



Memorandum

TO: WIC Regional Directors #08-038
WIC Local Agency Directors

FROM: Linda Brumble, Unit Manager (Original Signed)
Nutrition Education/Clinic Services Unit
Nutrition Services Section

DATE: March 26, 2008

SUBJECT: Formula Conference Call Notes

Attached are the notes for the following formula conference calls:

- Non-Contract Formula Policy-Overview of Changes January 29, 2008
- Returned Formula Procedures for Voucher Clinics February 25, 2008

If you have any questions or require additional information, please contact, Krista Neal, M.S.R.D., Clinical Nutrition Specialist, at (512) 341-4400, extension 2309, or Cathy Plyler R.D.L.D., Clinical Nutrition Specialist, at (512) 341-4400, extension 2233, or Sandra Brown, M.A.R.D., Clinical Nutrition Specialist, at (512) 341-4400, extension 2200.

Attachments

Formula Conference Call Notes

January 29, 2008

TOPIC: NON-CONTACT FORMULA POLICY- OVERVIEW OF CHANGES AND CASE STUDIES

Part 1:

Overview of *Policy FD 16*

The *FD 16 Formula and Medical Nutritional Products Table* has been revised, effective December 2007. It can be accessed at: <http://www.dshs.state.tx.us/wichd/nut/pdf/FMNProductsTbl.pdf>

This table includes Level 1-3 formulas. It does not include Level 4 formulas. Therefore any products not listed in the table require state approval and may still be issued. Do not confuse this table with another formula list, the *Texas WIC Consolidated Formula Tables*, found at the same web address under the *Formula List*. The *Texas WIC Consolidated Formula Table* is different from the *F.D. 16 Table* in that it is designed to provide information on product usage and packaging. It also lists formulas that may require state approval. The *F.D. 16 policy table* is designed to assist staff in approving formula by providing reasons for issuance and approval levels.

Please take out your copy of the table. We are going to review each section at this time.

- Products (see first column on the left)
 - a. The table lists the name and manufacturer of each formula. (ex: Alimentum/Ross)
 - b. The form it may be purchased in is also indicated e.g. PWD, RTU, CON
 - c. The table will also provide information regarding the type e.g. standard, hydrolysate (Alimentum), metabolic (BCAD 1&2), etc of formula.
- Maximum Issuance (See second column)
 - d. Most formulas can be issued for one certification period.
 - e. Non-contract standard formulas can only be issued for 2 to 3 months with retrials recommended at that time
 - f. Preterm products are different, and length of issuance is based on birth weight
 - g. Isomil DF- do not exceed 8 cans
- Reasons for Issuance (middle column)
 - h. If you are a qualified approver (CA, nutritionist, R.D. /L.D.), you can approve a formula for the reason(s) listed.
 - i. Some diagnosis/reasons received by the doctor may not be listed/approvable reasons, for example, constipation and colic. Use your professional judgment when assessing approval. For instance an infant with a diagnosis of constipation on a formula also has a history of heart surgery pending. Since the infant has a medical contraindication, changing formulas would not be recommended.
 - j. Call the State Office beeper number if you need guidance or are unsure.
- Packaging (to the right)
 - k. Can sizes are listed in this section (can/bottle size e.g. PWD 16 oz, RTU 32 oz, etc.)
 - l. Case quantities can be found in the *Consolidated Table*.

- Maximum Quantities for Infants and Women and Children
 - m. Women and children packages include an additional 1/8 formula pkg. Do not issue unless additional quantity is needed.
 - n. Example: For Alimentum, 8-16 oz cans PWD and 25-32 oz cans RTU are the maximum for infants. For women and children, 9-16 oz cans PWD and 28-32 oz cans RTU are the max. For Boost, max for women and children is 113-8 oz cans RTU. The maximum for infants is 0 for infants because Boost isn't intended for infants.

Level, see bottom of page

- i. 1 = LA CA
 - ii. 2 = LA nutritionist
 - iii. 3 = LA R.D. /L.D.
 - i S/3 = These include metabolic formulas that require state approval initially and may be approved subsequently by level 3
 - ii. Unlisted = State Office approval. Any formula that is not listed on the product table will require a level 4 /state office approval
- Kcal concentration, if different from standard dilution
 - o. >20-24 kcal/oz = Level 2
 - p. 25+ = Level 3
 - q. These guidelines are if one is adjusting the formula's standard dilution. Pediasure is 30 Kcal/oz, and a Level 2 formula.
 - r. Note: No additional formula will be provided to participants who are concentrating formula. A full pack is a full pack regardless of kcal concentration.

