



Memorandum

#14-043

TO: WIC Regional Directors
WIC Local Agency Directors

FROM: Linda Brumble, Unit Manager
Nutrition Education/Clinic Services Unit
Nutrition Services Section

DATE: April 10, 2014

SUBJECT: Similac Contract Formula Change Staff Resources Available

Attached are nine resources available for staff use regarding the Similac Contract formula change. The resources are as follows:

- Formula Updates March 2014 PowerPoint slides (Revised 3/28/14)
- Vendor Flash dated 3/27/14 – vendor communication
- Texas WIC Formula Change Form – to communicate with healthcare providers concerning a formula approval, issuance or change decision.
- Texas WIC Medical Request for Formula/Food (Revised 3/2014)
- Healthcare Provider Letter (Revised 3/27/14)
- Contract Formula Changes Implementation of Alternate Similac Formula Products Requiring A Prescription (Revised 3/31/14)
- Clinic Cheat Sheet for Similac Total Comfort or Spit Up to Similac Advance Change
- Job Aid – Comparison of Similac Standard Infant Formulas with Similar Characteristics
- Formula Change Flier English/Spanish

If you have any questions or require additional information, please contact Cathy Plyler, Clinical Nutrition Specialist, Nutrition Education/Clinic Services Unit, at (512) 341-4577 or cathy.plyler@dshs.state.tx.us, or Sandra Brown, Clinical Nutrition Specialist, Nutrition Education/Clinic Services Unit, at (512) 341-4576 or sandra.brown@dshs.state.tx.us.

Formula Updates

March 2014
Revised 3/28/14
Presented by the Formula Team

Agenda

- Similac Sensitive
- New formula issuance procedures
- Trials and re-trials
- Purchasing concerns
- Handling returned formula

NEW information

- The following presentation has been updated with the change in direction addressed during conference calls dated 3/26 and 27.
- Some slides have been deleted and others have new details.

NEW information

- Good Start Soothe update
 - Good Start Soothe will **not** be available as a contract formula after April 1.
 - Issuance requires the following:
 - Intolerance to Similac Advance or medical contraindication to trial
 - A prescription and approval.
- All Good Start Soothe past and current issuance requires a prescription and approval.

Similac Sensitive

Similac Sensitive

- Similac Sensitive codes 394, 411 and 397 will no longer appear on the TWIN pick list after **April 1, 2014**.
- **New:** Similac Sensitive codes 559 (powder) and 560 (RTU) **WILL** be available with a prescription beginning April 1.

Similac Sensitive

- NEW
 - Similac Sensitive UPCs will be discontinued effective 3/31/14.
 - This means that participants who were issued Similac Sensitive (codes 394, 411 and 397) for April benefits **will not** be able to buy it beginning April 1st.
 - This also means that they will need to return to the clinic to be issued Similac Advance for April.

Similac Sensitive

- A recent trial of Similac Advance (February or later) is needed before a prescription for Similac Sensitive can be accepted.
- The formula will be prorated.

Continuing clinic actions

- Phase 2 Implementation strategies are underway
- All participants previously issued the affected formulas are to be changed to Similac Advance
 - Similac Sensitive clients beginning with April benefits
 - Similac Total Comfort and Similac for Spit Up clients beginning with June benefits

Continuing Phase 2...

- Use this table to determine what the participant should be changed to -

394	SIMILAC SENSITIVE PWD 12.6OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ
411	SIMILAC SENSITIVE CON 13OZ	→	388	SIMILAC ADVANCE CON 13OZ
397	SIMILAC SENSITIVE RTU 32OZ	→	365	SIMILAC ADVANCE RTU 32OZ
482	SIMILAC FOR SPIT UP PWD 12.3OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ
450	SIMILAC FOR SPIT UP RTU 32OZ	→	365	SIMILAC ADVANCE RTU 32OZ
551	SIMILAC TOTAL COMFORT PWD 12.6OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ

Continuing clinic actions

- Don't forget to change the formula codes to make sure future issuance is for Similac Advance.
- For infants under 9 months of age the Infant Formula Plan grid must display.
- Older infants with all future benefits loaded on their cards will not have the grid display.
- The FEM (formula exchange module) must be used to exchange to Similac Advance.

