Advanced Formula Trainer's Guide

What trainees should know or understand by the end of training:

- 1. Be familiar with the non-standard mixing instructions for formulas that can be found on the WIC Manuals page.
- 2. Trainees will be familiar with the circumstances when medical documentation is required for standard contract formulas.
- 3. Be familiar with acceptable forms of written medical documentation.
- 4. Be familiar with the required components of written medical documentation.
- 5. Be able to differentiate between partially complete and invalid written medical documentation.
- 6. Be familiar with which employees may issue/approve the different colors/shapes of formula, as well as the duration for issuance.
- 7. Be familiar with requirements for a participant to have a formula provided by AHCCCS.
- 8. Be familiar with the appropriate steps to take if a participant appears to meet the requirements for a formula to be provided by AHCCCS.
- 9. Be familiar with situations in which medical documentation is required for the issuance of milk and milk alternatives.
- 10. Be familiar with state policies regarding the issuance of food packages with only formula and no infant foods.
- 11. Be familiar with state policies regarding the continuation of formula beyond one-year actual age.

Live Training Needed

- Review the procedure for formula approvals at your agency, including who can approve what types of formulas, what to do when an FFR is incomplete, and whether to use birth dates or last date to use when approving formula according to your local agency policy.
- Show trainee where to find and how to use formula resources such as the FFR template, HANDS formula spreadsheet, the AZ WIC formulary, and the list of UPC codes for pharmacy special order.
- Discuss the policy regarding conditionally special formulas and how to address the situation when a participant does/does not meet qualifying criteria.
- Review policy regarding 1-month issuance of formula while waiting to obtain a complete
- Discuss obtaining extensions of 1-month approvals, including situations where this may be appropriate and how to contact the state office for an approval.

Suggested Exercises to Prepare for Observations

The following are recommended exercises to help trainees prepare for stage 4 Observations. They can be completed in any order, and may be repeated as often as needed for the trainee to grasp the concepts presented.

HANDS Practice

Have trainee complete the following exercises in HANDS:

• Entering approvals for special and conditionally special formulas in HANDS

Verbal Practice

Have trainee explain the following to the trainer:

- What to share with a participant about the process for getting a special formula approved
- How to determine if an FFR is complete, incomplete, or invalid
- Why a non-contract formula may or may not be approved
- How to order a formula that is only available through a pharmacy
- How to determine if a formula may be available through AHCCCS

Observe

Have trainee observe you or another staff member approving special/conditionally special formulas.

Role Play

Have trainee practice the following skills with you or another staff member:

- Processing FFRs for special and conditionally special formulas, including reviewing to determine if it is complete or incomplete, following up with the healthcare provider if needed, scanning and approving in training HANDS, tailoring benefits and following up with an Authorized Representative
- Assessing a situation to determine whether a non-contract formula is appropriate or not
- Reviewing FFRs for full fat dairy products
- Approving formula, no foods packages when developmentally appropriate for infants
- Issuing formula past one (1) year actual age to infants who were premature

Guidebook Answers

Estimated seat time for course/guidebook: 1 hour

Module 1

Formula Type	Indication/Who it should be issued to
Standard Cow's-Milk-Based	Healthy full-term infants
Soy	For religious or dietary concerns where a dairy-free option is preferred Galactosemia
Reduced Lactose	For infants with lactose sensitivity For mild spit-up
Reduced Lactose/Partially Hydrolyzed	For mild digestive problems

1. To prepare Similac Advance powdered formula, add 1 unpacked level scoop to each 2 fl oz of water.

Formula	Forms Available (powder, concentrate, ready to feed)	What features does this formula have?	What are the indications for use of this formula?
Similac Neosure	Powder and ready to feed	22 kcal per oz, higher percentage MCT oil	Premature or low birth weight infants, for use post-discharge
Enfamil Enfacare	Powder and ready to feed	22 kcal per oz, higher percentage of MCT oil, contains MFGM	Premature or low birth weight infants
Similac Alimentum	Powder and ready to feed	Contains extensively hydrolyzed casein protein with free amino acids, blend of two carbohydrates	Food allergy, colic
Enfamil Nutramigen	Powder, concentrate, ready to feed	Contains extensively hydrolyzed cow's milk protein, is lactose free, and contains the probiotic LGG (in the powdered form)	Food allergy, colic