Transfers and Prescriptions from Foreign Countries (FD 16/p.7/B1-3)

1. Out-of-State Transfers

- a. If a participant has been using a different standard product because it is another state's contract product you will issue the Texas contract equivalent. Example: Baby from Oklahoma uses Enfamil LIPIL w/Iron because that's the contract formula in that state. The baby will receive Similac Advance w/Iron.
- b. The participant has been using a non-contract formula for a medical reason and no current or local prescription is available. Call State Office Example: Baby from Oklahoma uses EleCare for allergies. Call the State Office.

2. In-State Transfers

- a. Participant has documentation, specifically the prescription expiration date. You may issue appropriately. Example: Baby from Nexttownover, TX transfers to your site. Records reveal baby is using Nutramigen with 5 months valid till prescription expiration date. Triple issue.
- b. Participant is lacking documentation. There is no Prescription and/or NO prescription expiration date from transfer site. Call the State Office. Example: Baby from Nexttownover, TX transfers to your site. No records available or records reveal prescription expiration has come and gone. Call State Office.

3. **Foreign Prescriptions**

- a. **ALL** foreign prescriptions (including prescriptions from Mexico and Canada) must be approved by State Office.
- b. State office may approve once and for one month only.
- c. Thereafter, participant will need prescription from local prescriptive authority.

Part 2: Review of Formulas per Approval Level

Level One Formulas

Changes to Level 1

- 1) Moved milk based standard follow up products to Level 2 approval.
- 2) Added some additional reasons to Nutramigen LIPIL and Alimentum approval. Malabsorption is no longer required as a reason for approving Alimentum.

Summary

- 1) Standard milk or soy infant formulas
 - Enfamil LIPIL
 - Gentlease LIPIL
 - Good Start Supreme
 - Good Start Supreme DHA/ARA
 - Good Start Supreme Soy DHA/ARA
 - LactoFree LIPIL
 - ProSobee LIPIL
- a) Reasons for Issuance – Documented intolerance to contract product. For soy products; you may see cow’s milk allergy, lactose intolerance or galactosemia as additional reasons.
- b) Challenge with contract product required during reassessment unless medically contraindicated. Please document reason if medically contraindicated.
The only real change in this category is:
- c) No sample available for trials. Mom must purchase on her own or cash a voucher during the reassessment period.
- d) Consider the following when making decisions: Use professional judgment and look at big picture. What was tried, for how long? What were the symptoms? Are there contributing medical or dietary problems? Is it possible or safe for this infant/child to continue on a contract product? Is there anything else you need to know?
 1. The CA should review all the information before denying a request, even if it looks like it is inappropriate at first glance.
 2. It is not necessary for a participant to try multiple formulas at the time of reassessment. Our goal is not to make things difficult, but to determine if a medical need for the non-contract formula still exists.

- 2) Standard toddler soy formulas –
 Similac Go and Grow Soy – First choice due to rebate
 Next Step ProSobee LIPIL
 Good Start 2 Supreme Soy
 - a) Reasons for Issuance – Go and Grow should be tried first unless medically contraindicated. For non-contract follow up soy formulas: Documented intolerance to contract soy product and allergy or sensitivity to cow’s milk, galactosemia or vegan diet in children over age 1 year.
 - b) All soy follow up formulas are in the same category.

- 3) Protein Hydrolysates
 Alimentum (Powder)
 Alimentum (RTU)
 Nutramigen LIPIL
 - a) Changes and clarification: Additional wording was added to broaden the terms that might be used on the script. If an infant still has a similar medical need for these products after the age of one year and a food package is inappropriate, these products are still Level 1 approvals.
 - b) Reasons for issuance:
 1. Cow’s milk and /or soy allergy, intolerance or sensitivity
 2. Malabsorption
 3. GERD (or GER with symptoms such as aspiration or risk of aspiration, respiratory problems, poor weight gain, or weight loss, use of or desire to avoid reflux medications etc.)
 4. Intact protein sensitivity/allergy
 - c) Considerations:
 1. Most infants will have tried at least one and usually more than one other milk and/or soy based formula with intolerance symptoms.
 2. Look at the big picture. Has the formula requested been tried? Have symptoms improved? Will anything be gained by trying an additional product?
 3. Alimentum powder is the preferred form when that formula is requested. RTU must have a diagnosis of corn allergy or intolerance to powder that is assumed to be due to a corn allergy. Other exceptions could include major GI problems that would make a change to powder contraindicated. This would need to be documented in writing or from an interview with the doctor or caregiver.

