

Food Packages

- I. All WIC food items issued to participants are organized in food packages specific to the WIC category and individual participant nutritional risk(s) and needs. The Utah WIC Program utilizes offline smart card electronic benefits that are generated and issued at the clinic site. Electronic benefits are issued to a WIC participant by the local clinic to purchase the WIC supplemental foods prescribed for that participant.
- II. Partially breastfeeding includes the descriptor of “mostly” which means receiving an “in range” amount of WIC formula.
- III. The Utah WIC Food Packages are based on the Federal WIC Regulations which stipulate seven categories of food packages as listed below:
 - a. Food Packages I, II and III (for infants)
 - i. Fully Formula Fed (FF)
 - ii. Partially Breastfed (BF/FF)
 - iii. Fully Breastfed (BF)
 - b. Food Packages III, IV, V, VI and VII
 - i. Children – IV (1 through 4 years of age and including the month that the child turns 5 years of age)
 - ii. Pregnant and Partially Breastfeeding (up to 1 year postpartum)– V
 - iii. Postpartum (up to 6 months) – VI
 - iv. Fully Breastfeeding – VII
 - c. The Food Package Tables, including footnotes, that follow were taken directly from the federal regulations. Please refer to the policy section, Foods that are Authorized, to determine what state agency options were implemented by the Utah WIC Program.
- IV. The participant is “prescribed” a food package(s) at the time of certification. The food package is entered into the computer so the participant can have the appropriate food items loaded to their electronic benefits card. See tables below.
- V. Infants who are 11 months of age must receive an infant food package for that calendar month ~~when the participant reaches one year of age~~. Infants shall not receive a child food package during this month prior to the 12th month birthday. Beginning with the following month or the day after the 12th month birthday, the category must change from infant to child and the child food package issued.

VI. Standard Food Packages

Full nutrition benefit and maximum monthly allowances, options and substitution rates of supplemental foods for infants in Food Packages I, II and III are stated in Table 1 as follows:

TABLE 1. Full Nutrition Benefit (FNB) and Maximum Monthly Allowances (MMA) of Supplemental Foods For Infants In Food Packages I, II and III						
Foods¹	Fully Formula Fed (FF)		Partially (Mostly) Breastfed (BF/FF)		Fully Breastfed (BF)	
	Food Packages I-FF & III-FF A: 0 through 3 months B: 4 through 5 months	Food Packages II-FF & III-FF 6 through 11 months	Food Packages I-BF/FF & III BF/FF (A: 0 to 1 month ^{2, 3}) B: 1 through 3 months C: 4 through 5 months	Food Packages II- BF/FF & III BF/FF 6 through 11 months	Food Package I-BF 0 through 5 months	Food Package II-BF 6 through 11 months
WIC Formula ^{4,5,6,7,8}	A: FNB=806 fl oz MMA= 823 fl oz reconstituted liquid concentrate or 832 fl. oz. RTF or 870 fl oz reconstituted powder B: FNB=884 fl oz MMA = 896 fl oz reconstituted liquid concentrate or 913 fl oz RTF or 960 fl oz reconstituted powder	FNB=624 fl oz MMA = 630 fl oz reconstituted liquid concentrate or 643 fl. oz RTF or 696 fl oz reconstituted powder	A: 104 fl oz reconstituted powder B: FNB=364 fl oz MMA = 388 fl oz reconstituted liquid concentrate or 384 fl oz RTF or 435 fl oz reconstituted powder C: FNB=442 fl oz MMA = 460 fl oz reconstituted liquid concentrate or 474 fl oz RTF or 522 fl oz reconstituted powder	FNB=312 fl oz MMA = 315 fl oz reconstituted liquid concentrate or 338 fl oz RTF or 384 fl oz reconstituted powder		
Infant Cereal ^{9,11}		24 oz		24 oz		24 oz

Infant food fruits and vegetables 9,10,11,12,13		128 oz		128 oz		256 oz
Infant food meat 9						77.5 oz

Notes:

Low iron formula is not allowed in Food Package I and II, however, it can be allowed in Food Package III.

(Abbreviations in order of appearance in table): FF = fully formula fed; BF/FF = partially (mostly) breastfed; BF = fully breastfed; RTF = Ready-to-feed; N/A = the supplemental food is not authorized in the corresponding food package

¹ Table 4 of paragraph (e)(12) of this section describes the minimum requirements and specifications for the supplemental foods. The competent professional authority (CPA) is authorized to determine nutritional risk and prescribe supplemental foods as established by State agency policy in Food Packages I and II. In Food Package III, the CPA, as established by State agency policy, is authorized to determine nutritional risk and prescribe supplemental foods per medical documentation.

² State agencies have the option to issue not more than one can of powder infant formula in the container size that provides closest to 104 reconstituted fluid ounces to breastfed infants on a case-by-case basis.

³ Liquid concentrate and ready-to-feed (RTF) may be substituted at rates that provide comparable nutritive value.

⁴ WIC formula means infant formula, exempt infant formula, or WIC-eligible nutritionals. Infant formula may be issued for infants in Food Packages I, II and III. Medical documentation is required for issuance of infant formula, exempt infant formula, WIC-eligible nutritionals, and other supplemental foods in Food Package III. Only infant formula may be issued for infants in Food Packages I and II.

⁵ The full nutrition benefit is defined as the minimum amount of reconstituted fluid ounces of liquid concentrate infant formula as specified for each infant food package category and feeding variation (e.g., Food Package IA-fully formula fed).

⁶ The maximum monthly allowance is specified in reconstituted fluid ounces for liquid concentrate, RTF liquid, and powder forms of infant formula and exempt infant formula. Reconstituted fluid ounce is the form prepared for consumption as directed on the container.

⁷ State agencies must provide at least the full nutrition benefit authorized to non-breastfed infants up to the maximum monthly allowance for the physical form of the product specified for each food package category. State agencies must issue whole containers that are all the same size of the same physical form. Infant formula amounts for breastfed infants, even those in the fully formula fed category should be individually tailored to the amounts that meet their nutritional needs.