- 2. How can you determine if a formula is covered by AZ WIC?
- The gray colored or star formulas on the formula color chart are not available from Arizona WIC.
- While there are only four gray formulas on the formula color chart, there are many other formulas that are not able to be issued by the Arizona WIC program. This includes formula container sizes for contract formulas other than those listed in the WIC Formulary and most other formulas not listed on the WIC Formulary.

Module 2

- 1. When is medical documentation required?
- 1. Non-contract formulas
- 2. Special formulas
- 3. Conditionally special formulas
- 4. WIC-eligible nutritionals
- 5. Any formula prescribed to a child or adult, and
- 6. Any supplemental foods issued to participants receiving Federal Food Package 3 (which is a special food package in HANDS), unless defaulted to RDN or State-Approved Nutritionist by a prescriptive authority.
- 7. Standard contract formulas when
 - a. Requested for a child/adult
 - b. There is approved, current medical documentation for a special formula in **HANDS**
 - c. Issuing powder for a preterm or low birth weight infant less than 3 months corrected age, and

- d. For infants 6-11 months, who need higher amounts of formula and no infant foods.
- 8. Milk alternatives
 - a. Skim/1% milk for children one year of age, and
 - b. Whole milk for participants two years of age and older.
- 2. Acceptable forms of written medical documentation include:
- 1. A doctor's prescription form
- 2. a doctor's letterhead with prescription, and
- 3. the WIC Formula and Food Request (FFR)
- 3. Who has prescriptive authority in AZ?

MD, DO, NMD, PA, NP, CNM, NMD

4. Who does not have prescriptive authority in AZ?

Ced. Prof, Ced. Especialista, DC, MA

FFR Status	Follow-Up Needed			
Partially Complete Documentation	You can contact the office of the prescriptive authority and verbally collect the information from the doctor or another member of the care team (e.g., a medical assistant) who is referencing information provided by the prescriptive authority.			
	If you are able to obtain the missing information verbally, scan the medical documentation into HANDS and add the missing information to a note in HANDS, along with other pertinent information regarding the call (e.g., with whom you spoke, when the conversation took place, etc.). • In this situation, you can issue up to three months of food and/or formula benefits if appropriate. • However, you'll still request that the prescriptive authority send you valid written medical documentation within 30 days because without it, no additional formula can be issued beyond the original issuance period (e.g., three months) without first contacting the WIC Food Package Consultant or a State WIC Nutrition Consultant for consent.			

Invalid Medical Documentation If medical documentation is invalid or missing, only RDN and State Approved Nutritionists can collect the missing information verbally from the prescriptive authority. The requirements for verbal documentation are the same as written documentation, with the exception of the signature of the prescriptive authority. Instead, you will collect the name of the prescriptive authority. If you're able to collect all of the required information verbally, request they send you valid written medical documentation within 30 days. • Then, add the missing information to a note in HANDS, along with other pertinent information about the call. In this situation, you may issue only one month of food and/or formula benefits until written documentation is received. No additional formula can be issued beyond the original one-month issuance period without first contacting the WIC Food Package Consultant or a State WIC Nutrition Consultant for consent. Missing Medical Documentation If medical documentation is invalid or missing, only RDN and State Approved Nutritionists can collect the missing

information verbally from the prescriptive authority.

The requirements for verbal documentation are the same as written documentation, with the exception of the signature of the prescriptive authority. Instead, you will collect the name of the prescriptive authority.

- If you're able to collect all of the required information verbally, request they send you valid written medical documentation within 30 days.
- Then, add the missing information to a note in HANDS, along with other pertinent information about the call.