- 4) Isomil DF- reasons remain the same as before, short-term diarrhea, limited to 8 cans in a month followed by some other formula.

Level II products:

May be approved by a LA nutritionist or an R.D. or L.D. Level II products include:

Step-down formulas designed for LBW/premature infants, such as NeoSure and Enfamil EnfaCare.

Nutritionally complete intact protein products for women and children, such as Pediasure, Kindercal and Ensure and Boost.

Milk-based formulas designed for older infants and toddlers, i.e., Enfamil Next Step, Good Start 2 Supreme DHA & ARA and Similac Go & Grow Milk.

The protein hydrolysate formula with higher amount of MCT oil, Pregestimil.

Formulas with added rice starch, i.e., Similac Sensitive R.S. and Enfamil A.R.

Formulas concentrated up to 24 kcals/oz. Remember: Extra formula may no longer be given when concentrated formula is prescribed. We don't have any more sample formula and we don't issue extra formula from returned formula stock or with a 999 voucher

Changes to Level II products:

- Change in issuance of step-down formulas for premature infants, also known as post discharge formulas for premature infants, i.e., **NeoSure and EnfaCare LIPIL**.

The criteria used for issuance, based on the baby's birth weight, have been changed. There are only **three** weight categories now **instead of four**.

Birth Wt	Previous Rule	New Rule
4 – 5 ½ lbs (1801 – 2500 grams)	Issue up to 3 mos chronological age	Can issue up to 6 mos chronological age
3 # 5 oz to < 4 lbs (1501 – 1800 gr)	Issue up to 6 mos chronological age	Issue up to 9 mos chronological age
< 3# 5 oz (1200 g)	< 2# 10 ozs issue up to one year chronological age	Issue up to one year chronological age
If premature, but birth wt. > 5 ½ lbs		Issue for one month, if baby hasn't seen HCP

Remember: the expiration is not on the baby's chronological month birthday, it is the end of the month.

- Notice that formulas designed to be used by preterm infants while in the hospital, i.e., **Enfamil Premature LIPIL and Similac Special Care** formulas, are no longer Level II. They have been moved to Level IV. The size of the bottles has recently changed from 3 oz nursettes to 2 oz nursettes and there have been some package issuance issues.
- **Human milk fortifier** (Enfamil Human Milk Fortifier and Similac Human Milk Fortifier) have been moved to Level IV.
- **Similac Go & Grow Milk and other milk-based formulas designed for older infants and toddlers**, i.e., Good Start 2 Supreme DHA & ARA and Enfamil Next Step are now a Level II. (previously Level I). These are formulas that are rarely issued. These formulas contain higher amounts of calcium and phosphorus and some other nutrients, than a standard infant formula. A reason for issuance of these products would be, for example, children over the age of one year who rely on a formula for a major part of their nutrition due to oral motor problems and don't

need the additional calories that a formula such as Pediasure would provide. The advantage of using this over cow's milk is that it is iron fortified, contains vitamin C and other nutrients that are deficient or absent in cow's milk. The reasons for issuance are not as clearly defined as for the soy version of these formulas, which would be for a milk allergy over the age of one year, galactosemia or vegan diets. If a formula other than Similac Go & Grow Milk is prescribed, call the HCP to let him know that we must at least trial Similac Go & Grow Milk first unless medically contraindicated.

Note: Similac Go & Grow Milk has recently been discontinued in the 12.9 oz size. Be sure to use the correct code.

- Formulas concentrated over 20 kcals/oz up to 24 kcals/oz are Level II. It is good practice to check the mixing instructions, especially if the baby is gaining too slowly or exceptionally fast. Formulas concentrated to greater than 24 kcals/oz are Level III formulas.

Products formulated for adults:

Boost, Ensure etc. These products are issued for the same reasons that the comparable child products, such as Pediasure, are issued. For example, if the adult is tube-fed, has oral motor feeding problems (for example, on a wired jaw diet) or for adults who are unable to support their weight on a regular diet. A common example of this would be a pregnant woman who has hyperemesis gravidarium and is unable to keep down food, but may be able to take small sips of a liquid supplement. (Ensure Healthy Mom formula has been discontinued). If ever these supplements are prescribed for a child, find out why this formula has been prescribed instead of a pediatric product and consult with the local agency R.D., when available, or the state agency.

