

PROCEDURES FOR DELIVERY OF EXEMPT FORMULA, MEDICAL FOODS AND SUPPLEMENTAL FOODS

Purpose:

To ensure the local agency secures required approval prior to issuing checks for exempt formulas, formulas for premature and medically fragile infants or formula changes according to the procedures described in Chapter Four, Section J. Standard contract formulas include **Similac Advance and Gerber Good Start Soy**. All other formula requires prior approval.

Local Agency Responsibilities:

1. Fill out the top portion of the applicable side of the Special Formula Authorization Form.
2. 'X' out the side of the Special Formula Authorization Form that does not apply to the client.
3. Give the form to the client to take to the authorized health care provider. Authorized health care providers are physicians, physician's assistants and nurse practitioners. Local agencies may also provide health care providers with blank authorization forms in advance.
4. For full-term healthy infants, women and children:
The authorized health care provider must completely fill in numbers 1-6 on the form. Forms may be original, facsimile or electronic. A signed prescription or referral may be attached to the form for one month; instead of filling out numbers 1-6 providing all required information is included. When absolutely necessary, on an individual basis, verbal approvals may be substituted for a completed Special Formula Authorization Form provided the date and time of the conversation and the authorized health care provider's name and phone number are documented on the Special Formula Authorization Form **and** a signed Special Formula Authorization Form is received by the clinic and both forms are filed in the Special Formula Authorization Log within two weeks.
5. For premature and/or medically fragile infants:
The authorized health care provider must completely fill in numbers 1-7 on the form. If a prescription, referral or partially completed Special Formula Authorization form is received, one month of checks may be issued. If the form of formula is not specified, concentrated formulas, if available, will be issued for one month. A completed Special Formula Authorization form must be received for further issuance, with the exception of standard contract formulas. Standard contract formula in the form of concentrate may be issued monthly until the form is received.
6. Review the Special Formula Authorization Form to ensure all spaces are completed. (Name of formula requested, length of request and medical reason **must** be on the

form). If any part of the form is not completely filled out, contact the health care provider. Staple the prescription to the form, if necessary.

7. Contact your local agency Registered Dietitian (RD) for approval of the formula and foods, if applicable. If the health care provider has selected the option of referring to the RD to select the appropriate foods, the RD will provide information on the foods to issue. Have the RD sign and date the form. If the local agency RD is not in the office, a verbal approval can be obtained from him or her and documented on the form until the signature can be obtained. The RD's signature must be obtained on the form within two weeks.
8. If the local agency RD is not available, call an ITCA RD for approval. If the health care provider has selected the option of referring to the RD to select the appropriate foods, the RD will provide information on the foods to issue. Document the verbal approval on the form and then email the formula authorization form to ITCA to obtain a RD's signature. ITCA will send the form back with the signature.
9. Following approval, file the signed Special Formula Authorization Form in the Special Formula Authorization Log. If obtaining a verbal approval from a local agency RD who is off-site or from ITCA, the formula may be issued with verbal authorization before the signed form is returned to the local agency. However, the local agency is responsible for filing a signed authorization form in the Special Formula Authorization Log.
10. The CNW will select approved formula and the supplemental foods deemed appropriate by the health care provider.
11. Check to make sure the formula is available at a local authorized ITCA Vendor. If the special formula is not available in your area, call an ITCA RD.
12. Issue the checks to the client.