) Can a local agency request an ad hoc report of clients with tailored/custom food packages since there is not a way to get a report in MI-WIC?

A: A report listing clients whose food packages will NOT be automatically converted was mailed to agencies in late July/early August (refer to WIC E-Notice #2009-51: Client Food Packages Not Automatically Converted to a New Food Package, sent July 31st). The report is sorted by BVT dates, with the earliest dates first. This allows WIC staff to reference the data relative to the client's anticipated appointment date, so that CPA support may be planned accordingly.

- 51) When assigning a maximum formula package to a (partially breastfeeding infant) IBP, does the mom's food package (NPP package for a BP) have to be assigned first? Does it matter whose package is assigned first?

A: Yes, the partially breastfeeding women (BP) will first be assigned an NPP (non-lactating postpartum woman) package, then the system will allow the infant the higher amount of formula.

Soy Milk

- 52) Is soy milk going to be part of the new changes? Will it be available to those with a qualifying medical condition?

A: No, soy milk is not available or part of the current change, but is being considered for Phase 2.

State WIC Office Resources

- 53) Can we please get the English version of the overview video vignette in DVD form?

A: The DVD was sent to local agencies in late July.

- 54) When will the webcast be archived?

A: The webcast was archived Monday morning (July 20th) using the same URL link as the live webcast. The link is noted below, and is also accessible via the michigan.gov/wic website (select "New WIC Foods" and scroll down to the Local WIC Agencies section).

learning.mihealth.org/mediasite/wicfoodqualifyingconditions

55) When will the State WIC office be sending the new Food Cards and the updated MI-WIC Policies (7.03)?

A: English Food Cards were sent in late July. Local agencies should expect to receive the Spanish and Arabic Food Cards in early September. The MI-WIC policies were posted to the WIC website the same day as the live webcast in July.

56) When can we expect client handouts and bulletin board materials to educate clients about the new food package?

A: Client materials are currently available on the Michigan WIC website at www.michigan.gov/wic at the "New WIC Foods" link. Materials that agencies may order via E-forms are expected to be available in September. The State WIC office is still in the process of collecting bulletin board materials from local agencies and other states. Refer also to the WIC Notice 2009-54: Publications on Web Site for Food Package, sent July 31st.

57) When will we receive the compiled Q&As from the previous webcast?

A: We plan to have the Q&As available from the previous webcast in August.

58) Will we receive the compiled Q&As from this webcast?

A: Yes.