As a reminder, puddings, such as **Boost or Ensure pudding**, can be issued and substituted for a liquid formula, ounce per ounce. Reason for issuance is oral motor dysfunction, e.g., the need for thickened feeds. Table states "and poor weight gain." If requested for a child who is not underweight, call the state office.

Nutritionally complete products for children:

Just to briefly review the reasons for issuance of the nutritionally complete formulas designed for use in children, such as Pediasure, Kindercal, Resource JFKs & Nutren Jr. These formulas may be issued to children who are tube-fed, have oral motor feeding problems and must rely on a liquid supplement to meet their calorie needs, and for children who are unable to support growth on a regular diet. An old rule, that hasn't been in effect for years, was that the product needed to make up more than 50% of calorie intake. This is no longer true. For example, a child may be transitioning from tube feedings to an oral diet. They may take only one or two cans of Pediasure per day, but would be unable to thrive without the supplement.

They are **not** to be issued for picky eaters, who do not have a medical condition that supports the need for this type of product. Call state if you have any question about issuing. If a child is severely underweight and/or has been diagnosed with **FTT**, but there as yet, is no identified medical disorder causing the weight loss/poor weight gain, then one of these products may be issued for one month. This is to rule out FTT from insufficient calorie intake. If the child has been referred to a specialist, such as a pediatric gastroenterologist, it also buys time until the problem has been diagnosed.

Be sure to issue a code for Pediasure. 999's should not be used to issue Pediasure. There are codes available for 60, 100 and 113 cans/mo.

For kids who are underweight and will gain weight on Pediasure but have no medical problem, then it may be a parenting issue or an educational issue. It could be, for example, that the child is given nothing but juice and a poor diet. In that case, we would provide education on an age appropriate diet and ways to increase calories in the diet. The goal in that case is to have the child eat an age appropriate diet and not rely on a liquid supplement for their calories. They would benefit from the regular child's food package. If neglect is suspected, then there are usually other signs besides poor weight gain and should be referred to CPS for an evaluation.

Always take a diet history when deciding whether or not to issue any non-contract formula.

If a child product, such as Pediasure, is prescribed for an infant, the local agency R.D. should determine if this is appropriate. If a local agency R.D. is not available or the local agency R.D. does not feel comfortable making the determination, call the State office for consultation.

Formulas with added rice starch

Similac Sensitive R.S. is a rebated product and shall be treated like any rebated product with preference over Enfamil A.R. There have been some issues with vendors stocking enough or any of this formula. When this happens, call the state office. If you cannot find a store that carries Similac Sensitive R.S., call the state office. Enfamil A.R. will only be issued for medical reasons and not because a parent may have a preference for a powdered formula, for example.

Formulas with added rice starch can be issued for infants who have GERD. However, if you get a prescription for a child stating a diagnosis of reflux or GER, look at the symptoms the infant is experiencing. If the infant has been prescribed reflux medications, is a preemie with reflux who is at risk for aspiration, or an infant who has respiratory problems such as RAD, BPD or asthma, or is taking medication for reflux, you can assume that the child has GERD. Issue the formula. There is no need to call the HCP to verify the diagnosis.

Other Products

Pregestimil LIPIL is a level II, whereas Alimentum and Nutramigen are Level I formulas. Pregestimil has higher MCT oil content than the other two hydrolyzed casein formulas. It is more often used for fat malabsorption, such as CF or for infants who have liver problems, e.g., biliary atresia, Alagille's syndrome or other liver disorders that prevent bile from entering the digestive tract to help with digestion of fat. MCT oil is more easily absorbed than long chain fatty acids, which require bile for digestion and absorption. Sometimes used for chylothorax. It contains 55% of fat calories as MCT oil. Alimentum contains 33% of fat as MCT oil and Nutramigen does not contain any MCT oil. Sometimes severe protein allergy can result in temporary malabsorption, until the gut is healed. Pregestimil may be used in the interim, but Alimentum is more frequently used.

LEVEL 3

Level 3 formulas can be approved by R.D. and/or L.D. at the local level.

