Policy

The mother and infant food packages must agree based on the feeding type assignments. For breastfeeding dyads who are not exclusively breastfeeding, Competent Professional Authorities (CPA) are expected to individually tailor the amount of infant formula based on the assessed needs of the breastfeeding infant and provide the minimal amount of formula that meets, but does not exceed the infant’s nutritional needs.

The local agency can only issue formula or food benefits to the infant when they have been released from the hospital.

Purpose

To increase breastfeeding rates in Georgia through assignment and coordination of food packages for the breastfeeding dyad.

Procedures

I. The CPA must assign feeding type and food packages to a mother and her infant as a unit or pair rather than as two individuals. The feeding types of both mother and infant must match throughout the certification period. For example, an Exclusively Breastfeeding woman with an Exclusively Breastfed infant.

   A. If at any time during the certification period the mother’s or the infant’s feeding type change, the other’s feeding type must be updated to match.

   B. If the mother stops breastfeeding after the infant is older than six months, the CPA must change both the mother’s and infant’s feeding type to fully formula fed.

II. To allow a lactating mother to fully establish her maternal milk supply, the CPA should only assign a formula package to a breastfed infant during the first month, when requested.

III. The local agency should assign partially breastfed infants powder formula packages. However, liquid concentrate formula is allowed, when requested.

   A. The CPA should refer to Estimating Formula Needs in the Food Package Handbook to assist in determining the approximate amount of formula needed based on the infant’s usual breastfeeding habits.

   B. The local agency shall not honor requests for additional formula without an assessment and counseling of the mother/baby breastfeeding dyad. Any problems with breastfeeding should be addressed at this time.

   C. When reissuing the infant’s vouchers, the CPA must take into consideration which, if
any, of the infant’s vouchers have already been redeemed. They must subtract any formula already issued from the total amount of formula required for the month.

IV. When a breastfeeding mother requests formula during a month for which she has already received vouchers, the local agency may issue formula based on the infant’s assessed needs.

A. For a previously exclusively breastfed infant, the CPA must prorate the current month’s package for the number of days/weeks left in the issuance month.

B. For a partially breastfed infant receiving additional formula, the CPA must not issue a combined amount of formula (initial issuance plus additional formula) in excess of the amount allowed for the infant’s new breastfeeding status.

C. The CPA shall not determine the amount of formula the infant can receive based on the food the mother was issued or has already redeemed.

D. The local agency must void and reissue all vouchers previously issued for subsequent months. The new food packages must match the new feeding type for both mom and infant.

E. The CPA must document in the WIC medical record their assessment of the infant’s immediate need of formula.

F. If the assessment does not indicate an immediate need for formula (or additional formula), the local agency must make the food package change effective for the following month.

G. If the mother has not used any of her vouchers for the month, then the local agency may void her current vouchers and re-issue the new food package.

V. The local agency must certify a hospitalized infant receiving human milk and their mother as part of the mother/baby breastfeeding dyad.

A. In most cases, the CPA should certify the breastfeeding mother as “Exclusively Breastfeeding” as no food benefits will be issued to the infant.

B. The CPA should assign the infant, CPA Food Package 290 “Infant in Hospital: Mother/baby breastfeeding dyad”.

Note: Food package 290 contains a tracking voucher with no formula or food benefits. The tracking voucher message encourages the participant to contact their local WIC clinic when the infant is released from the hospital.

C. In cases when the infant is expected to stay in the hospital less than one month and the infant is receiving limited breastmilk in the nursery, the CPA can assign the
mother’s food package based on the amount of breastmilk she is providing to the hospitalized infant.

1. For example, if mom is only providing breastmilk for one feeding per day, the CPA would certify both mother and infant as Some Breastfeeding.

2. The CPA must assign the infant Food Package 290.

3. The local agency will void Voucher code 190 and replace with the new food package when the infant is discharged.

D. If the mother discontinues breastfeeding prior to the infant being discharged from the hospital, the local agency must continue issuing food package 290 to the infant and update the mother’s food package to reflect her new feeding status.

E. Upon release, the CPA must evaluate the “Mother/baby breastfeeding dyad” feeding status and update the “Mother/baby breastfeeding dyad” food package as needed.

Authority

7 CFR 246.10

USDA Breastfeeding Policy and Guidance - July 2016

Food and Nutrition Service (FNS) - WIC Food Packages State Agency Frequently Asked Questions – 3/1/2016

Definitions/Supporting Information

Competent Professional Authority (CPA) – An individual on the local agency staff who is authorized to determine nutritional risk and prescribe supplemental foods. The following individuals may be authorized and trained to serve as a CPA: physicians, nutritionists (bachelor’s or master’s degree in Nutritional Sciences, Community Nutrition, Clinical Nutrition, Dietetics, Public Health Nutrition), registered dietitians, licensed dietitians, registered nurses, and physician assistants (certified by the National Committee on certification of Physicians Assistants or certified by the State medical certifying authority), or State or local medically trained health officials.

Infant Formula – A food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Drug, Food, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.
Matching Mother/Baby Breastfeeding Dyad – The process of thinking of a mother and her infant as a single unit or pair instead of as two separate individuals for the purposes of assigning food packages and feeding methods. An infant and mothers food package is assigned based on the frequency a mother breastfeeds and the amount of supplemental formula needed for the infant.