New formula issuance procedures

New formula issuance procedures

- Similac Advance is to be offered to all infants requesting formula unless
 - A soy formula is requested (offer GS Soy)
 - A script for another formula is presented
 - For exempt requests – follow usual approval protocol.
 - For any other standard formula determine if Similac Advance has been tried.

New formula issuance procedures

- When Similac Advance has been tried and mild intolerance symptoms such as gas, fussiness, benign spitting up or constipation are reported and no script is presented:
 - Review storage, preparation, and feeding techniques
 - Provide counseling to help with symptoms
 - Continue to offer Similac Advance.
 - Consider alternate form (concentrate)

New formula issuance procedures

- Use the Common Infant Problems handout series to help resolve the symptoms of colic, constipation and spitting up without changing formula.

New formula issuance procedures

- To request an alternate contract formula due to intolerance to Similac Advance
 - Call the participant's HCP to obtain a RX or
 - Fax the Texas WIC Formula Change form to the HCP and
 - Attach a copy of the new revised RX form (revision date 3/2014)

New formula issuance procedures

- Options for April – May (New)
- For intolerance to Similac Advance
 - Similac Total Comfort or Similac For Spit Up can be offered through 5/31 (no script needed).
 - Scripts for Similac Sensitive can be approved.
 - More details at the April Formula Update trainings.

Trials and re-trials

Trials and retrials

- Trials and re-trials may be waived for medically fragile infants, recent surgery, hospitalization or major illness situations.
- LA CA may make this determination when aware of the above conditions/circumstances.
- The HCP may also fill in a medical contraindication for a trial/retrial on the RX form as they do now.

Purchasing concerns

Self-monitoring of formula issuance

- Run a foxfire report (SRFORM) to monitor issuance of Total Comfort/Spit Up beyond June.
- Attempt to contact participants and have them return to change benefits for the affected months.

Future purchases

- **Reminder:**
 - **New for this training:**
 - UPCs for Similac Total Comfort and Similac for Spit up will be discontinued 5/31/14.
- Clients issued these formulas will not be able to purchase them after these dates.
- Participants issued codes 450, 482 or 551 for June will need to return to the clinic to have them changed to Similac Advance.

Handling Returned Formula

Handling returned formula

- Follow current protocol to accept returned formula
- Try to issue out of stock as much as possible for Sensitive, Total Comfort, and Spit Up
- **New: It is now acceptable to use returned formula for new infants. This is no longer limited to returning infants.**

Returned formula

- Donations of returned formula to food banks or similar institutions is not allowed.
- Contact the formula pager at (512) 499-6814 for instructions on issuing Similac Sensitive concentrate.

Returned formula

- Returned Similac Sensitive may continue to be issued to participants using the new formula codes with a RX.
- It may also be used to help transition clients back to Similac Advance.
- Contact the formula pager staff at (512) 499-6814 for further details.

Final thoughts

Formula issuance philosophy

- Similac Advance or Good Start Soy are to be issued whenever medically possible.
- Alternatives may be considered after possible remedies to continue on these formulas have been tried and failed.
- Non-contract alternates are to be rarely issued – only when medically necessary.

Non-contract formula approvals

- For standard formulas such as Gentlease, AR, GS Gentle
 - Make sure Similac Advance has been tried and failed with severe intolerance symptoms.
 - Non-contract formulas cannot be approved for mild intolerance symptoms alone.
- A new checklist and specific training have been created to assist with these approvals.

Non-contract formula approvals

- For exempt formulas/medical foods such as Nutramigen or Neocate
 - Follow the usual formula approval protocol
 - Consult the most recent version of the Texas WIC Formulary for reasons to issue.

