
Purpose To provide guidance for the issuance of special formulas (exempt infant formula) and medical/nutritional products.

Definitions of Special Formula and Medical/Nutritional Products

Special Formula (exempt infant formula):

- Any infant formula designed for infants with a medical condition that restricts the use of a conventional formula and requires a special formula.

Medical/Nutritional Products

- Enteral products specifically formulated to provide nutrition support of children over 1 year of age, teens, and adults with a diagnosed medical condition when use of conventional foods is precluded, restricted or inadequate.

The major difference between special formula and medical/nutritional products is that medical/nutritional products are designed for use with children over 1-year of age and women, and special formulas are designed for use with infants.

Allowance of Special Formulas

Special formulas (exempt infant formulas) are authorized for the management of medical conditions that contraindicate the use of standard infant formulas. The conditions include, but are not limited to:

- failure to thrive
- metabolic disorders
- inborn errors of metabolism
- severe gastrointestinal disorders
- malabsorption syndromes
- protein allergy and intolerance

Allowance of Medical/Nutritional Products

Medical Nutritional Products are authorized to provide nutrition support for children over one year of age, and pregnant, breastfeeding or postpartum women with a diagnosed medical condition when use of conventional foods is precluded, restricted or inadequate. Conditions include, but are not limited to:

- metabolic disorders
- gastrointestinal disorders
- malabsorption syndromes
- inborn errors of metabolism
- food allergy/intolerance

Guidelines For Issuance

If a special formula or medical/nutritional product is required, the following guidelines must be followed prior to issuance:

- A prescription is required for all special formulas or medical/nutritional products.
- The special formula or medical/nutritional product prescribed must be currently authorized by the Nebraska WIC program.
- A prescription is good for a maximum of 6 months
- If the WIC CPA has questions regarding the issuance of any special formula or medical/nutritional product, contact a State WIC RD.

Detailed information on issuance requirements for a specific formula can be found in “Formula and Medical Nutritional Product Listing” found in Volume 3, Section D, page 3.

Formulas Designed for Use With Intolerance to Milk/Soy Proteins

For some infants that have an allergy or intolerance to proteins, a hypoallergenic product may be necessary. Hypoallergenic products include:

Protein Hydrolysates

- Are formulas that have the milk proteins broken down (hydrolyzed) into very small pieces.
- Alimentum Advance, Nutramigen LIPIL and Pregestimil are protein hydrolysates.

Elemental Formulas

- Are formulas designed for infants with a more severe allergy/intolerance and are made synthetic amino acids.
- Elemental products include EleCare and Neocate.

Formulas Designed for Use with Protein Intolerance	Prescription/ Documentation	Issuance Procedure
<ul style="list-style-type: none"> • Alimentum Advance (Ross) • Nutramigen LIPIL (Mead Johnson) • Pregestimil (Mead Johnson) • Neocate (SHS) • EleCare (Ross) 	<ul style="list-style-type: none"> • Rx required for infants • Rx required for children ≥ 1 year and women • Rx valid for a maximum of 6 months 	<p>Procedure:</p> <ul style="list-style-type: none"> • Evaluate appropriateness of use • Record previous formulas tried and symptoms of trials in participants record • Issue with appropriate medical condition and prescription <p>Indications for use:</p> <ul style="list-style-type: none"> • When a hypoallergenic formula is indicated (e.g. multiple allergies, intolerance of milk protein and/or soy protein) • With persistent diarrhea, GI disturbances, etc. • Other documented medical conditions as indicated on prescription

Formulas Designed For Use With Premature or Low Birth Weight Infants

These are infant formulas that have been specifically designed to contain extra nutrients for the nutritional management of infants with conditions such as prematurity or low birth weight. Many of these formulas also have higher calorie concentrations per fluid ounce than standard infant formulas to support the rapid growth in low birth weight infants.

Products in this category include, but are not limited to:

- Enfacare LIPIL (Mead Johnson)
- Neosure ADVANCE (Ross)
- Enfamil Premature LIPIL (Mead Johnson)
 - Available in low-iron and iron-fortified and 20 and 24 calorie per ounce concentrations.
- Similac Special Care ADVANCE (Ross)
 - Available in low-iron and iron-fortified and 20 and 24 calorie per ounce concentrations.

