



# Oregon

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**TO:** Healthcare Providers

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**PLEASE REVIEW:** Important Changes to Oregon WIC Documentation Requirements for Medical Formulas and Foods Issuance

**Background:** In August 2009, the WIC food packages will undergo the biggest transformation the program has seen in over 30 years. These changes are based on recommendations from the Institute of Medicine, the 2005 Dietary Guidelines for Americans and the American Academy of Pediatrics. In addition to improved nutrient content, the changes reinforce healthy choices and support WIC's focus on breastfeeding. The food package changes will provide flexibility for WIC participants with qualifying medical conditions requiring medical formulas/foods.

### **Changes for WIC participants requiring medical formulas and/or foods:**

- Participants needing medical formula/foods must have a qualifying medical condition, as determined by a healthcare provider with prescriptive authority in Oregon (examples of qualifying conditions listed on backside).
- Participants can now receive WIC foods in addition to medical formula.
- Healthcare providers now need to complete the **WIC Medical Documentation Form** in order for participants to receive WIC foods. This form will replace current medical prescriptions used by healthcare providers.
- The **WIC Medical Documentation Form** must be completed to issue soy beverage, when medically necessary, for children over one year of age.
- **Please note:** Clients who do not have medical conditions that necessitate special formula or changes in the food package DO NOT need the Medical Documentation Form; they can access WIC services in the usual way.

### **When will this change take place?**

- For participants with current prescriptions on file, medical formula can be

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issued until the expiration date stated on the prescription; starting August 1, 2009 participants will need a completed **WIC Medical Documentation Form** to receive WIC foods in addition to medical formulas.

**Examples of qualifying conditions for issuance of medical formulas/foods:**

- Including, but not limited to: prematurity, low birth weight, failure to thrive, inborn errors of metabolism, gastrointestinal disorders, malabsorption syndromes, immune system disorders, severe food allergies requiring elemental formula, life threatening disorders, disease and medical conditions that impair ingestion, digestion, absorption or the utilization of nutrients that could adversely affect the patient's nutritional status.

**Examples of non-qualifying conditions:**

- Non-specific formula or food intolerance, diagnosed formula intolerance that can be addressed with a WIC-approved formula or managed through the use of one of the other foods WIC offers, personal preference and/or for the purpose of enhancing nutrient intake/managing body weight without an underlying condition.

**Examples of medical formulas:**

- For infants: any formula that is not the current contract formula of Similac Advance, Similac Isomil or Similac Sensitive (e.g. Nutramigen).
- For women and children: Medical formulas/foods (e.g. Pediasure).

**How do I access the form?**

- A copy is attached;
- On-line at [www.oregon.gov/DHS/ph/wic/providers.shtml](http://www.oregon.gov/DHS/ph/wic/providers.shtml); or
- From your local WIC agency/WIC participant.

**How do I return the form?**

- Fax the form to the local WIC clinic; or
- Have your patient return the form to the WIC clinic.

**Questions or Concerns:**

- Visit the Healthcare Provider section on the Oregon WIC Web site [www.oregon.gov/DHS/ph/wic/providers.shtml](http://www.oregon.gov/DHS/ph/wic/providers.shtml);
- Contact your local WIC agency; or
- Contact the state WIC formula specialist, Cheryl Alto, at 971-673-0057.

The Oregon WIC program recognizes this is a new process in authorizing medical formulas and foods. The State and local WIC staff are ready to assist you. It is our hope that our shared patients will benefit not only from improved nutrition, but also from the improvements in coordination of care and communication.

**Enclosure:** *Oregon WIC Medical Documentation Form*