The formulas in this section consist mainly of elemental and metabolic formulas.
SIMILAC PM 60/40:

Similac PM 60/40 is a low iron formula. It contains a ratio of 60 percent whey to 40 percent casein. It is often prescribed for infants with impaired renal function who may benefit from lower mineral intake. It is also used to treat serum calcium disorders such as hypocalcemia due to hyperphosphatemia. The can size recently changed to 14.1 oz. The can was previously 16 oz or 1 lb. You may want to check with your vendors as to which size can is in stock.

ELEMENTAL FORMULAS

EleCare

Neocate

Neocate DHA/ARA

(NEW FORMULA NUTRAMIGEN AA)

These products are normally prescribed for infants. Reasons for issuance include:

Severe malabsorption

Severe food allergies

GI impairment, or medical condition requiring a hypoallergenic product.

For these products note that a protein hydrolysate such as Nutramigen, Alimentum or Pregestimil shall be trialed unless medically contraindicated. Usually these formulas have been tried prior to prescribing an elemental formula prior to diagnosing a severe food allergy or malabsorption. However, there may be situations in which these formulas have not been tried. In some cases it may not be indicated to force a trial on a protein hydrolysate formula if there is a medical contraindication. It is important to gather as much medical information as possible before denying or requesting a trial on a protein hydrolysate. Some examples of medical contraindications that would not require a trial on a protein hydrolysate are:

- post gastrointestinal surgery
- Necrotizing Enterocolitis
- other severe medical problems that would not allow for a trial on another formula. Contact the state office if you are unsure.

Other elemental and semi-elemental products are issued for children over one year of age and include:

E028 Splash

Peptamen Jr. w/Prebio

Neocate Junior

Tolerex

Neocate One+

Vital JR.

Pepdite Jr.

Vivonex Pediatric

Peptamen Jr.

Vivonex Plus

Many of these products now have formula codes for voucher clinics and do not require 999 vouchers.

Metabolic Formulas:

Metabolic formulas require state approval for the first issuance. Due to the fact that these conditions are rare it is important that we confirm that an infant is being followed by a metabolic specialist. Many of these formulas are used in conjunction with another formula and a ratio is usually calculated per metabolic MD or RD. After we receive the metabolic RX at the state office and approve the initial request, subsequent requests can be approved by an R.D. as a level 3 formula.

The metabolic Rx and list of providers are on the WIC website at the following links:

Form: <http://www.dshs.state.tx.us/wichd/nut/pdf/metarx.pdf>

List of metabolic centers: <http://www.dshs.state.tx.us/wichd/nut/pdf/MCDietitians.pdf>

Level 4 formulas

What has been moved to level 4?

- Enfamil/Similac Human Milk Fortifiers
- Enfamil Premature/Similac Special Care
- Portagen

In general what does level 4 include?

- The premature formulas
- HMF
- Monogen/Portagen
- Modular products- Duocal, Polycose, Microlipid, Protifar, Polycal, MCT Oil, Beneprotein
- Unusual formulas
- Anything new
- Anything with reasons for issuance outside normal guidelines

Why are these level 4?

- To make it possible for the SA to track what is being requested and why
- Because these are pretty unusual, SA staff might see them once a week, but at the local or clinic level you might see them once a year
- Often not designed for use outside the hospital, so we want to make sure the child is being monitored
- The SA is in pretty close contact with the formula companies, so we tend to get information faster than we can share with everyone at the local level
- Modular products in particular can be really tricky to issue. We just have more practice at the state level. They are very easy to overissue.

What questions should you ask when you get a level 4 formula?

- The same information you are getting for any other request (24-hour recall, formula history, anthropometric data, medical information...)
- Often with level 4 formulas the formula history is particularly important. Not only do we need to know what was tried, but also when, and what symptoms. The symptoms need to be more detailed than “didn’t tolerate”
- If anything from the interview or the Rx doesn’t make sense to you, clarify as much as possible. If it seems odd to you, it’s probably going to seem odd to us too.
- Are there any pending specialist appointments? Testing to be done? Does the caregiver know the results of any testing already done?
- With modular and metabolic products in particular, it’s usually useful to know how long a can lasts. That makes it easier to figure out how many cans to issue.
- Modular products in particular- what else is the child using? Is Medicaid or insurance providing anything? How is the product used?