Upcoming trainings



- April 2014
 - Formula Updates April 2014
 - Thursday, April 10th – 1:00 pm – 2:30 pm
 - Tuesday, April 15th – 11:00 am – 12:30 pm
 - Wednesday, April 16th – 1:00 pm – 2:30 pm
 - Formula Approval for Non-Contract Standard Formula
 - Tuesday, April 8th – 2:00 pm – 3:00 pm
 - Wednesday, April 23rd – 11:00 am – 12:00 pm

More on training

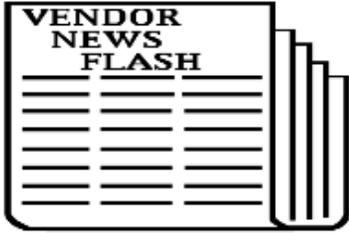
- Although we plan to keep all online formula update trainings the same throughout the calendar month
 - There may be breaking news which has different content.
 - If so, it will be via conference call rather than online via centurylink.
- Please stay alert to new trainings and send someone from each agency to attend

Questions?



Contact Us

- **Sandra Brown**
 - Sandra.Brown@dshs.state.tx.us
 - 512-341-4576
- **Pat Koym**
 - Patricia.Koym@dshs.state.tx.us
 - 512-341-4578
- **Cathy Plyler**
 - Cathy.Plyler@dshs.state.tx.us
 - 512-341-4577
- **Brittney Miller**
 - Brittney.Miller@dshs.state.tx.us
 - 512-341-4579



TEXAS WIC PROGRAM
Department of State Health Services
Food Issuance and Redemption Services Unit - MC 4554
P.O. Box 149347
Austin, TX 78714-9347
(512) 341-4425 1-800-252-9629 (Texas Only)

March 27, 2014

Infant Formula Update

This notification is an update to earlier Vendor Flashes dated January 8th and February 14th, 2014, related to Infant Formulas authorized by the Texas WIC Program.

The earlier news bulletins informed vendors that Similac Sensitive (4/1/14), Similac Total Comfort (6/1/14), and Similac for Spit Up (6/1/14) formulas would no longer be routinely authorized by the Texas WIC Program on the date shown adjacent to each item.

Update: Although the dates shown for reducing the routine issuance of these formulas to clients remains as originally published, some changes have been made. Infants must try Similac Advance for some period before receiving any other formula, and each of the formulas mentioned above may again be available to Texas WIC clients with a doctor's prescription.

How does this change affect your WIC infant formula sales? For the month of April 2014, sales of Similac Sensitive for WIC will still be extremely low.

- Of the approximate 66,000 WIC infants that normally would have had this formula authorized, a much smaller number will have been issued Sensitive. Because of the transition, some clients may have inadvertently been issued a formula that now requires medical documentation. These formulas will not scan as authorized. Please direct these clients back to their WIC clinics for assistance.
- Some clients will receive Similac Sensitive correctly by doctor's prescription after the infant has tried Similac Advance so they can successfully shop for the formula. Specifically, for infants issued Similac Sensitive via prescription, the formula will be loaded on their EBT card with a different food sub-category. You do not need to worry about the mechanics of this change as the EBT system will handle it automatically and the items will successfully scan. Note: We are unable to project how many of the 66,000 infants taken off of Similac Sensitive will ultimately have it re-authorized via prescription but we believe the number will be relatively low since most of the infants should be able to successfully tolerate Similac Advance.
- If the formula scans successfully, the client can redeem it.

Finally, the February 14, 2014, Vendor Flash notified vendors that Good Start Soothe powder in the 12.4 ounce cans/cases would begin being issued to WIC infants as an alternative to Similac Sensitive infant formula effective April 1st. Although Good Start Soothe will be available by prescription effective April 1, 2014, you will likely not see the higher number of sales of this product as was originally projected. Clinics will instead offer Similac Total Comfort until June 1st without medical documentation. So, you may see an increase in the sales of Similac Total Comfort through the month of May.

The spike in WIC infant formula sales you will experience in April 2014 will be for Similac Advance since all 66,000 infants taken off of Similac Sensitive will be issued and initially buying Similac Advance.

We sincerely appreciate your assistance in this transition period. If you have any questions, please call 1-800-252-9629.