In this situation, you may issue only one month of food and/or formula benefits until written documentation is received.

No additional formula can be issued beyond the original one-month issuance period without first contacting the WIC Food Package Consultant or a State WIC Nutrition

Consultant	for	consent
Consultant	101	consent.

Module 3

Formula Type	Requirements for Approval
Contract Formulas	 WIC Competent Professional Authorities (CPAs) can issue contract formulas to infants until their first birthday without medical documentation. Medical documentation is not required for infants switching from one "green" contract formula to another contract formula, even if previously approved medical documentation exists in HANDS. However, medical documentation is required to be approved by RDNs or State Approved Nutritionists for "green" formulas when the infant is receiving any other color formula and has previously approved and current medical documentation in HANDS.
Special Formulas	Special formulas require medical documentation to be evaluated and approved by RDNs or State-Approved Nutritionists before issuance. Upon approval they may be issued to participants up to the full duration indicated by the prescriptive authority. However, according to Arizona state law prescriptions aren't considered valid past one year of when they were originally written, so it may be necessary to collect medical documentation annually for some participants that require special food packages.
WIC Eligible Nutritionals	Require medical documentation to be evaluated and approved by RDNs or State-Approved Nutritionists before issuance. Nutritionals may be issued up to the full duration indicated by the prescriptive authority. Most WIC-eligible nutritionals are intended for women and children one year of age and older. Please note, any WIC-eligible nutritionals not formulated for infants shall not be issued to infants. The special formula considerations we just reviewed also apply to WIC-eligible nutritionals.
Conditionally Special: WIC Eligible Nutritionals	All conditionally special WIC-eligible nutritionals require medical documentation to be evaluated and approved by RDNs or State-Approved Nutritionists before issuance. Upon approval, they may be issued to participants up to the full duration indicated by the prescriptive authority.

Please note, these formulas are intended for women and children one year of age and older and shall not be issued to infants. All of the same considerations that apply to the approval/issuance of WIC-eligible Nutritionals apply to these special formulas as well. Also, "Purple" Formulas have additional assessment and approval requirements.

1. What are the 4 reasons a non-contract formula may be issued?

Transition Risk:

Transition to an alternate contract formula is medically contraindicated for pre- or post-operative recovery where formula transition would put the infant at risk for compromised nutritional status impacting growth and development.

NICU Discharge:

NICU discharge warrants continuation of a tolerated non-contract formula to avoid weight loss in the recovery of a previous Failure to Thrive infant (WIC code 134) or infant who has experienced inadequate growth (WIC code 135).

Congenital Defect:

Infants with a medical birth history of a congenital defect (WIC code 349) where formula transition would put the infant at risk for compromised nutritional status impacting growth and development.

Hx of Disorder:

Infants with a medical history of central nervous system disorders (WIC code 348) and genetic/congenital disorders (WIC code 349) where formula transition would put the infant at risk for compromised nutritional status impacting growth and development.

2. If a participant does not meet one of the criteria above, but you feel there are extenuating circumstances that merit issuance of a non-contract formula, what should you do next?

If the client doesn't meet one of the four criteria, but you believe there are extenuating circumstances in which it may still be appropriate to issue a non-contract formula, please contact the WIC Food Package Consultant or State WIC Nutrition Consultant.

Module 4

Tailoring Topic	Question	Yes or No
Supplemental foods	If section 6 of the FFR is not completed, can an RDN/WIC Nutritionist tailor supplemental foods?	Yes
Formula Calorie Adjustments	If you receive an FFR requesting formula with additional calories per ounce, can you issue more formula than the WIC maximum to accommodate the request?	No
Premature Infants	Can RDN/State-Approved Nutritionist(s) adjust the approvals for formula with no foods, and formula issuance based on Corrected Age?	Yes

Practice Activities

- 1. Imagine you have received a complete FFR for a C3 to be issued Pediasure for 6 months due to autism and failure-to-thrive.
 - o Discuss the conditions in which Pediasure can or cannot be issued.