Announcements:

- 1) Contract Products - There are 5 formula products available without a prescription in TX WIC.
They are:
Similac Advance
Similac with Iron
Similac Sensitive
Isomil Advance
Isomil
- 2) Rebated Non-Contract Products - There are 3 formula products that receive rebate and also require a prescription for issuance. If requests are presented for other non-contract products in the same category, the doctor should be asked if these could be provided instead. They are:
Similac Go and Grow Milk
Similac Go and Grow Soy
Similac Sensitive R.S.
Texas WIC has no other brand preferences for any other formula category. Please do not ask doctors to change their brand preference due to rebate for any other product. All other requests are to be evaluated as written.
- 3) Returned Formula for Voucher Clinics - We are currently working on procedures for handling formula that is returned to the clinic instead of to the grocery store. We have tentatively scheduled a conference call to talk about it on Feb. 25 at 10 and 12. Watch for a memo soon.
- 4) Sample Formula – We are still receiving information and have forwarded the first batch of forms to Mead Johnson. After they have an opportunity to review the information, they will pass it on to reps that are in your area. If they don't have a rep that services your area, you will be asked to ship the product back to them. More information will be provided to you at that time if it affects your agency or clinic.
- 5) Upcoming IDL's on Formula Approval.(Check IDL Calendar)
Formula Approval 101 (covers Level 1 formula approval.)
Formula Approval 201 (covers Level 2 formula approval.)
Formula Approval 301 (covers Level 3 formula approval.)

QUICK REFERENCE for FORMULA APPROVAL LEVELS

LEVEL 1 <i>All CAs may approve</i>	LEVEL 2 <i>Nutritionists may approve</i>	LEVEL 3 <i>Require RD/LD approval</i>	LEVEL 4 <i>Require State Agency approval</i>
<p><u>Standard Milk or Soy Infant Formulas:</u> Enfamil LIPIL Enfamil Lactofree LIPIL Enfamil ProSobee LIPIL Enfamil Gentlease LIPIL Good Start Supreme Good Start Supreme w/ DHA & ARA Good Start Supreme Soy w/ DHA & ARA</p> <p><u>Standard Toddler Soy Formulas:</u> Similac Go & Grow Soy Next Step ProSobee LIPIL Good Start 2 Supreme Soy w/ DHA & ARA</p> <p><u>Protein Hydrovsates</u> Alimentum (Powder) Alimentum (RTU) Nutramigen</p> <p><u>Other:</u> Isomil DF</p>	<p><u>Protein Hydrolysate:</u> Pregestimil LIPIL</p> <p><u>Added Rice Starch Products</u> Similac Sensitive RS Enfamil AR</p> <p><u>Premature Transitional Products:</u> EnfaCare LIPIL Neosure</p> <p><u>Milk-Based Toddler Products:</u> Similac Go & Grow Milk Next Step LIPIL Good Start 2 Supreme W/ DHA & ARA</p> <p><u>Pediatric Supplements:</u> Boost Boost w/Fiber Boost Plus Boost Pudding Bright Beginnings Pediatric Drink Bright Beginnings Pediatric Drink w/Fiber Bright Beginnings Soy Pediatric Drink Compleat Pediatric Drink Ensure Ensure w/Fiber Ensure Plus Ensure Pudding Kindercal Kindercal w/Fiber Kindercal TF Kindercal TF w/Fiber Nutren Junior Nutren Junior w/Fiber Pediasure Pediasure Enteral Pediasure Enteral w/Fiber Pediasure w/Fiber Resource JFK and Resource JFK 1.5</p> <p>Concentrating Contract Formula to 22 & 24 calories</p>	<p>Similac PM 60/40 Low Iron</p> <p>Elemental Formulas : Elecare Neocate Neocate w/ DHA & ARA</p> <p>Pediatric Elemental Formulas: EO 28 Splash Neocate Jr. Neocate One + Peptamen Jr. Peptamen Jr. w/ Prebio Pepdite Jr. Tolerex Vital Jr. Vivonex Pediatric Vivonex Plus</p> <p>Metabolic Formulas: Require metabolic Rx form and State approval for initial request</p> <p>Concentrating Contract Formula to 25 to 30 calories</p>	<p>Enfamil Human Milk Fortifier Similac Human Milk Fortifier</p> <p>Similac Special Care Enfamil Premature</p> <p>Portagen Monogen</p> <p>Modular Products Beneprotein Duocal MCT Oil Polycose RCF</p>