Texas WIC Formula Change Form

To: _____ Date: _____

RE: Infant/child: _____ DOB: _____

Parent/Guardian: _____

Dear Healthcare Provider:

WIC is unable to provide the formula _____ as requested for the following reason:

- A contract WIC formula must be trialed first
 - An alternate contract formula is recommended
 - The diagnosis does not meet WIC guidelines/reasons for issuance
 - Your patient has requested a formula change
- P/G signature: _____
- This formula is not an authorized item for Texas WIC

Therefore, WIC has taken the following action:

- Similac Advance/Good Start Soy, a contract WIC formula, was issued to your patient
- Please complete the attached medical request for an alternate contract formula and fax to the number below in order for WIC to provide the formula.
- Your patient was provided counseling on how to manage common infant problems such as colic, gas, constipation, or spit-up. If actions recommended do not improve or symptoms worsen the patient will contact you for further evaluation.
- No formula was issued to your patient, please provide the following clarification or missing information: _____
- Other: _____

Thanks for your continued partnership. If there are further questions please feel free to contact us at: **(insert contact information for clinic and CA name and number)**



WIC is an equal opportunity provider.

Texas WIC Medical Request for Contract Formula/Food

For all other formula requests use reverse side.

All requests are subject to WIC approval and provision based on program policy and procedure.

See the Texas WIC Formulary at <http://www.dshs.state.tx.us/wichd/nut/pdf/TXWICFormulary.pdf>.

Required Patient Information

Patient's Last Name: _____ First Name: _____ DOB: _____

Parent/Caregiver's Name: _____

Similac Advance is the formula provided to all infants on WIC. If **Similac Advance** is not tolerated, alternate formulas may be provided.

Check below to request an alternate WIC formula due to formula intolerance:

- Similac Sensitive** – for lactose sensitivity and/or colic
- Similac for Spit Up** – for spitting up and/or reflux (Medical Request not required until June 1st, 2014)
- Similac Total Comfort** – for digestive issues and/or colic (Medical Request not required until June 1st, 2014)

Unable to trial Similac Advance due to severe or exceptional medical condition listed here: _____

Formula amount: _____ per day (Maximum allowed by federal guidelines will be provided unless a lesser amount is indicated.)

Number Months: _____ (Will be issued up to 12 months of age unless otherwise indicated.)

Infants (6-12 months old)

Full provision of formula and infant foods will be issued unless checked below.

- Provide only formula past 6 months of age due to inability or delay in consuming solids.**

Infants unable to eat and on therapeutic (non-standard) formula may be eligible for an increased amount of formula.

Check WIC Supplemental Food to **OMIT** at 6 months of age.

Infant Cereal

Baby Food
(fruits and/or vegetables)

Children (1-5 years old) and Women

All appropriate WIC foods, except milk, will be issued with prescribed formula unless checked below.

- Provide milk in addition to formula.
- Provide soy milk/tofu in addition to formula for milk allergy.
- No supplemental foods. Provide formula only.

Check WIC Supplemental Foods to **OMIT** from Food Package.

Cheese

Peanut Butter

Cereal

Juice

Eggs

Beans

Whole Grains

Fruits/Vegetables

Health Care Provider Information (Signature and all information below required to process request):

Signature/Stamp of Health Care Provider (MD, DO, PA, NP): _____ Date: _____

Provider's Name (Please Print): _____ Clinic/Practice Name: _____

Phone Number: _____ Fax Number: _____

For WIC Use Only

SIDE 1



This institution is an equal-opportunity provider. ©2014 Department of State Health Services.
Nutrition Services Section. All rights reserved. F13-06-13152 Rev. 03/14



Texas WIC Medical Request for Formula/Food

For alternate contract formula requests use reverse side.

All requests are subject to WIC approval and provision based on program policy and procedure.

See the Texas WIC Formulary at <http://www.dshs.state.tx.us/wichd/nut/pdf/TXWICFormulary.pdf>.

Required Patient Information

Patient's Last Name: _____ First Name: _____ DOB: _____

Parent/Caregiver's Name: _____

Name of Formula: _____

Requested length of issuance: 3 months 6 months Other: _____ Formula amount: _____ per day*

*Maximum allowed by federal guidelines will be provided unless a lesser amount is indicated.