⁸ State agencies may round up and disperse whole containers of infant formula over the food package timeframe to allow participants to receive the full nutrition benefit. State agencies must use the methodology described in accordance with paragraph (h)(1) of this section.

⁹ State agencies may round up and disperse whole containers of infant foods (infant cereal, fruits and vegetables, and meat) over the Food Package timeframe. State agencies must use the methodology described in accordance with paragraph (h)(2) of this section.

¹⁰ At State agency option, for infants 6-12 months of age, fresh banana may replace up to 16 ounces of infant food fruit at a rate of 1 pound of bananas per 8 ounces of infant food fruit. State agencies may also substitute fresh bananas at a rate of 1 banana per 4 ounces of jarred infant food fruit, up to a maximum of 16 ounces.

11 In lieu of infant foods (cereal, fruit and vegetables), infants greater than 6 months of age in Food Package III may receive infant formula, exempt infant formula or WIC-eligible nutritionals at the same maximum monthly allowance as infants ages 4 through 5 months of age of the same feeding option.

12 At State agency option, infants 9 months through 11 months in Food Packages II and III may receive a vegetable and fruit benefit to purchase fresh (only) fruits and vegetables in lieu of a portion of the infant food fruits and vegetables. Partially (mostly) breastfed infants and fully formula fed infants may receive a \$4 vegetable and fruit benefit plus 64 ounces of infant food fruits and vegetables; fully breastfeeding infants may receive a \$8 vegetable and fruit benefit plus 128 ounces of infant food fruit and vegetables.

13 State agencies may not categorically issue vegetable and fruit benefits for infants 9 months through 11 months. The vegetable and fruit benefit is to be provided to the participant only after an individual nutrition assessment, as established by State agency policy, and is optional for the participant, i.e., the mother may choose to receive either the maximum allowance of jarred foods or a combination of jarred foods and a vegetable and fruit benefit for her infant. State agencies must ensure that appropriate nutrition education is provided to the caregiver addressing safe food preparation, storage techniques, and feeding practices to make certain participants are meeting their nutritional needs in a safe and effective manner.

Maximum monthly allowances of supplemental foods in Food Packages IV through VII. The maximum monthly allowances, options and substitution rates of supplemental foods for children and women in Food Package IV through VII are stated in Table 2 as follows:

TABLE 2. Maximum Monthly Allowances of Supplemental Foods for Children and Women in Food Packages IV, V, VI and VII				
Foods ¹	Children	Women		
	Food Package IV 1 through 4 years	Food Package V: Pregnant and Partially (Mostly) Breastfeeding (up to 1 year postpartum) ²	Food Package VI: Postpartum (up to 6 months postpartum) ³	Food Package VII: Fully Breast-feeding (up to 1 year post-partum) ^{4,5}
Juice, single strength ⁶	128 fl oz	144 fl oz	96 fl oz	144 fl oz
Milk, fluid	16 qt ^{7,8,9,10,11}	22 qt ^{7,8,9,10,12}	16 qt ^{7,8,9,10,12}	24 qt ^{7,8,9,10,12}
Breakfast cereal ¹³	36 oz	36 oz	36 oz	36 oz
Cheese	N/A	N/A	N/A	1 lb
Eggs	1 dozen	1 dozen	1 dozen	2 dozen
Fruits and vegetables ^{14,15}	\$9.00 in cash-value benefit	\$11.00 in cash-value benefit	\$11.00 in cash-value benefit	\$11.00 in cash-value benefit
Whole wheat or whole grain bread ¹⁶	2 lb	1 lb	N/A	1 lb
Fish (canned)	N/A	N/A	N/A	30 oz
Legumes, dry ¹⁷ and/or Peanut butter	1 lb Or 18 oz	1 lb And 18 oz	1 lb Or 18 oz	1 lb And 18 oz

Table 2 Footnotes: N/A = the supplemental food is not authorized in the corresponding food package.

¹ Table 4 of paragraph (e)(12) of this section describes the minimum requirements and specifications for the supplemental foods. The competent professional authority (CPA) is authorized to determine nutritional risk and prescribe supplemental foods as established by State agency policy.

² Food Package V is issued to two categories of WIC participants: Women participants with singleton pregnancies; breastfeeding women whose partially (mostly) breastfed infants receive formula from the WIC Program in amounts that do not exceed the maximum formula allowances, as appropriate for the age of the infant as described in Table 1 of paragraph (e)(9) of this section.

³ Food Package VI is issued to two categories of WIC participants: Non-breastfeeding postpartum women and breastfeeding postpartum women whose infants receive more than the maximum infant formula allowances, as appropriate for the age of the infant as described in Table 1 of paragraph (e)(9) of this section.

⁴ Food Package VII is issued to four categories of WIC participants: Fully breastfeeding women whose infants do not receive formula from the WIC Program; women pregnant with two or more fetuses; women partially (mostly) breastfeeding multiple infants from the same pregnancy; and pregnant women who are also fully or partially (mostly) breastfeeding singleton infants.

⁵ Women fully breastfeeding multiple infants from the same pregnancy are prescribed 1.5 times the maximum allowances.

⁶ Combinations of single-strength and concentrated juices may be issued provided that the total volume does not exceed the maximum monthly allowance for single-strength juice.

⁷ Whole milk is the standard milk for issuance to 1-year-old children (12 through 23 months). At State agency option, fat-reduced milks may be issued to 1-year-old children for whom overweight or obesity is a concern. The need for fat-reduced milks for 1-year-old children must be based on an individual nutritional assessment and consultation with the child's health care provider if necessary, as established by State agency policy. Lowfat (1%) or nonfat milks are the standard milk for issuance to children \geq 24 months of age and women. Reduced fat (2%) milk is authorized only for participants with certain conditions, including but not limited to, underweight and maternal weight loss during pregnancy. The need for reduced fat (2%) milk for children \geq 24 months of age (Food Package IV) and women (Food Packages V-VII) must be based on an individual nutritional assessment as established by State agency policy.

⁸ Evaporated milk may be substituted at the rate of 16 fluid ounces of evaporated milk per 32 fluid ounces of fluid milk or a 1:2 fluid ounce substitution ratio. Dry milk may be substituted at an equal reconstituted rate to fluid milk.