Over (for special formula reminders) 1

FORMULA CONFERENCE CALL NOTES

RETURNED FORMULA PROCEDURES

February 10, 2008

Agenda for Returned Formula Procedures for Voucher Clinics

- Overview and review of summary of changes
- Procedure for Accepting Returned Formula Products
- Filling out the Returned Formula Log (WIC52 EBT) –
- Procedure for Issuing Returned Formula Products
- Management of Returned Formula

Overview and Review of the Summary of Changes

- 1) As you know, sample formula is not a part of the current rebate contract. Soon, all sample formula will be removed from your clinic if it is not already gone. In the past, sample formula and formula returned to your clinic sometimes intermingled.
- 2) Now we are providing a definition for returned formula and it is the same as the one for EBT clinics. All formula that was ever purchased with WIC funds will be called “returned formula”. Donated formula will only refer to formula provided by some other program or a participants’ personal purchase. If a participant brings formula to the clinic that she received from a prior month’s issuance, even if she does not receive any formula in exchange, it will still be considered returned.
- 3) Now that we are on the fast track for EBT roll out, it has been decided that we should begin to implement some procedures that will prepare you for handling formula in the new EBT environment.
- 4) One major change in EBT is the fact that all exchanges will be handled in the clinic. In preparation for this, clinics will begin by accepting rebated formula in the clinic when it is being exchanged for non-rebated formula. For now, this is the only type of formula that must be returned to the clinic. The supply of formula that you will have will help you when you begin your transition to EBT. We will provide more information about that when your agency is trained for roll out.
- 5) Other types of formula exchanges will continue to happen in the grocery store. These will include rebated for rebated, non-rebated for non-rebated or non-rebated for rebated exchanges. You may also receive formula of these types that cannot be returned to the store for various reasons. For example: You need to exchange Nutramigen LIPIL for Neocate and you will need to get the Neocate from a different vendor than where the original purchase was made.
- 6) You will be provided with instructions for one way to issue out the returned formula to another participant. This is not the only way to use it, but we are providing these changes in stages.

- 7) We have provided the WIC 52EBT formula log for your use. We will also provide some instructions for filling out the log while you are still using vouchers. You will use the same log with some adjustments, when you begin using EBT cards. A separate log is maintained for each formula type.
- 8) Remember this is an evolving policy that will be completed over time. More information will be provided in future conference calls for different scenarios. If you have questions about issues not covered during this call please call the state office.

Accepting Returned Formula Procedures for Voucher Clinics

Please note the procedures we will be describing in this conference call apply only to clinics still on the voucher system, not to those doing EBT. Procedures for EBT clinics have not changed.

A. The Products

Rebated formula that is being exchanged for **non-rebated formula** shall be returned to the clinic.

Rebated formulas are the following formulas:

Similac Advance
Similac with Iron
Isomil Advance
Isomil
Similac Sensitive
Similac Sensitive R.S.
Similac Go and Grow Milk
Similac Go and Grow Soy

All other types of exchanges shall be returned to the store of purchase using a FEX. These include rebated for rebated, non-rebated for non-rebated, or non-rebated for rebated products. There is no change in procedure for the handling of these exchanges. Follow standard FEX procedure.

Note: Formula product that is damaged, spoiled or expired shall be returned to the store of purchase for an even exchange.

B. The Procedure

Please know that these procedures are to help us track formula exchanges, to see what's being exchanged and why. These procedures will help you in your preparation for EBT. Once you roll-out EBT, there are no more FEXs and no more 999s. There is formula exchange, but the process is dealt with using the WIN system and the WIC Lone Star Card.

- 1) Participant shall bring unopened cans to the clinic. Before accepting or exchanging product, confirm the cans are not open, dented, damaged or expired. The expiration date is usually stamped on the bottom of the can. Formula expires on the first day of the month, unless an exact date is stamped.
- 2) Document the amount of product the participant returned on the **Returned Formula Log** (stock number WIC-52 EBT) and secure the product in returned stock. Returned stock should be handled the same way as you have handled sample formula in the past, i.e. Secured, out-of-sight, inventoried, etc. Do not mix any remaining sample formula with returned formula stock. Document the following on the Returned Formula Log:
 - a) The name of the participant returning the product.
 - b) The number of cans returned and added to returned stock.
 - c) The signature of the parent/guardian /participant.
 - d) Staff initials.
- 3) If the replacement formula product is to be purchased at a store or ordered from a drop ship vendor, the LA shall issue a blue “WIC owes Grocer” voucher (FEX – Formula Exchange voucher) for the replacement product. On the voucher, there will only be replacement formula filled in. You will not have returned formula filled in, and the quantity of returned formula will be zero. Just draw a line through returned formula on the FEX.
- 4) Maintain a file for all carbon copies of formula exchange vouchers separate from other voucher carbons. This file can be in the same drawer or file cabinet, just a separate file folder.
- 5) Fax copies of all exchange vouchers to (512) 341-4403. Attention the fax to: Formula Group/Clinical Nutrition Services. Indicate that this is a formula exchange on the fax cover page.

