



Policy 769

Assigning WIC Food Packages

July 1, 2025

POLICY

A competent professional authority (CPA) shall select a participant's food package in accordance with federal regulations and state policy.

PURPOSE

To assure food benefits are appropriate for each participant's health and nutritional needs.

RELEVANT REGULATIONS

7 CFR §246.10—Supplemental Foods

Child Nutrition Act of 1966, Sec. 17(14)3

OREGON WIC PPM REFERENCES

- ◆ [511— Food Benefit Issuance](#)
- ◆ [646— Mid-Certification Health Assessment](#)
- ◆ [650—WIC Transfers/VOC and WIC Overseas Program](#)
- ◆ [655—Homeless Applicants](#)
- ◆ [660-Competent Professional Authority \(CPA\): Requirements](#)
- ◆ [713— Breastfeeding: Use of Supplemental Formula](#)
- ◆ [720— General Information on Formula Use](#)
- ◆ [730— Bid Formula: Use and Description](#)
- ◆ [760—Medical Formulas and Nutritionals](#)
- ◆ [765—Medical Documentation](#)
- ◆ [770—WIC Authorized Foods](#)

TWIST TRAINING MANUAL REFERENCE

Chapter 3, Section 5—Food Packages

OTHER REFERENCES

Food Package Training Module

[NIH: Calcium and Vitamin D Important at Every Age](#)

APPENDICES

Page 769.14	Appendix A	WIC Monthly Standard Food Packages for Children and Adults
Page 769.19	Appendix B	WIC Monthly Standard Food Packages for Infants

DEFINITIONS

Breastfeeding: Breastfeeding is the practice of feeding a parent's breastmilk to their infant(s) on the average of at least once a day.

Breastfeeding Assessment: Collects information related to breastfeeding to determine how breastfeeding is progressing. Refer to policy 713

Competent Professional Authority (CPA): An individual on the staff of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

Nutrition Assessment: A nutrition assessment is the first step in providing quality nutrition services to WIC participants. It is the evaluation of information gathered during the appointment. Information that may include anthropometric measurements, blood work, information about general health and food, and activity habits. This assessment guides the assignment of nutrition risks, nutrition education, community resource referrals, and the tailoring process for the person's food package.

FOOD PACKAGE

Assigned food benefits: The benefits that have been assigned by the CPA to a participant for the certification period.

Authorized foods: The brands and types of foods a participant may purchase when a food is specified on their food benefit balance.

Food benefits: The foods a participant receives on WIC for a selected month. Depending on a participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and /or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a "Fruit and Vegetable Benefit" or "FVB").

Food benefit balance: The unspent issued food benefits which are available for purchase by a cardholder.

Food package: A participant's combined food benefits for a selected month.

Food package assignment: Assigned and CPA authorized food package for a participant in the WIC data system.

Food package issuance: Sending the assigned food package to the eWIC banking contractor to be accessed by the cardholder at the store.

Food package tailoring: This is the process of making changes to a participant's standard food package to meet a participant's nutrition needs and food preferences. Tailoring is done collaboratively with the participant.

Issued food benefits: The benefits that have been sent to the eWIC banking contractor which are/will be available for purchase by a cardholder.

Maximum food package: A food package that contains the maximum amount of each of the foods authorized by WIC regulations for the participant category.

Partial food package: A partial food package contains approximately one-half of the participant's food package.

Participant designation: Indicates the three descriptions that can be applied to a participant in the WIC data system to alter the maximum foods available for a participant's category. They include "Special", "Twins or more", and some breastfeeding "WBN/IBN".

Medical Formula: A formula in which the composition meets the special nutrient requirements of infants, children or adults diagnosed with various medical diseases and conditions. For infants, the medical formula may not meet the complete nutrient specifications defined by the Food and Drug Administration (FDA) in the Infant Formula Act. Also known by the regulatory term, "exempt infant formula."

Standard food package: The standard food package is based on the participant category. It provides the maximum amount of foods allowed for the participant category. The standard food package is automatically assigned by the WIC data system.

Supplemental foods: Foods prescribed by the WIC federal regulations containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding, and postpartum participants, infants and children and foods that promote the health of the population served by the program, as indicated by relevant nutrition science, public health concerns, and cultural eating patterns. [Child Nutrition Act of 1966, Sec. 17(14)].