Qualifying Condition/Diagnosis: _____

Date of Measurements: _____

Measurements: Length/Height: _____ Weight: _____ If premature: Birth Weight: _____ Weeks Gestation: _____

A retrial of contract WIC formula (Similac Advance, Gerber Good Start Soy) will occur up to a maximum of 3 months after the non-WIC formula has been provided. (Does not apply to therapeutic formulas.)

This retrial may be waived for severe or exceptional medical conditions.

Please state condition(s) here:

Infants (6-12 months old)

Full provision of formula and infant foods will be issued unless checked below.

- Provide only formula past 6 months of age due to inability or delay in consuming solids.
 Infants unable to eat and on therapeutic (non-standard) formula may be eligible for an increased amount of formula.

Check WIC Supplemental Food to **OMIT** at 6 months of age.

Infant Cereal

Baby Food
 (fruits and/or vegetables)

Children (1-5 years old) and Women

All appropriate WIC foods, except milk, will be issued with prescribed formula unless checked below.

- Provide milk in addition to formula.
 Provide soy milk/tofu in addition to formula for milk allergy.
 No supplemental foods. Provide formula only.

Check WIC Supplemental Foods to **OMIT** from Food Package.

Cheese

Peanut Butter

Cereal

Juice

Eggs

Beans

Whole Grains

Fruits/Vegetables

Health Care Provider Information (Signature and all information below required to process request):

Signature/Stamp of Health Care Provider (MD, DO, PA, NP): _____ Date: _____

Provider's Name (Please Print): _____ Clinic/Practice Name: _____

Phone Number: _____ Fax Number: _____

For WIC Use Only



TEXAS DEPARTMENT OF STATE HEALTH SERVICES

DAVID L. LAKEY, M.D.
COMMISSIONER

P.O. Box 149347
Austin, Texas 78714-9347
1-888-963-7111
TTY: 1-800-735-2989
www.dshs.state.tx.us

March 27, 2014

Health Care Providers
State of Texas

SUBJECT: Texas WIC Formula - Important Change for Healthcare Professionals

Dear Health Care Providers:

In late February, Texas WIC sent notification about formulas that would no longer be available on the WIC program. Since that time, circumstances have changed and Texas WIC has therefore adjusted its policy regarding allowable WIC formulas.

The full line of Abbott's Similac products will be available for issuance to WIC participants, however some will require medical documentation. Abbott is reformulating most of their products to be 19 calories/ounce rather than the current standard of 20 calories/ounce. Medical documentation is a federal requirement for any 19 calorie formula.

- Similac Advance will remain as a 20 calorie formula option and is available without medical documentation at any time. Gerber Good Start Soy is also available without medical documentation at any time.
- Similac Sensitive becomes a 19 calorie formula on April 1st, and therefore requires medical documentation from that date forward.
- Similac Total Comfort and Similac Spit Up transition later, requiring medical documentation from June 1st forward.

As the Abbott reformulations will happen in phases, WIC participants currently receiving the affected products listed above will first be issued Similac Advance for their WIC benefits. Should a participant require an alternative to Similac Advance, WIC clinics will offer Similac Total Comfort as the next standard option at this time, as it is available without medical documentation until June 1st. Participants requiring a different alternate will be seeking health care provider assistance to obtain the required documentation. As we know the medical documentation requirement may create challenges, WIC has created the attached simplified medical documentation form for your use.

Please note that effective June 1st, any formula other than Similac Advance or Gerber Good Start Soy will require medical documentation. This includes babies receiving Similac Total Comfort and Similac Spit Up at that time.

We realize that changing course can cause confusion and regret any inconvenience this may have caused. As we received updated information from our contractors and additional USDA guidance, it was imperative for our program to make changes that allow us to continue in helping support the health of our participants.

An Equal Opportunity Employer and Provider

Health Care Provider
March 27, 2014
Page 2

Texas WIC is committed to meeting the needs of Texas women and children above all else. Thank you for your partnership in this endeavor, and please let us know what we can do to best support you through the transition.