How To Use The Returned Formula Log (WIC 52-EBT)

1. This is an EBT form however we will use it to log returned formula for voucher clinics. It can be ordered from the warehouse and downloaded from <http://www.dshs.state.tx.us/wichd/nut/foods-nut.shtm>.
2. Use one log for each formula. Write in the name of the formula and your site at the top of the page
3. Review of reason codes to issue returned formula:
 - # 4- *Supplement BF* You would use this code for issuing formula to a mom who was getting a partial package. Do not use this code for a mom on an enhanced package.

- #8 - *Issued in lieu of benefits on card* –this will be in combination with a voucher
 - #9- *Infant no longer using*, the situations where the family doesn't want the formula, isn't getting anything in return, but it was originally paid with WIC funds and it is returned to the clinic
 - #10- *Transfer to/from another site* means transferring the formula, not the participant.
3. When a participant brings in formula:
 - a. Write in the date, the child's name, the reason code, your initials, how many cans are coming in, and keep a running total.
 - b. Formula exchange screen printed-disregard this for now
 - c. Expiration date- this is mostly to remind you to check the dates and store the cans so that the formula that will expire first is used first. If the participant brings in formula with multiple expiration dates, just write them all in the same area. Don't make the parent sign for each individual expiration date.
 - d. Comments: Use this section to provide information to that may be useful. For example- "Exchanged for Isomil" or "Gave FEX for Nutramigen"

Procedure for Issuing Returned Formula Products

- 1) Returned formula products shall be provided only to other WIC participants in place of or in combination with a voucher. Returned product may not be used:
 - a) To replace lost or stolen vouchers
 - b) For concentrating product to greater than 20 calories per ounce.
 - c) To provide more than the maximum monthly allowed amount of product (403 oz concentrate or 128 oz powder). This includes product issued on a voucher or exchange voucher, product provided from the clinic's returned product stock and product that has already been used in the current month by the participant.
 - d) For individuals not currently certified as WIC participants or for applicants waiting for appointments.
 - e) For formula product trials unrelated to voucher issuance or product exchange.
 - f) For staff personal use.
 - g) For sale
 - h) To transfer to other programs, food banks, or hospitals.
- 2) Returned product shall be issued as soon as possible.
- 3) **When issuing** product from returned stock and document the following on the appropriate Returned Formula Log (WIC-52EBT):
 - a) The name of the product recipient.
 - b) The number of cans issued from returned stock.
 - c) The signature of the recipient.
 - d) Staff initials.
- 4) When current month benefits are issued from returned stock, at least one can of product shall be issued on a voucher. When issuing both a voucher and returned product to a participant, staff shall attempt to use amounts of product with a TX WIN product code as opposed to a 999 voucher. Rebated formulas should not be issued with a 999 voucher.

Management of Returned Formula

- Designate one or two people, depending on the size of your clinic, to be responsible for the returned formula stock. This person should be responsible for rotating stock so that the formula that is closest to expiring is issued first. They should also be aware of any formula that is infrequently issued that is in returned stock, such as Similac Go & Grow Milk., for example. Let other clinics know that this formula is available.
- If your agency is not able to use the formula, and it is 4 months out from the expiration date, notify Cathy Plyler or Krista Neal at the state office. They can be notified by email, which is preferred, or by formula pager. They can notify other WIC directors that the formula is available.
- Start with your LA first. Let the nutritionist know that the formula is available and this formula should be issued out when another participant needs this formula next.
- If dented or expired cans are returned because they are dented or expired, send the participant to the store for a formula exchange. If dented and expired cans are returned to the clinic along with cans that are good, because the participant is changing formulas, then accept all of the cans as returned. Destroy the cans with another staff person present and both of you need to sign the returned formula log. Indicate how many cans were destroyed.