



7.03 Food Package for Qualifying Conditions and WIC Special Formula/Food Request (SFFR) Questions and Answers

1. Which parts of the SFFR can be updated and initialed by the CPA if the form requires clarification?

- If the following elements of the form are incomplete, please request the health care provider to resend the SFFR:
 - Qualifying Condition
 - Formula Name
 - Provider Name
 - Provider Signature
- For all other fields including amount of formula per day, the CPA can contact the health care provider for verbal clarification. The CPA must document the clarification including date and initials on the original SFFR.

2. Is the yes/no checkbox for comparable formula in Section 2 a required field?

- No, this is not a required field. If the 'No' field is selected or neither are selected, the local WIC agency may not issue a comparable formula.

3. What is the expectation for re-evaluation of the SFFR?

- While Michigan WIC elected to proceed with an extended SFFR duration of up to 12 months to reduce additional burden on health care providers, clients, and local WIC clinics, the intention of the re-evaluation is to provide quality continuity of care.
- Staff should only assign the food package for about 6 months or until the subsequent mid-certification date even if the expiration date is for up to 12 months. This will support policy expectations for re-evaluation by requiring additional food package approval(s) by the appropriate staff and not increase the number of appointments for the family. If the subsequent appointment is the recertification, no additional action is needed. It is not recommended to shorten the expiration date as it will unnecessarily send a notification to the client that their SFFR prescription is expiring.
- The assessment of the formula must be documented in the Care Plan Follow-Up tab or, only if there is no care plan, the Client Notes during each re-evaluation including during a recertification.
- Local agencies may develop a procedure where the re-evaluation is independent of the standard appointment process as long as the re-evaluation is completed and documented.



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4. How do you handle a missed mid-certification appointment or re-evaluation of the SFFR?

- Please follow the process in Policy 8.01, Benefit Issuance:
 - Local agencies must attempt to contact the client at least once prior to issuing additional benefits. The contact can be by voice call, text, email, or other appropriate method determined by the local agency. Contact attempts must be documented in the client/family record. In cases where the attempt to contact is unsuccessful, once documented, the local agency may issue up to three months of benefits when the client's benefits are due.

5. What happens if a special formula is no longer needed or used by the family?

- Per Policy 7.01, Food Package Determination and Customization:
 - After a complete nutrition assessment, a standard food package shall be assigned when the CPA determines no adjustments are necessary to the supplemental foods provided to the client (See Policies 2.01, Certification/Eligibility, 2.13, Nutritional Risk Criteria, and 5.01, Nutrition Services Overview).
- For continuity of care, best practice is to communicate with the health care provider about any changes with the special formula/food package.

6. Does the re-evaluation only apply for SFFRs with a duration of 12 months?

- The re-evaluation is required for prescriptions that are longer than 6 months.

7. When can infant foods be provided to a client over 12 months old?

- Food packages substituting Infants Foods (infant cereal and purees) for breakfast cereal and fruits and vegetables for clients older than 12 months of age is considered a food package for qualifying conditions and must include a WIC formula (See Policy 7.03, Food Package for Qualifying Conditions).

8. Do both pages of the SFFR need to be sent to the provider?

- When providing health care providers with the SFFR, please include the original whole pdf document (both pages) or use this link: [DCH-1326, WIC Special Formula/Food Request form](#). If following up for clarification or sending it back to the provider, it may not be necessary to provide page 2.

9. What is allowable for the "Amount/Ounces per day" field?

- While it is preferable for the health care provider to write a specific prescribed amount to be more individualized, "max"/"maximum" is acceptable and the amount assigned would be the maximum according to client category.



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10. How does duration need to be specified on the SFFR (e.g., 6 months, a specific date)?

- Duration can be listed as a number of months or as a date, not to exceed 12 months, or as max/maximum to be interpreted as 12 months.

11. When can the new SFFR be accepted?

- The new June 2023 SFFR can be accepted as early as June 27, 2023.

12. Are local agencies still able to accept the old SFFR until December 27, 2023?

- Local agencies may continue to accept the previous SFFR form until December 27, 2023, but are unable to utilize the new features of the new form (including approving greater than 6-month duration and comparable formula issuance).

13. What if the old SFFR is received after December 27, 2023?

- If the previous forms are received after December 27, 2023, please treat this like a telephone order and obtain the new form in 2 weeks:
 - Only when necessary, on an individual participant basis, a telephone order to a Competent Professional Authority (CPA) containing all medical documentation requirements may be used. One month of benefits may be issued, with the expectation that the WIC Special Formula/Food Request must be provided to the local agency within two weeks of benefit issuance (Policy 7.03, Food Package for Qualifying Conditions)