

I. Utah Formula and Food Authorization Form (FAFAP).

- a. FAFAPs are not required for the following Standard Primary Contract Infant formulas:
 - i. Similac Advance
 - ii. Similac Soy Isomil
 - iii. Similac Sensitive
 - iv. Similac Gentle Comfort
- b. All other formulas and WIC-eligible nutritionals require a FAFAP for issuance.
- c. FAFAPs are required for all children, at 12 months of age and older, who are receiving infant formula, including contract formula.
- d. Medical order or prescriptive requirements to be filled out on the FAFAP. All of the following information must be included in order for the FAFAP to be considered complete and the product ordered or issued.
 - i. Name of participant.
 - ii. Participant's date of birth.
 - iii. Formula or nutritional prescribed (must include all applicable parts [brand, type, and name]):
 - 1. Brand (Similac, Nutricia, Enfamil, etc.)
 - 2. Type (NeuroPro, Pediatric, Standard, etc.)
 - 3. Name (Gentlease, Advance, Peptide 1.0, etc.)
 - iv. Medical diagnosis warranting the issuance of the product.
 - v. Form of product: Powder, Concentrate, or Ready-to-Feed (RTF).
 - vi. Specific amount of formula prescribed (e.g., 3 cans per day).
 - 1. A range is not appropriate.
 - vii. Length of time the prescribed product is medically required.
 - 1. A valid FAFAP may be written for up to 12 months, but no longer than 12 months.
 - 2. Six months will be used as the default length of time, including the current month, if nothing is marked by the prescriber.
 - viii. Signature and name of the requesting state licensed prescriptive authority or someone working under their supervision (i.e., physician [MD], doctor of osteopath [DO], nurse practitioner [NP], physician assistant [PA], certified nurse midwife [CNM]).
 - ix. Clinic or hospital name, phone number, and fax number if applicable.
 - x. Date FAFAP is completed.
 - 1. A FAFAP is invalid if this date is older than 60 days from when it's received in the WIC clinic.
- e. Additional FAFAP requirements.

- i. The competent professional authority (CPA) must initial and date the completed FAFAF to indicate that it has met all of the above requirements.
 - ii. A licensed prescriptive authority, or someone working under their supervision, is the only one allowed to complete a FAFAF. If it's suspected that a participant completed the FAFAF themselves, the CPA should call the participant's healthcare provider to verify the information on the FAFAF.
 - 1. If it's determined the FAFAF was not completed by a prescriptive authority, a new FAFAF completed by a prescriptive authority must be obtained before the prescribed product can be issued.
 - 2. If a new FAFAF completed by a prescriptive authority is not obtained, do not issue the prescribed product.
 - 3. The CPA should discuss these situations with their clinic supervisor to determine if a participant violation is warranted.
 - iii. Completed FAFAFs must be scanned into the participant's record in VISION within 10 business days of when they're received.
- f. FAFAFs may be received as a hard copy, electronically, or as a facsimile (fax).
- g. If a FAFAF is not available at the participant's WIC visit:
 - i. The CPA may receive the information prior to issuance by telephoning the prescriptive authority's office.
 - ii. The CPA must document all information obtained from the doctor or the doctor's staff in VISION. This information must be read directly from the participant's medical chart where any notes have been written by the prescriptive authority regarding the participant's nutritional status or intake.
 - iii. A completed FAFAF must be obtained within 2 weeks of the participant's WIC visit.
 - iv. Medical documentation received over the phone must only be used when absolutely necessary and on an individual basis. It should only be used to prevent undue hardship to a participant or to prevent a delay in the provision of formula that would place the participant at increased nutritional risk.

II. FAFAFs and Care Plans.

- a. All children over the age of 12 months issued infant formula require a care plan when a FAFAF is received or renewed.
- b. Care plans are required for high-risk participants whenever a FAFAF is received or renewed.

- c. Participants who are not high risk do not require a care plan when a FAFAF is received or renewed (unless they're a child over the age of 12 months issued infant formula).
- d. If you receive a FAFAF with a medical diagnosis marked that's not currently identified as a nutrition risk factor for the participant's certification period, it must be added in a new risk record.
 - i. If the newly assigned nutrition risk factor is designated as high risk, a care plan is required.

III. Out-of-State Prescriptions.

- a. If a WIC participant transfers from another state and has a completed prescription on a WIC form from that state, the prescription may be honored for the time specified on the form.
 - i. If the prescription is expired, the client needs to obtain a new FAFAF (Utah FAFAF or the form used by the state they previously received WIC in) before a non-contract formula or WIC-eligible nutritional is issued.

IV. Procedures Related to Formula Changes.

If...	Then.
A healthy full-term infant shows symptoms of intolerance to the primary contract formulas...	Refer them to their primary care provider. The participant must obtain a complete FAFAF if a non-contract formula is needed.
A healthy full-term infant received a FAFAF for a non-contract formula because of symptoms of intolerance and the FAFAF has expired ...	Issue a primary contract formula. If a non-contract formula is still needed, refer the participant to their primary care provider for a new FAFAF.
An infant or child is high risk and has been on a state-ordered or non-contract formula and the parent/caretaker states the MD gave permission to transition to a primary contract formula. Their current FAFAF for the non-contract formula has not expired ...	Refer them to their primary care provider. Explain to the participant that the FAFAF must be honored for the time frame specified on the FAFAF. The participant or CPA must contact the primary care provider and obtain verbal or written approval for the primary contract formula before it can be issued. Documentation of this approval must be made in VISION. A care plan is not needed when they transition to standard infant formula.
An infant or child is high risk and has been on a non-contract formula or nutritional. The parent/caretaker states the MD gave permission to transition to a primary contract formula or standard food package and the current FAFAF has expired ...	The CPA confirms with the parent/caregiver that the product is no longer needed and issues a contract formula or standard food package. A care plan is not needed when they transition to standard infant formula.
An infant or child is not high risk and the parent/caretaker states the MD gave	The CPA must document in VISION that the parent/caretaker states the MD gave

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