⁹ For children and women, cheese may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk. For children and women in Food Packages IV-VI, no more than 1 pound of cheese may be substituted. For fully breastfeeding women in Food Package VII, no more than 2 pounds of cheese may be substituted for milk. State agencies do not have the option to issue additional amounts of cheese beyond these maximums even with medical documentation. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children and women in Food Packages IV-VI. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in Food Package VII.)

¹⁰ For children and women, yogurt may be substituted for fluid milk at the rate of 1 quart of yogurt per 1 quart of milk; a maximum of 1 quart of milk can 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). At State agency option, lowfat or nonfat yogurt may be issued to 1-year-old children for whom overweight and obesity is a concern. The need for lowfat or nonfat yogurt for 1-year-old children must be based on an individual nutritional assessment and consultation with the child's health care provider if necessary, as established by State agency policy. Lowfat or nonfat yogurts are the only types of yogurt authorized for children \geq 24 months of age and women. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children and women in Food Packages IV-VI. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in Food Package VII.) Yogurt effective April 1, 2015

¹¹ For children, issuance of tofu and soy-based beverage as substitutes for milk must be based on an individual nutritional assessment and consultation with the participant's health care provider if necessary, as established by State agency policy. Such determination can be made for situations that include, but are not limited to, milk allergy, lactose intolerance, and vegan diets. Soy-based beverage may be substituted for milk for children on a quart for quart basis up to the total maximum allowance of milk. Tofu may be substituted for milk for children at the rate of 1 pound of tofu per 1 quart of milk. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children in Food Package IV.) Additional amounts of tofu may be substituted, up to the maximum allowance for fluid milk for lactose intolerance or other reasons, as established by State agency policy.

¹² For women, soy-based beverage may be substituted for milk on a quart for quart basis up to the total maximum allowance of milk. Tofu may be substituted for milk at the rate of 1 pound of tofu per 1 quart of milk. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in Food Packages V and VI. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in Food Package VII.) Additional amounts of tofu may be substituted, up to the maximum allowances for fluid milk, for lactose intolerance or other reasons, as established by State agency policy.

¹³ At least one-half of the total number of breakfast cereals on the State agency's authorized food list must have whole grain as the primary ingredient and meet labeling requirements for making a health claim as a "whole grain food with moderate fat content" as defined in Table 4 of paragraph (e)(12) of this section.

¹⁴ Both fresh fruits and fresh vegetables must be authorized by State agencies. Processed fruits and vegetables, i.e., canned (shelf-stable), frozen, and/or dried fruits and vegetables may also be authorized to offer a wider variety and choice for participants. State agencies may choose to authorize one or more of the following processed fruits and vegetables: canned fruit, canned vegetables, frozen fruit, frozen vegetables, dried fruit, and/or dried vegetables. The cash-value benefit may be redeemed for any eligible fruit and vegetable (refer to Table 4 of paragraph (e)(12) of this section and its footnotes). Except as authorized in paragraph (b)(1)(i) of this section, State agencies may not selectively choose which fruits and vegetables are available to participants. For example, if a State agency chooses to offer dried fruits, it must authorize all WIC-eligible dried fruits.

¹⁵ The monthly value of the vegetable/fruit cash-value benefit will be adjusted annually for inflation as described in § 246.16(j).

¹⁶ Whole wheat and/or whole grain bread must be authorized. State agencies have the option to also authorize brown rice, bulgur, oatmeal, whole-grain barley, whole wheat macaroni products, or soft corn or whole wheat tortillas on an equal weight basis.

¹⁷ Canned legumes may be substituted for dry legumes at the rate of 64 oz. (e.g., four 16-oz cans) of canned beans for 1 pound dry beans. In Food Packages V and VII, both beans and peanut butter must be provided. However, when individually tailoring Food Packages V or VII for nutritional reasons (e.g., food allergy, underweight, participant preference), State agencies have the option to authorize the following substitutions: 1 pound dry and 64 oz. canned beans/peas (and no peanut butter); or 2 pounds dry or 128 oz. canned beans/peas (and no peanut butter); or 36 oz. peanut butter (and no beans)

VII. Food Package III

- a. This food package is reserved for issuance to women, infant and child participants who have a documented qualifying condition that requires the use of a WIC formula (infant formula, exempt infant formula or WIC-eligible nutritional) because the use of conventional foods is precluded, restricted, or inadequate to address their special nutritional needs. Participants who are eligible to receive this food package must have one or more qualifying conditions, as determined by a health care professional licensed to write medical prescriptions under State law. 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.
- b. This food package may not be issued solely for the purpose of enhancing nutrient intake or managing body weight.
- c. This food package is not authorized for infants 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; or a non-specific formula or food intolerance.
- d. Examples of WIC participants qualifying for Food Package III:
 - i. Infants with exempt infant formula
 - ii. Infants 6 months or older with higher amounts of infant formula in lieu of infant solid foods
 - iii. Children with contract formula, exempt formula, and/or WIC-eligible nutritionals
 - iv. Women with formula and/or WIC-eligible nutritionals

Maximum monthly allowances of supplemental foods for children and women with qualifying conditions in Food Package III. The maximum monthly allowances, options and substitution rates of supplemental foods for participants with qualifying conditions in Food Package III are stated in

Table 3 as follows:

TABLE 3. Maximum Monthly Allowances (MMA) of Supplemental Foods for Children and Women with Qualifying Conditions in Food Package III				
Foods ¹	Children	Women		
	1 through 4 years	Pregnant and Partially Breast-feeding (up to 1 year postpartum) ²	Postpartum (up to 6 months postpartum) ³	Fully Breastfeeding, (up to 1 year post-partum) ^{4,5}
Juice, single strength ⁶	128 fl oz	144 fl oz	96 fl oz	144 fl oz
WIC Formula ^{7,8}	455 fl oz liquid concentrate	455 fl oz liquid concentrate	455 fl oz liquid concentrate	455 fl oz liquid concentrate
Milk	16 qt ^{9, 10, 11, 12, 13}	22 qt ^{9, 10, 11, 12, 14}	16 qt ^{9, 10, 11, 12, 14}	24 qt ^{9, 10, 11, 12, 14}
Breakfast cereal ^{15, 16}	36 oz	36 oz	36 oz	36 oz
Cheese	N/A	N/A	N/A	1 lb
Eggs	1 dozen	1 dozen	1 dozen	2 dozen
Fruits and vegetables ^{17, 18, 19}	\$9.00 in cash-value benefit	\$11.00 in cash-value benefit	\$11.00 in cash-value benefit	\$11.00 in cash-value benefit
Whole wheat or whole grain bread ²⁰	2 lb	1 lb	N/A	1 lb
Fish (canned)	N/A	N/A	N/A	30 oz
Legumes, dry ²¹ and/or Peanut butter	1 lb Or 18 oz	1 lb And 18 oz	1 lb Or 18 oz	1 lb And 18 oz

Table 3 Footnotes: N/A=the supplemental food is not authorized in the corresponding food package.

¹ Table 4 of paragraph (e)(12) of this section describes the minimum requirements and specifications for the supplemental foods. The competent professional authority (CPA), as established by State agency policy, is authorized to determine nutritional risk and prescribe supplemental foods per medical documentation.

² This food package is issued to two categories of WIC participants: Women participants with singleton pregnancies and breastfeeding women whose partially (mostly) breastfed infants receive formula from the WIC Program in amounts that do not exceed the maximum formula allowances as appropriate for the age of the infant as described in Table 1 of paragraph (e)(9) of this section.

³ This food package is issued to two categories of WIC participants: Non-breastfeeding postpartum women and breastfeeding postpartum women whose breastfed infants receive more than the maximum infant formula allowances as appropriate for the age of the infant as described in Table 1 of paragraph (e)(9) of this section.

⁴ This food package is issued to four categories of WIC participants: Fully breastfeeding women whose infants do not receive formula from the WIC Program; women pregnant with two or more fetuses; women partially (mostly) breastfeeding multiple infants from the same pregnancy, and pregnant women who are also partially (mostly) breastfeeding singleton infants.

⁵ Women fully breastfeeding multiple infants from the same pregnancy are prescribed 1.5 times the maximum allowances.

⁶ Combinations of single-strength and concentrated juices may be issued provided that the total volume does not exceed the maximum monthly allowance for single-strength juice.

⁷ WIC formula means infant formula, exempt infant formula, or WIC-eligible nutritionals.

⁸ Powder and ready-to-feed may be substituted at rates that provide comparable nutritive value.

⁹ Whole milk is the standard milk for issuance to 1-year-old children (12 through 23 months). Fat-reduced milks may be issued to 1-year old children as determined appropriate by the health care provider per medical documentation. Lowfat (1%) or nonfat milks are the standard milks for issuance for children \geq 24 months of age and women. Whole milk or reduced fat (2%) milk may be substituted for lowfat (1%) or nonfat milk for children \geq 24 months of age and women as determined appropriate by the health care provider per medical documentation.

¹⁰ Evaporated milk may be substituted at the rate of 16 fluid ounces of evaporated milk per 32 fluid ounces of fluid milk or a 1:2 fluid ounce substitution ratio. Dry milk may be substituted at an equal reconstituted rate to fluid milk.

¹¹ For children and women, cheese may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk. For children and women in the pregnant, partially breastfeeding and postpartum food packages, no more than 1 pound of cheese may be substituted. For women in the fully breastfeeding food package, no more than 2 pounds of cheese may be substituted for milk. State agencies do not have the option to issue additional amounts of cheese beyond these maximums even with medical documentation. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children and women in the pregnant, partially breastfeeding and postpartum food packages. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in the fully breastfeeding food package.)

¹² For children and women, yogurt may be substituted for fluid milk at the rate of 1 quart of yogurt per 1 quart of milk; a maximum of 1 quart of milk can 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). Lowfat or nonfat yogurt may be issued to 1-year-old children (12 months to 23 months) as determined appropriate by the health care provider per medical documentation. Lowfat or nonfat yogurts are the standard yogurt for issuance to children \geq 24 months of age and women. Whole yogurt may be substituted for lowfat or nonfat yogurt for children \geq 24 months of age and women as determined appropriate by the health care provider per medical documentation. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children and women in the pregnant, partially breastfeeding and postpartum food packages. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in the fully breastfeeding food package.)

¹³ For children, soy-based beverage and tofu may be substituted for milk as determined appropriate by the health care provider per medical documentation. Soy-based beverage may be substituted for milk on a quart for quart basis up to the total maximum allowance of milk. Tofu may be substituted for milk for children at the rate of 1 pound of tofu per 1 quart of milk. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children.) Additional amounts of tofu may be substituted, up to the maximum allowance for fluid milk for children, as determined appropriate by the health care provider per medical documentation.

¹⁴ For women, soy-based beverage may be substituted for milk on a quart for quart basis up to the total maximum monthly allowance of milk. Tofu may be substituted for milk at the rate of 1 pound of tofu per 1 quart of milk. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in the pregnant, partially breastfeeding and postpartum

food packages. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in the fully breastfeeding food package.) Additional amounts of tofu may be substituted, up to the maximum allowances for fluid milk, as determined appropriate by the health care provider per medical documentation.

¹⁵ 32 dry ounces of infant cereal may be substituted for 36 ounces of breakfast cereal as determined appropriate by the health care provider per medical documentation..

¹⁶ At least one half of the total number of breakfast cereals on the State agency's authorized food list must have whole grain as the primary ingredient and meet labeling requirements for making a health claim as a "whole grain food with moderate fat content" as defined in Table 4 of paragraph (e)(12) of this section.

¹⁷ Both fresh fruits and fresh vegetables must be authorized by State agencies. Processed fruits and vegetables, i.e., canned (shelf-stable), frozen, and/or dried fruits and vegetables may also be authorized to offer a wider variety and choice for participants. State agencies may choose to authorize one or more of the following processed fruits and vegetables: canned fruit, canned vegetables, frozen fruit, frozen vegetables, dried fruit, and/or dried vegetables. The cash-value benefit may be redeemed for any eligible fruit and vegetable (refer to Table 4 of paragraph (e)(12) of this section and its footnotes). Except as authorized in paragraph (b)(1)(i) of this section, State agencies may not selectively choose which fruits and vegetables are available to participants. For example, if a State agency chooses to offer dried fruits, it must authorize all WIC-eligible dried fruits.