22 Kcal/oz Formulas for Premature Infants	Prescription/ Documentation	Issuance Procedure
<ul style="list-style-type: none"> • Enfacare LIPIL (Mead Johnson) • Neosure ADVANCE (Ross) 	<ul style="list-style-type: none"> • Rx required for infants • Rx required for children ≥ 1 year and women • Rx valid for a maximum of 6 months 	<p>Procedure:</p> <ul style="list-style-type: none"> • Evaluate appropriateness of use. • Issue with appropriate prescription <p>Indications for Use:</p> <ul style="list-style-type: none"> • For premature or low birth weight infants. • Other documented medical conditions as indicated on prescription. <p>Product Features:</p> <ul style="list-style-type: none"> • If prepared according to standard mixing directions both products provide 22 calories per fluid ounce of formula. • Both products contain higher levels of protein and some vitamins and minerals than standard infant formula.

20 and 24 Kcal/oz formula for premature infants	Prescription/ Documentation	Issuance Procedure
<ul style="list-style-type: none"> • Enfamil Premature LIPIL (Mead Johnson) <ul style="list-style-type: none"> - 20 & 24 calorie - low iron or iron fortified • Similac Special Care ADVANCE (Ross) <ul style="list-style-type: none"> - 20 & 24 calorie - low iron or iron fortified 	<ul style="list-style-type: none"> • Rx required for infants • State WIC RD approval required • Rx valid for a maximum of 6 months 	<p>Procedure:</p> <ul style="list-style-type: none"> • Approval from a State WIC RD is required before issuing any formula in this category • Document state approval in the participant’s chart • Each participant receiving special formula must be followed up as directed by the State WIC RD <p>Indications for use:</p> <ul style="list-style-type: none"> • For the feeding of growing low birth weight or premature infants when a formula with higher nutrient and possibly calorie concentration is desired. • Other documented medical conditions as indicated on prescription. <p>Availability Note:</p> <ul style="list-style-type: none"> • All formulas in this category come in 2, 3 or 4 oz nursette bottles and may require special ordering.

Special Formulas and Medical Nutritional Products Found in the WIC Computer System

Food packages needed for issuance of most special formulas and medical nutritional products that are approved for use in the Nebraska WIC Program can be found in the WIC computer system.

These food packages can be assigned by the WIC CPA with the appropriate prescription and documentation of a specific medical condition.

	Prescription Documentation	Issuance Procedure
<p>Special Formulas and Medical/ Nutritional Products</p>	<ul style="list-style-type: none"> • Rx required for infants • Rx required for children \geq year of age and women • Rx valid for a maximum of 6 months 	<p>Procedure:</p> <ul style="list-style-type: none"> • Evaluate appropriateness of use • Record previous formulas tried and symptoms of trials in participants record • Issue with appropriate medical condition and prescription <p>Indications for use:</p> <ul style="list-style-type: none"> • Documented medical conditions as indicated on the prescription • Diagnosed medical conditions as reported by client, parent or guardian. • Detailed information on a specific formula can be found in “Formula and Medical Nutritional Product Listing” found in Volume 3, Section D, page 3.

All Other Special Formulas Medical/Nutritional Products

The WIC CPA may receive a prescription for a special formula or medical/nutritional product that is not found in the WIC Computer system.

- Formulas not listed in the Nebraska WIC Computer System may not be approved for use in WIC.
- Some formulas may be approved, however have not had a food package created.
- If a WIC CPA is uncertain as to the approval status of a specific formula or medical/nutritional product for a specific situation, please contact a State WIC RD for assistance.

	Prescription/Documentation	Issuance Procedure
Special Formulas and Medical Nutritional Products Not Listed in WIC Computer System	<ul style="list-style-type: none"> • Rx required for infants, children ≥ 1 year and women • State WIC RD Approval Required • Rx valid for a maximum of 6 months 	<p>Procedure:</p> <ul style="list-style-type: none"> • Approval from a State WIC RD is required before issuing any special formula or medical/nutritional product in this category. • Document state approval in the participant's chart • Each participant receiving special formula must be followed up as directed by the State WIC RD <p>Indications for use:</p> <ul style="list-style-type: none"> • For documented medical conditions as indicated on prescription

Products Designed For The Treatment or Management of Diarrhea

These products are designed only for short-term use under medical supervision and **are not provided by the Nebraska WIC Program.**

Products in this category include, but are not limited to:

- Pedialyte (Ross)
- Infalyte (Mead Johnson)
- Isomil DF (Mead Johnson)