Should you have any questions or need assistance regarding the information in this letter, please contact Cathy Plyler, Formula Specialist, Nutrition Education/Clinic Services Unit, at Cathy.Plyler@dshs.state.tx.us, or by phone at 512-341-4577.

Sincerely,

A handwritten signature in blue ink that reads "Lindsay J. Rodgers". The signature is written in a cursive style with a large, stylized initial "L".

Lindsay Rodgers, Director
Nutrition Services – WIC program

IMPLEMENTATION OF ALTERNATE SIMILAC PRODUCTS REQUIRING A PRESCRIPTION

SUMMARY OF KEY POINTS

- All participants must be issued Similac Advance first. (Exception – requests for therapeutic/exempt formulas or requests for Good Start Soy.)
- Similac Sensitive, Similac for Spit-Up, and Similac Total Comfort will be allowed on Texas WIC with a prescription after Similac Advance has been tried.
- Similac Sensitive will require a prescription as of April 1, 2014.
- Similac for Spit-up and Similac Total Comfort will require a prescription as of June 1, 2014.
- Gerber Good Start Soothe will not be approved without a prescription. A prescription will be required and non-contract formula approval procedures will apply.
- Similac Advance and Gerber Good Start Soy are the only formulas available without a prescription on Texas WIC as of June 1, 2014.
- A notice is being sent to Healthcare Providers (HCP) regarding these changes.

TWIN and EBT IMPLEMENTATION

- To make this change in the system, existing formula codes must be eliminated and new codes entered. The new formula codes for Similac Sensitive are as follows:
 - 559 SIMILAC SENSITIVE PWD 12OZ
 - 560 SIMILAC SENSITIVE RTU 32OZS
 - SIMILAC SENSITIVE CONC 13 OZ has been discontinued
- Participants who were erroneously issued Similac Sensitive with the old formula codes will not be able to purchase the formula with their EBT cards after April 1, 2014. They will be instructed to return to the local clinic. Proration will apply.
- **Please note that participants will not be able to shop until April 3, 2014 with the new formula codes.**

GENERAL INSTRUCTIONS FOR LOCAL AGENCY CLINICS

- Handling Similac Sensitive issued for April with old formula codes and future months:
 - Participants will be returning to the clinic as they will be unable to purchase the formula.
 - All participants must be changed to Similac Advance using the formula exchange module.
 - Clerks can change to Similac Advance using the current standing orders.
- Contract Formula Change fliers are attached and will be printed for the WIC Catalog.
- Provide the updated Texas Medical Request form to healthcare providers or participants who request an alternate contract formula (Use side 1).
- Similac Total Comfort and Similac for Spit-Up can be issued without a prescription through May 31, 2014.
- Continue to change these formula codes to Similac Advance for **June** Benefits:
 - 551 SIMILAC TOTAL COMFORT PWD 12.6OZ
 - 482 SIMILAC FOR SPIT-UP PWD 12.3OZ
 - 450 SIMILAC FOR SPIT-UP RTU 32OZ
- A prescription will be required for these formulas in June and new codes will be created for Similac Total Comfort and Similac for Spit-Up at that time. The same procedures that were followed for the transition of Similac Sensitive formula codes will be followed.

GERBER GOOD START SOOTHE REQUESTS

- There may be an increase in requests for this formula due to anticipated changes previously announced.
- Gerber Good Start Soothe cannot be provided without a prescription and can only be approved using non-contract standard formula approval procedures.
- Similac Total Comfort can be offered through May 31, 2014 without a prescription in lieu of Gerber Good Start Soothe. A prescription will be required after June 1, 2014.
- Inform participants that Similac Sensitive will be available; however, they will have to obtain a prescription from their HCP. Provide a copy of the new prescription form.