¹⁸ Children and women whose special dietary needs require the use of pureed foods may receive commercial jarred infant food fruits and vegetables in lieu of the cash-value benefit. Children may receive 144 oz of commercial jarred infant food fruits and vegetables and women may receive 176 oz of commercial jarred infant food fruits and vegetables in lieu of the cash-value benefit. Infant food fruits and vegetables may be substituted for the cash-value benefit as determined appropriate by the health care provider per medical documentation.

¹⁹ The monthly value of the fruit/vegetable cash-value benefits will be adjusted annually for inflation as described in § 246.16(j).

²⁰ Whole wheat and/or whole grain bread must be authorized. State agencies have the option to also authorize brown rice, bulgur, oatmeal, whole-grain barley, whole wheat macaroni products, or soft corn or whole wheat tortillas on an equal weight basis.

²¹ Canned legumes may be substituted for dry legumes at the rate of 64 oz. (e.g., four 16-oz cans) of canned beans for 1 pound dry beans. In Food Packages V and VII, both beans and peanut butter must be provided. However, when individually tailoring Food Packages V or VII for nutritional reasons (e.g., food allergy, underweight, participant preference), State agencies have the option to authorize the following substitutions: 1 pound dry and 64 oz. canned beans/peas (and no peanut butter); or 2 pounds dry or 128 oz. canned beans/peas (and no peanut butter); or 36 oz. peanut butter (and no beans).

See Appendix A at the end of this section for additional formula tables.

VIII. Issuance Criteria for Food Packages.

- a. Powdered formula is the standard form of formula to be issued to WIC participants. Documentation is required when using ready-to-feed and concentrate forms of formula.
- b. In VISION, the CPA will assign or tailor a food package for each WIC participant. This food package will continue to be issued by VISION until a new food package is created or until a milestone is reached. If an infant or child does not reach a milestone by the first of the month, then they will continue to receive the same benefits until the next month.
- c. Issuing at the 4-5 month milestone:
 - i. In VISION, unless the "Do Not Auto-Update" option is manually checked, the system will automatically change the most recently issued 0-3 month formula food package to a 4-5 month package which includes an increased amount of formula per USDA regulations.
 - ii. If the "Do Not Auto-Update" option is manually selected OR if the food package has been tailored, the CPA will need to create a new food package with an effective date beginning the month the infant will be 4 months by the 1st of that month.
 - iii. For example, an infant turns 4 months on March 3rd. Because the infant did not turn 4 months by March 1st, they will continue to have only the 0-3 month infant food package options until April.
- d. Issuing for the < 6 month old infant who is changing to "out of range"; the mother is still in the breastfeeding category but will receive the post-partum food package.
 - i. Go to the Infant interview. Select "yes" when it asks if they are still breastfeeding. Update and complete all breastfeeding interview questions.
 - ii. Go to Breastfeeding Panel, add a row and choose the Part BF description. -Food or Formula must be filled out.
 - iii. In the [Food Package screenpanel](#), add a new food package for the infant (tailored formula amount to "out of range"). Also add a new infant's food package for the 6-11 month period (tailored "out of range"). Select mom's food package (now postpartum). If mom has current month's benefits start her food package the following month.
 - iv. Load benefits to the card for the infant and mom.
 - v. Provide verbal notice that if she continues out of range breastfeeding, she will only be receiving food benefits through 6 months post-partum.
 - vi. At future appointments, reassess and if mom is still out of range and infant > 6 months, then print the Notice of Termination for her.

- e. Issuing for the ≤6 month old infant who is changing from fully or partially breastfeeding to “no longer BF” at any time in the current month:
 - i. Go to the Infant interview. Select “no” when it asks if they are still breastfeeding. Update and complete all breastfeeding interview questions.
 - ii. Go to the Breastfeeding Panel, add a row and choose the description No Longer BF. Information pop up will ask “Are you sure you want to continue with the automatic participant category update for the breastfeeding women associated with this infant” Select Yes. Breastfeeding Change Reason and Food or Formula field is required to be entered. Do not void or change the mother’s current month’s food package.
 - iii. In the [Food Package screenpanel](#), add a new food package for the infant for the current month’s formula amount. Also add a new infant’s food package for the 6-11 month period for the full formula amount. Select mom’s food package for future months (now postpartum). If mom has current month’s benefits start her food package the following month.
 - iv. Load benefits onto the card for infant and mom.

- f. Issuing at the 6 month milestone:
 - i. In VISION, unless the "Do Not Auto-Update" option is manually checked, the system will automatically change the most recently issued 4-5 month formula food package to a 6 month package which includes baby foods and a decreased amount of formula per USDA regulations. The system will not update tailored Food Packages.

- g. Issuing at the 6 month milestone for exclusively breastfeeding or primarily exclusive/no food package breastfeeding infants:
 - i. The VISION system will allow issuance of complementary foods with a description of Exclusive Breastfeeding when the infant will be transitioning to complementary foods in future months. Subsequently, it will be necessary to change the breastfeeding description from Exclusive to Primarily Exclusive/Comp.