Additionally, medical documentation for Pediasure, Pediasure with Fiber, and Boost Kid Essentials can only be approved and food benefits issued when at least one of the following conditions exist:

- At or below the 5th percentile
 - 1. Children one year of age measured recumbently, if weight for length is at or below the 5th percentile on the "WHO - WEIGHT FOR LENGTH" growth chart in HANDS (Risk code 103.1 or 103.2).
 - 2. Children two to five years old measured standing, if BMI for age is at or below the 5th percentile on the "CDC - BMI FOR AGE" growth chart in HANDS (Risk Code 103.1).
 - 3. Children 24-36 months measured recumbently (indicate recumbent measurement in HANDS), if weight for length is at or below the 5th percentile on the "CDC - WEIGHT FOR LENGTH 24-36" growth chart in HANDS.
- Weight curve has crossed more than two percentile lines on the growth charts after having achieved a previously stable pattern (e.g., the child has dropped from the 75th to the 25th percentile over time)
- · Other medical conditions for the management of nutrition-related disorders

For all other questionable conditions, contact the State WIC Office for technical assistance.

NOTE: Pediasure, Pediasure with Fiber, and Boost Kid Essentials cannot be issued for the following reasons:

- In response to picky eaters.
- For the sole purpose of enhancing nutrient intake or managing body weight without an underlying medical condition.
- Create or find a family with a C3 in training HANDS. Tailor the C3's food package to include 2 cans of Pediasure per day (and adjust the total for the month).
- Enter an approval for 6 months.
- 2. Look at the FFR below and answer the following guestions.

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• Would this FFR be considered complete, incomplete, or invalid?

Incomplete

What steps should you take next after receiving this FFR?

Attempt to contact prescriptive authority and obtain a verbal approval. If a verbal approval can be obtained, enter a note in HANDS with the details, issue

a month, and try to get a new FFR. If no verbal approval can be obtained, scan in the incomplete FFR, issue 1 month of formula, and continue trying to get a new FFR.

- 3. You are talking with the parents of 3-week-old Nathan, an exclusively formula fed premature infant who was just released from the NICU. He has a congenital heart defect and is going to have surgery for this next month. In the meantime, he has been struggling to gain weight. He has been receiving a standard non-contract formula in the NICU and the parents have brought in an FFR for this formula. They state that the baby's healthcare provider instructed them to mix the formula to 24 kcals/oz.
 - Based on the information provided here, would this infant qualify to receive a non-contract formula approval?

Yes; he has a transition risk, was recently discharged from the NICU, and has a congenital defect.

o If so, what steps would you take next?

Scan the FFR into HANDS, enter a note documenting the situation, and contact the state office for approval.

What follow-up questions could you ask to verify that the correct mixing instructions are being followed?

Possible answers:

What special instructions did your doctor give you about mixing the formula? How are you preparing baby's formula?

How much powder vs how much water are you adding?

- 4. You are speaking with the mom of Naomi, an infant who was born at 30 weeks gestation. Naomi is now 6 months old and is in the IPN category. Her mom feels good about the baby's growth and the progress she is making, but when discussing the food package she shares that Naomi's doctor feels she will not be ready to start pureed foods for a few more months.
 - o For how long would you be able to approve a package that does not include any infant foods without medical documentation?

Until Naomi reaches 6 months corrected age, which is 8.5 months for Naomi (6 months + 10 weeks).

o For how long would you be able to approve a package that includes infant formula and infant foods without medical documentation?

Until Naomi reaches 12 months corrected age (14.5 months chronological age).

- o In training HANDS, create a file for Naomi, or add her to the file you created in exercise 1. Practice entering and approving an appropriate food package for the next 3 months that includes a standard contract formula.
- Naomi is getting 2 4-oz bottles of formula a day. Tailor the amount of formula issued to the appropriate amount.

For standard powdered formula can size, tailored amount is 3 cans.