PRESCRIPTIONS FOR SIMILAC SENSITIVE

- Similac Sensitive can be issued with a prescription after an initial or recent trial (February, March, April) of Similac Advance.
- A waiver for the Similac Advance trial is permitted for participants with serious medical contraindications such as, a chronic or acute medical condition, recent hospitalization or surgery, weight loss, failure to gain weight, or failure to thrive when documented in the Texas Medical Request form.
- The prescription is valid for the entire certification period for infants unless otherwise indicated by the HCP. Enter the day before the infant's one year birthdate as the expiration date.
- The Texas Medical Request Form has been updated to include two sides. Side one is used to request the alternative contract formulas. This side will have a check box for doctors to request alternate contract formulas.
- Requests for other formulas should be documented on side two and must follow regular procedures for formula requests and approval. If a HCP uses side two to request an alternate contract formula, it can be accepted; however, the diagnosis and length of issuance must be included.
- Other prescription forms are acceptable to issue Similac Sensitive (and after June 1st for Similac Total Comfort and Similac for Spit Up) but must include: participant information, name of formula, prescribed amount needed per day, qualifying medical condition, length of issuance and HCP signature/contact information. A verbal request can be obtained as per current policy.
- Measurements, diet recall, and/or completion of the formula approval form are not required when approving Similac Sensitive, Similac Total Comfort, or Similac for Spit-up medical requests.
- The CA will assign the correct formula code and expiration date.
- The new formula code should be updated on the Infant Certification Form and the prescription must be filed in the participant's chart.

Clinic Cheat Sheet for Similac Total Comfort or Spit Up to Similac Advance Change

Instructions when changing the **Issuance Frequency**

To make the change permanent, the Infant Formula Plan (IFP) must be accessed when changing the formula code. For any accidental issuance of Similac Sensitive after April 1, 2014, use the Formula Exchange Module to change the formula to Similac Advance.

394	SIMILAC SENSITIVE PWD 12.6OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ
411	SIMILAC SENSITIVE CON 13OZ	→	388	SIMILAC ADVANCE CON 13OZ
397	SIMILAC SENSITIVE RTU 32OZ	→	365	SIMILAC ADVANCE RTU 32OZ
482	SIMILAC FOR SPIT UP PWD 12.3OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ
450	SIMILAC FOR SPIT UP RTU 32OZ	→	365	SIMILAC ADVANCE RTU 32OZ
551	SIMILAC TOTAL COMFORT PWD 12.6OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ

Benefits in Hand	No Current Month Benefits
March <ul style="list-style-type: none"> Issue 2 months of Similac Total Comfort or Spit Up(April and May) Change the formula code to Similac Advance (access IFP screen) Issue the remaining month (June) 	March <ul style="list-style-type: none"> Issue 3 months of Similac Total Comfort or Spit Up (March, April, May) The change will have to be made when they return in May
April <ul style="list-style-type: none"> Issue 1 month of Similac Total Comfort or Spit Up (May) Change the formula code to Similac Advance (access IFP screen)Issue the remaining months (June and July) 	April <ul style="list-style-type: none"> Issue 2 months of Similac Total Comfort or Spit Up (April and May) Change the formula code to Similac Advance (access IFP screen) Issue the remaining month (June)
May <ul style="list-style-type: none"> Change the formula code to Similac Advance (access IFP screen) Issue the remaining months (June, July, August) 	May <ul style="list-style-type: none"> Issue 1 month of Similac Total Comfort or Spit Up (May) Change the formula code to Similac Advance (access IFP screen) Issue the remaining months (June and July)

Clinic Cheat Sheet for Similac Total Comfort or Spit Up to Similac Advance Change

Instructions when using **Formula Exchange**

To make the change permanent, the Infant Formula Plan (IFP) must be accessed when changing the formula code. For any accidental issuance of Similac Sensitive after April 1, 2014, use the Formula Exchange Module to change the formula to Similac Advance.