- h. Issuing when going from Fully Breastfeeding or Partially Breastfeeding to Not Breastfeeding for a > 6 month old infant (7 months of age or older).
 - i. When a breastfeeding woman is no longer breastfeeding and her infant is > 6 months of age, the woman is not authorized to receive 15 days of food benefits.
 - ii. If the mother doesn’t have current month’s benefits loaded on her card, follow the steps below:
 - I. Go to the Breastfeeding Panel for the infant, add a row and choose the description No Longer BF. Information pop up will ask “Are you sure you want to continue with the

- automatic termination...” -Select Yes. Breastfeeding Change Reason and Food or Formula field is required to be entered.
- II. VISION automatically terminates mom 15 days out. Go to the certification screen within VISION and manually edit the termination date to today’s date.
- III. Go to the infant’s food package and add the new formula food package. **Do not add a new package for mom**
- IV. If mom’s benefits appear uncheck current month. Load benefits onto the card for the infant. The system will decrement the current month infant food amounts according to the new package.
 - V. 15 days of food benefits are not authorized for the mother.
 - VI. Print a “notice of termination” letter for the mother under the “Printouts” menu.
- iii. If the mother has current or future months’ benefits loaded on her card:
 - I. Go to the Breastfeeding Panel for the infant, add a row and choose the description No Longer BF. Information pop up will ask “Are you sure you want to continue with the automatic termination...” Select Yes. Breastfeeding Change Reason and Food or Formula field is required to be entered.
 - II. VISION automatically terminates mom 15 days out. Go to the certification screen within VISION and manually edit the termination date to today’s date.
 - III. Go to the infant’s food package and add the new formula food package. **Do not add a new package for mom.**
 - IV. Go to Food Benefits, Read Card, select Cancel on the pop up (Economic Unit Balance-to-Issue) , then uncheck mom’s benefit’s for current month if they appear. Write to card. By reissuing benefits all future benefits for mom will be removed. The system will decrement the current month infant food amounts according to the new package.
 - V. 15 days of food benefits are not authorized for the mother.
 - ~~V~~-VI. Print a “notice of termination” letter for the mother under the “Printouts” menu.
- iv. See *Termination* policy section for more information.
- i. For a Fully Breastfeeding or Partially Breastfeeding infant > 6 months of age who is changing to a Partially Breastfeeding “out of range” formula amount
 - i. When a breastfeeding mother is breastfeeding out-of-range and her infant is >6 months old, the mom is no longer eligible for food benefits and 15 days of food benefits are not authorized.
 - ii. If the mother doesn’t have current months’ benefits loaded on her card, follow the steps below:

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- I. Go to the Breastfeeding Panel for the infant, add a row and choose the Part BF description. Complete Panel as needed.
 - II. Go to the [C](#)ertification screen and add a new termination record for mom. Select 'yes' to the pop-up "Food benefits for the current Certification period may still be issued. Do you want to continue?" For the termination reason, select "Part BF out of range >6 mos" and set the date as today's date.
 - III. Go to the Food Package screen and select the appropriate infant food package and add the appropriate amount of formula as "out of range". **Do not add a new package for mom.**
 - IV. If mom's benefits appear uncheck current month. Load the infant's benefits onto the card. The system will decrement the current month infant food amounts according to the new package.
 - V. 15 days of food benefits are not authorized for the mother.
 - VI. Print a "notice of termination" letter for the mother under the "Printouts" menu.
- iii. If the mother has current or future months' benefits loaded on her card:
- I. Go to the Breastfeeding Panel for the infant, add a row and choose the Part BF description. Complete Panel as needed.
 - II. Go to the certification screen and add a new termination record for mom. Select 'yes' to the pop-up "Food benefits for the current Certification period may still be issued. Do you want to continue?" For the termination reason, select "Part BF out of range >6 mos" and set the date as today's date.
 - III. Go to the Food Package screen and select the appropriate infant food package and add the appropriate amount of formula as "out of range". **Do not add a new package for mom.**
 - IV. Go to Food Benefits, Read Card, select Cancel on the pop up (Economic Unit Balance-to-Issue) then uncheck mom's benefits for the current month if they appear. Write to card. By reissuing benefits all future benefits for mom will be removed. The system will decrement the current month infant food amounts according to the new package.
 - V. 15 days of food benefits are not authorized for the mother.
 - VI. Print a "notice of termination" letter for the mother under the "Printouts" menu.
- iv. See *Termination* policy section for more information.
- j. Issuing a food package when an infant is hospitalized:
- i. Hospitalized infants who are receiving no formula or minimal formula (in range) can be certified using referral data but cannot receive a food package.

- ii. When certifying hospitalized infants, assign the correct food package for their breastfeeding status, but do not load the infant's benefits onto the card. ~~The assigned infant food package will help trigger the correct food package for the mother.~~
- ~~ii-iii.~~ iii. The hospitalized infant is not required to be certified at the same time as the mother. ~~The infant's information does need to be entered into VISION and linked to the mother in the pregnancy screen in order for the correct food package to populate for the mother. -The infant can be left in pending status.~~
- ~~iii-iv.~~ iv. In cases of hospitalized twins:
 - I. If one twin can be certified and not the other, the mother receives the FBF food package.
 - a. To ensure the correct food package is issued, do not create a nutrition interview for the twin who isn't certifying.
 - ~~iv-v.~~ v. Hospitalized infants who are receiving out-of-range or full formula cannot be certified or receive a food package.
 - ~~v-vi.~~ vi. Inform the mother that if nutrition support changes, it needs to be reported to the local WIC staff promptly.
 - ~~vi-vii.~~ vii. See *Termination* policy section for more information.
- k. Issuance criteria for concentrated formula. Refer to table entitled "Amount of Formula Provided by WIC" below.
 - i. The CPA must determine there is a need for the concentrated formula; or
 - ii. The product is only available in concentrate form.
- l. Issuance criteria for ready-to-feed formula. Refer to table entitled "Amount of Formula Provided by WIC" below.
 - i. The CPA must determine an unsanitary or restricted water supply.
 - ii. The CPA must determine there is poor refrigeration.
 - iii. There is a caretaker who has difficulty correctly diluting concentrated or powdered formula.
 - iv. The product is only available in RTF form.
 - v. A FAFAF states RTF is necessary or intolerance to formula other than RTF is diagnosed by the medical provider as self-reported by applicant/participant/caregiver; or as reported or documented by a physician, or someone working under physician's order.
- m. Issuance criteria for premature infants < 3 months of age.
 - i. For all premature infants < 3 months of age, the default formula issued shall be a sterile liquid if produced by the manufacturer. If the supervising health care provider specifically prescribes powder, the WIC clinic may provide powder. If the supervising health care provider has not prescribed a sterile liquid and the parent/guardian requests powder, then powder may be provided-provided after

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~~obtaining parental agreement~~. If the supervising health care provider has prescribed a sterile liquid, then powder may not be provided when requested by the parent/guardian without documented approval from the health care provider.

