

Medical Documentation**Policy No. NS- 210.12**

Effective date: October 1, 2016

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Policy

Medical documentation is required prior to the issuance of any authorized non-contract or exempt infant formulas and WIC-eligible nutritionals, and for participants receiving Food Package III. Participants that transfer from another state, within a valid certification period, and require a Food Package III may receive one month of vouchers without written medical documentation.

The local agency must obtain new medical documentation for continued issuance of special formulas and nutritionals at least every six months, with any change in the prescription, at the expiration of the indicated planned length of use, and at every recertification/sub-certification/mid-certification.

Infants being certified as a child in their eleventh month can continue to receive the previously prescribed formula without new medical documentation, until twelve months or their first child food package issuance.

Medical documentation is only valid for 30 days after the date it is signed and dated by the prescribing authority.

Purpose

To ensure program cost incurred from the issuance of non-contract or exempt infant formula and WIC-eligible nutritionals is medically indicated, and necessary to sustain the health and wellbeing of the participant.

Procedures

- I. The Local Agency can accept the [Georgia WIC Medical Documentation Form](#) (MDF) as an original written document, an electronic document, or by facsimile. The GA WIC Medical Documentation Form is the preferred document for medical providers providing medical documentation.
 - A. A physician's prescription pad or medical office letter head may be accepted in lieu of the Georgia WIC MDF.
 - B. Local Agencies may not accept the following forms for medical documentation:
 1. Prescription forms or prescription pads which are pre-printed or pre-stamped with a formula requiring a prescription
 2. Forms or prescription pads containing formula advertising
 3. Prescription pads or forms that include a pre-printed list of formulas from which the

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healthcare provider is expected to choose are not allowed. For example, a prescription form that lists ten (10) common special formulas and one (1) blank space to list other formulas.

- II. Any medical documentation received, including the acceptable alternative forms referenced above, must include the information listed below. Additional details can be found on the [Medical Documentation Content Requirements](#) reference.
 - A. The participant's full name and date of birth
 - B. The complete brand name of the authorized WIC infant formula or nutritional prescribed
 - C. The name and/or ICD-10 code of the qualifying medical condition(s) requiring the issuance of the authorized WIC formula
 - D. The prescribed amount of reconstituted fluid ounces per day
 - E. The length of time the prescribed WIC formula is required by the participant
 - F. The authorized supplemental food(s) appropriate for the qualifying medical condition(s) and any restrictions
 - G. The original signature, date, and contact information of the authorized prescribing health care provider such as physicians (e.g., MD, DO), nurse practitioners (e.g., NP, CPNP, CNP, PNP,) and physician assistants (e.g., PA, PA-C)
- III. A CPA must obtain clarification to complete missing or unclear information provided on the [GA WIC Medical Documentation Form](#) or any alternate form of written medical documentation.
 - A. The CPA may clarify the following information based on parent/caregiver report or per the CPA nutrition assessment:
 - 1. Formula/nutritional history
 - 2. Signs/symptoms that supports the documented diagnosis (i.e. severe allergies/allergic reactions)
 - 3. Product form, flavor, with fiber
 - 4. Historical/previously documented chronic diagnoses available in the medical record or MDF

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5. Food restrictions/NPO (participants may refuse food/formula issuance)
 - B. The CPA must contact the medical provider for clarification of any:
 1. New or undocumented diagnoses
 2. Issuance of supplemental foods
 3. Information provided by a poor historian/unreliable source
 - C. The CPA must document the clarifying information on the current medical documentation, initial and date each change, and depending on the source of the clarification:
 1. Record the name and credentials of the provider or other medical personnel (relaying the information on behalf of the provider) who gave the verbal clarification by each change.
 2. Document the applicable nutrition assessment information, the date it was obtained, and the source where it may be referenced (i.e. "participant also has milk protein allergy - see MDF dated 2/15/2017).
 3. Document the information provided by the parent/caregiver and the name and relationship of the caregiver (i.e. "unflavored verified by mother, Jane Smith, 2/16/17").
 - D. The health care provider must provide a new form if the authorized signature is not included on the medical documentation, is completed using a signature stamp, or if the form was signed by an unauthorized provider. Provider signatures cannot be documented as clarifying information.
 - E. The local agency may issue up to three months of vouchers once the clarifying information has been documented. New medical documentation is not required. The clarified medical documentation may be used for up to 6 months.
- IV. The CPA may accept verbal requests, as the provision of medical documentation, to provide non-contract or exempt infant formulas and WIC-eligible nutritionals until written confirmation is received.
- A. The CPA must promptly document the details of the verbal order on the [Georgia WIC Medical Documentation Form](#) and sign/date the information.
 - B. The CPA must record the complete name and credentials of the authorized prescribing health care provider in the place of his/her original signature.
 - C. The CPA must request written medical documentation of the verbal order from the health

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care provider to be received within two weeks of the initial verbal order.

- D. The local agency can only issue one month of vouchers to a participant with a verbal order. Participants must obtain valid medical documentation prior to any subsequent Issuance of non-contract or exempt infant formulas and WIC eligible nutritionals.

Authority

7 C.F.R. § 246.10(d)

Definitions/Supporting Documentation

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.

Contract Infant Formula – All infant formula (except exempt infant formulas) produced by the manufacturer awarded the infant formula cost containment contract.

Exempt Infant Formula – An infant formula that is intended for commercial or charitable distribution that is represented and labeled for use by infants who have inborn errors of metabolism or low birth weight, or who otherwise have unusual medical or dietary problems (21 CFR 107.3).

Non-Contract Brand Infant Formula – All infant formula, including exempt infant formula, that is not covered by an infant formula cost containment contract awarded by the State agency and is not subject to rebates.

WIC-Eligible Nutritionals – means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible nutritionals include many, but not all, products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C. 360ee(b)(3)).