394	SIMILAC SENSITIVE PWD 12.6OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ
411	SIMILAC SENSITIVE CON 13OZ	→	388	SIMILAC ADVANCE CON 13OZ
397	SIMILAC SENSITIVE RTU 32OZ	→	365	SIMILAC ADVANCE RTU 32OZ
482	SIMILAC FOR SPIT UP PWD 12.3OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ
450	SIMILAC FOR SPIT UP RTU 32OZ	→	365	SIMILAC ADVANCE RTU 32OZ
551	SIMILAC TOTAL COMFORT PWD 12.6OZ	→	414	SIMILAC ADVANCE PWD 12.4OZ

Benefits in Hand	No Current Month Benefits
March <ul style="list-style-type: none"> Issue 3 months of Similac Total Comfort or Spit Up (April, May, June) Change the code to Similac Advance (access IFP screen) Go in to the Formula Exchange Module and Select JUNE Change June to Similac Advance 	March <ul style="list-style-type: none"> Issue 3 months of Similac Total Comfort or Spit Up (March, April, May) The change will have to be made when they return in May
April <ul style="list-style-type: none"> Issue 3 months of Similac Total Comfort or Spit Up (May, June, July) Change the code to Similac Advance (access IFP screen) Go in to the Formula Exchange Module and Select JUNE & JULY Change June and July to Similac Advance 	April <ul style="list-style-type: none"> Issue 3 months of Similac Total Comfort or Spit Up (April, May, June) Change the code to Similac Advance (access IFP screen) Go in to the Formula Exchange Module and Select JUNE Change June to Similac Advance
May <ul style="list-style-type: none"> Not necessary to use FEX in May unless an error was made Change the formula code to Similac Advance (access IFP screen) Issue all 3 months as Similac Advance (June, July, August) 	May <ul style="list-style-type: none"> Issue 3 months of Similac Total Comfort or Spit Up (May, June, July) Change the code to Similac Advance (access IFP screen) Go in to the Formula Exchange Module and Select JUNE & JULY Change June and July to Similac Advance

B. Job Aid-Comparison of Similac Standard Infant Formulas with Similar Characteristics

Comparison	Similac Advance	Similac Sensitive With RX	Similac for Spit-Up With RX	Similac Total Comfort With RX
Protein, source	Non-fat milk, whey protein concentrate	Milk protein isolate	Milk protein isolate	Partially hydrolyzed whey protein
Whey: Casein Ratio	48:52	18:82	18:82	100% whey
% of Calories from Protein	8%	9%	9%	9%
Fat Source	High-oleic safflower oil, soy oil, coconut oil, DHA/ARA*	High-oleic safflower, soy oil, coconut oil, DHA/ARA*	High-oleic safflower, soy oil, coconut oil, DHA/ARA*	High-oleic safflower oil, soy oil, coconut oil, DHA/ARA*
% of Calories from fat	43%	49%	49%	49%
Carbohydrate Source	Lactose, GOS [†]	Corn syrup solids, sugar, GOS [†]	Corn syrup solids, rice starch, sugar	Corn syrup solids, sucrose, GOS [†]
% of Calories from Carbohydrate	49%	43%	43%	42%
Special Property	Standard milk-based formula	99% lactose-free	Contains added rice starch, 99% lactose-free	Partially hydrolyzed protein, reduced lactose (2%)
Calories per ounce	20	19 (4-1-14)	19 (6-1-14)	19 (6-1-14)

*DHA/ARA – docosahexaenoic acid and arachidonic acid

[†]GOS – galactooligosaccharides, a prebiotic

Changes to WIC Formula – 2014

These formulas are available from the Texas WIC program.



Similac Advance®



Gerber® Good Start® Soy

The following formulas are available without a prescription through May 31st, 2014. Starting June 1st, a medical request is required.



Similac For Spit Up®



Similac Total Comfort®

The following formula is allowed with a medical request starting April 1st, 2014.



Similac Sensitive®

Cambios a las fórmulas de WIC para bebés en 2014

Estas fórmulas están disponibles bajo el Programa WIC de Texas.



Similac Advance®



Gerber® Good Start® Soy

Estas fórmulas están disponibles sin necesitar una receta, hasta el 31 de mayo de 2014. A partir del 1º de junio, necesitará una receta o pedido médico.



Similac For Spit Up®



Similac Total Comfort®

A partir del 1º de abril de 2014, necesitará una receta o pedido médico para recibir esta fórmula.



Similac Sensitive®