- ii. Prematurity is defined as assignment of 142a risk.
- iii. Sterile liquid is either concentrate or RTF.
- iv. Concentrate should be the first choice liquid to issue.

- n. Issuance criteria for 1 can of powder formula from birth to 1 month of age.
 - i. In the first month of life, it is recommended that partially breastfed infants not receive 1 can of powder infant formula, or the sterile liquid equivalent. Not providing formula in the first 4 – 6 weeks will ensure that breast milk production is established.
 - ii. After a thorough and documented breastfeeding assessment, if one can of formula is determined to be necessary, then one can may be issued. Document counseling under Education and Care in the Nutrition Education screen.

IX. Food Package for Mothers Breastfeeding Multiples.

- a. Exclusively Breastfeeding Definition. The federal regulations state that food package VII (exclusively BF) is for ~~the following four different~~ breastfeeding situations:
 - i. Fully breastfeeding women whose infants do not receive formula from WIC,
 - ii. Women pregnant with two or more fetuses, and
 - iii. Women fully or partially (mostly – in range) breastfeeding multiple infants from the same pregnancy.
 - iv. Pregnant women who are fully or partially (mostly – in range) breastfeeding singleton infants.
- b. Breastfeeding Multiples. Food Rule for Multiple Infants allows:
 - i. Ex BF twins, no infant formula = 1.5 BF food package (VII)
 - ii. 1 Ex BF infant and 1 Part BF infant (in range) = full BF package (VII)
 - iii. 1 Ex BF infant and 1 Part BF infant (out of range) = full BF package (VII)
 - iv. 1 Part BF infant (in range) and 1 Part BF infant (out of range) = partial BF package (V - same as for pregnant women)
 - v. 2 Part BF infants (in range) = full BF package (VII)
 - vi. 2 part BF infant (in range), 1 part BF infant (out of range) = full BF package (VII)
 - vii. 2 Part BF infants (out of range) = postpartum package (VI)
- c. Breastfeeding and later becomes Pregnant. If a woman is exclusively breastfeeding an infant or partially breastfeeding multiples and becomes pregnant, recertify her in the pregnant category.

- d. A pregnant woman who is also partially (mostly) breastfeeding multiples or is exclusively breastfeeding an infant, is to receive the fully breastfeeding package (VII).

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Amount of Formula Provided by WIC*				
	0-1 Month	1-3 Months	4-5 Months	6-11 Months
Fully Breastfeeding	None	None	None	None
Partially BF In-Range	<ul style="list-style-type: none"> 104 fl oz reconstituted powder (up to 1 can) 	<ul style="list-style-type: none"> 435 fl oz reconstituted powder (~4 cans) <u>OR</u> 384 fl oz RTF <u>OR</u> 364 fl oz reconstituted liquid concentrate 	<ul style="list-style-type: none"> 522 fl oz reconstituted powder (~5 cans) <u>OR</u> 474 fl oz RTF <u>OR</u> 442 fl oz reconstituted liquid concentrate 	<ul style="list-style-type: none"> 384 fl oz reconstituted powder (~ 4 cans) <u>OR</u> 338 fl oz RTF <u>OR</u> 312 fl oz liquid concentrate
Partially BF Out-of-Range	ALL AMOUNTS OVER THE MAXIMUM AMOUNTS LISTED ABOVE FOR IN-RANGE			
Fully Formula (No Breastfeeding)	<ul style="list-style-type: none"> 870 fl oz reconstituted powder <u>OR</u> 832 fl oz RFT <u>OR</u> 806 fl oz reconstituted liquid concentrate 	<ul style="list-style-type: none"> 960 fl oz reconstituted powder (~10 cans) <u>OR</u> 913 fl oz RTF <u>OR</u> 884 fl oz reconstituted liquid concentrate 	<ul style="list-style-type: none"> 696 fl oz reconstituted powder (~ 7 cans) <u>OR</u> 643 fl oz RTF <u>OR</u> 624 fl oz reconstituted liquid concentrate 	

*Powder is the recommended form

X. Religious eating pattern exception

- a. Local agencies may issue a non-contract formula that meets the definition of infant formula without medical documentation in order to meet religious eating patterns. However, if the non-contract brand infant formula does not meet the definition of infant formula, medical documentation must be provided. Documentation of the basis of the substitution must be kept in the participant's record.

XI. See Table below for procedures related to formula changes.

IF...	THEN...
A healthy, full-term infant demonstrates symptoms of intolerance to the primary contract formula.	Refer to the primary care provider. The participant must obtain a complete FAFAF if a non-contract formula is warranted.
A healthy, full term infant received a FAFAF for a non-contract formula because of symptoms of intolerance and the FAFAF has expired.	Issue the primary contract formula. If a non-contract formula is still needed, refer the participant to the primary care provider for a complete FAFAF.
An infant/child is <u>high risk</u> and has been on a special formula (such as a premature, metabolic or hydrolysate formula) or any non-contract formula and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current FAFAF for the non-contract formula has not expired.	Refer to the primary care provider. Explain to the participant that the FAFAF must be honored for the specified time frame. The participant must contact the primary care provider and obtain written approval for the primary contract formula before it is issued.
An infant/child is <u>high risk</u> and has been on a special formula (such as premature, metabolic or hydrolysate formula) and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current FAFAF for the non-contract formula has expired.	The CPA or RD must document in the computer that the parent/caretaker states the MD gave permission to transition to a primary contract formula. Issue primary contract formula.
An infant/child is <u>not high risk</u> and the parent/caretaker states the MD gave permission to	The CPA or RD must document in the computer that the parent/caretaker states the MD gave permission to

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transition to a primary contract formula and the current FAFAF for the non-contract has not expired.	transition to a primary contract formula. Issue primary contract formula.
An infant/child is <u>not high risk</u> and the parent/caretaker states the MD gave permission to transition to a primary contract formula and the current FAFAF for the non-contract formula has expired.	Issue primary contract formula

- a. Care Plans are required for High Risk participants.
- b. Care Plans are required whenever an infant formula is issued to a child over 1 year old.
- c. A care plan is not required for new FAFAFs.

XII. Exceptions for use of low iron formula.

- a. USDA recognizes that a small number of infants have medical conditions which necessitate restricting iron intake. These rare conditions include: Hemolytic anemia. Hemolytic anemia is associated with shortened red blood cell survival. Hemolytic anemia of the premature infant is usually resolved by the time the infant is discharged from the hospital. Use of low iron formulas is not a prescribed method of treatment for most infants/conditions. It is not authorized for diagnosis of vomiting, constipation and diarrhea of the healthy infant. Classifications of hemolytic anemia include:
 - i. Congenital hemolytic anemia.
 - ii. Membrane defects - spherocytosis, stomatocytosis, pyropoikilocytosis, alliptocytosis.
 - iii. Hemoglobinopathies - sickle cell anemia, sickle syndromes, thalassemias, unstable hemoglobins.
 - iv. Enzyme defects.
 - v. Acquired Hemolytic Anemias:
 - I. Autoimmune process.
 - II. Infections.
 - III. Toxins and drugs.
 - IV. Thermal injury.
 - V. Disseminated intravascular coagulation.
 - VI. Hemolytic anemia syndrome.
 - VII. Transfusion reactions

XIII. Utah Formula and Food Authorization Form

- a. Medical order or prescriptive requirements to be filled out on the State Formula & Food Authorization Form (FAFAF).
 - i. Name of client/Date of Birth.
 - ii. The brand name of the formula prescribed.
 - iii. Medical diagnosis warranting the issuance of formula.
 - iv. Form of formula: Powder, Concentrate, Ready to Feed.
 - v. Specific amount of formula prescribed (ie. 3 cans per day); a range is not appropriate.
 - vi. Length of time the prescribed formula is medically required (1- 12 months).
 - vii. Signature and name of the requesting state licensed prescriptive authority (physician-MD, nurse practitioner-NP, physician assistant-PA, certified nurse midwife-CNM, licensed direct entry midwife-LDEM, doctor of Osteopath-DO).
 - viii. Address of State Licensed Prescriptive Authority & Phone Number.
 - ix. Date. Cannot be older than 60 days from the date written when brought into the WIC clinic. A FAFAF older than 60 days from the date the prescriptive authority has written it when brought into the WIC clinic is invalid. It is necessary to have the specific length of time the prescribed formula is medically required documented on the FAFAF. A valid FAFAF may be written for 1 month, 2 months, 3 months, etc. up to 12 months, but no longer than 12 months.
- b. If a written medical order (Utah Formula and Food Authorization Form) is provided for a high risk infant (FTT, prematurity and/or low birth weight) by the physician or prescriptive authority for the issuance of an electric breast pump, that order must be honored within two working days. Clinics need to have sufficient electric breast pumps to serve their population, especially high risk participants.
- c. Premature formulas that must be special-ordered through the State such as Similac Special Care, Enfamil Premature, Gerber Good Start Premature, or Human Milk Fortifier, can only be issued every 30, 31, or 28 day period..
- d. Formula and Food Authorization Form may be provided as an original written document or facsimile.
- e. Formula and Food Authorization Forms must be completed according to the specifications of the current form before accepting and scanning into VISION.
- f. Formula and Food Authorization Form not available at the clinic visit:

- i. CPA may receive the information prior to issuance by telephoning the prescriptive authority's office.
 - ii. Document all information obtained from the doctor's staff who reads directly from the medical chart the notes that have been written by the prescriptive authority regarding the participant's nutritional status/intake. The information does not need to be taken verbally from the prescriptive authority.
 - iii. Written confirmation of the Formula and Food Authorization Form signed by the licensed prescriptive authority must be obtained within two weeks.
 - iv. Written documentation must be kept on file with initial telephone conversation documentation.
 - v. Medical documentation over the telephone must only be used when absolutely necessary, on an individual basis, to prevent undue hardship to a participant or to prevent a delay in the provision of formula which would place the participant at increased nutritional risk.
- g. Additional FAFAF requirements.
- i. If the Formula and Food Authorization Form is missing a required element, that doesn't have a default, such as name of formula/product or diagnosis, the CPA may obtain complete prescriptive information via fax.
 - ii. If the Formula and Food Authorization Form is complete, then the CPA must initial and date indicating that the Formula and Food Authorization Form has met all of the requirements.
 - iii. Formula and Food Authorization Form must be scanned into the participant's record.
 - iv. Issuing contract/non-contract infant formulas for children over one year of age requires a new Formula and Food Authorization Form at the child's first birthday.
- h. FAFAF documentation summary.
- i. The information in the table below is not meant to be a comprehensive list but to provide examples. Refer to the Product Guide for a complete detailed listing.
- i. FAFAFs are not required for the following Standard Primary Contract Infant formula:
- i. Similac Advance
 - ii. Similac Soy Isomil
 - iii. Similac Sensitive
 - iv. Similac Total Comfort
- j. All other formulas and WIC-eligible nutritionals require a FAFAF for issuance.

- k. FAFAFs are required for all children, at 12 months of age and older, who are receiving infant formula, including contract formula. Children over 12 months being issued infant formula require a care plan when a FAFAF is received.
- l. High risk participants who are receiving a FAFAF for a new formula/medical food require a new care plan.
- m. Participants who are not high risk do not require a care plan when a FAFAF is received and/or renewed.

XIV. Guidelines for Requesting a New Model Food Package in VISION.

- a. To request a new food package it must be presented to UAWA for consensus and then submitted to the state RDs for consideration.
- b. A new food package may be requested only if it is being used at a high frequency statewide.
- c. The final decision will be made by the state.

XV. Out of State Prescription.

- a. If a WIC client transfers from another state and has a complete prescription on a WIC clinic form from that state, the prescription may be honored for the specified period of time. However, if the prescription is expired, the client will need to obtain a new FAFAF before a non-contract formula or WIC-eligible nutritional is issued.