WIC-eligible nutritionals: Enteral products that are specifically formulated to provide nutrition support for children over 1 year of age and adults with a diagnosed medical condition, when the use of conventional foods is precluded, restricted, or inadequate. Also known as WIC-eligible medical foods. Nutritionals may be nutritionally complete or incomplete (e.g. Duocal). They must serve the purpose of a food, provide a source of calories and one or more nutrients, and be designed for enteral digestion via an oral or tube feeding.

PARTICIPANT CATEGORY

Child: A person from the 13th month of age to the month of their fifth birthday.

Fully breastfeeding infant: A breastfeeding infant who is up to one year of age and does not receive infant formula from WIC.

Fully breastfeeding participant: A breastfeeding participant who is up to one year postpartum, whose infant does not receive formula from WIC.

Infant: A person who is 12 months old or younger.

Mostly breastfeeding infant: A mostly breastfed infant who is up to one year of age and receives infant formula from WIC up to the maximum provided for a mostly breastfed infant.

Mostly breastfeeding participant: A breastfeeding participant who is up to one year postpartum, whose infant receives infant formula from WIC up to the maximum provided for a mostly breastfeeding infant.

Non-breastfeeding infant: An infant who is not breastfeeding and is up to one year of age and receives infant formula from WIC.

Non-breastfeeding participant: A participant who is not breastfeeding and is less than 6 months postpartum.

Pregnant person: a person with one or more embryos or fetuses in utero.

Post-partum non-breastfeeding person: A person after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion) who is not breastfeeding their infant.

Some breastfeeding infant: A breastfeeding infant who is up to one year of age and receives more than the maximum amount of infant formula from WIC provided for a mostly breastfeeding infant, but less than the amount provided for a non-breastfeeding infant.

Some breastfeeding participant: A breastfeeding parent who is up to one year postpartum, whose infant receives more than the maximum amount of infant formula from WIC provided for a mostly breastfeeding infant, but less than the amount provided for a non-breastfeeding infant.

BACKGROUND

WIC food packages supplement participants' diets and nutrition needs. WIC food packages target key nutrients to support the special nutrition needs of pregnant, postpartum, breastfeeding adults and the growth and development of children. The nutrients provided by the food, supplement the participants' diets and help meet but are not intended to provide all of the participants' nutrient needs. WIC staff must be a Competent Professional Authority (CPA) to assign food packages. Refer to policy 660 for CPA qualifications.

SECTION LIST

Food Package Background

Assigning Food Packages

Breastfeeding Participants Food Package

Infant Food Package

Specific Food Details

Special Food Packages and Medical Formula

Specific Circumstances

PROCEDURE

Food Package Background

Standard food packages

- 1.0 The WIC data system automatically defaults to a standard food package. Standard food packages provide participants with the most commonly requested combination of foods. The standard food package provides a maximum monthly allowance for the participant category. Oregon's standard food package includes basic food substitutions for children and adults: one pound of cheese instead of three quarts of milk, one quart of yogurt instead of one quart milk, and \$3 FVB instead of 64 ounces of juice. Refer to Appendices A and B for specific information about food packages.
 - The WIC data system doesn't automatically assign a standard food package for partially breastfed infants or participants on medical formula.

Partial food packages

- 2.0 For new and reinstated participants receiving food benefits on or after the 20th of the month, issue the partial food package. A partial food package contains approximately one-half of the participant's food package. At the beginning of the following month, the participant will have a full set of food benefits available.

Maximum quantities and allowable foods

- 3.0 Participants are eligible for specific quantities of foods based on their WIC category and designation (special, IBN/WBN, twins or more). The allowed foods, maximum quantities, and allowable substitutions can be found in Appendices A, B, and C.

Monthly allowances

- 4.0 Participants are entitled to the full maximum monthly allowances of all supplemental foods. All food packages must be made available to participants if medically or nutritionally warranted. The provision of less than the maximum monthly allowance of supplemental foods to an individual WIC participant is only appropriate when:
- Medically or nutritionally warranted (e.g. to eliminate a food due to a food allergy)
 - A participant refuses or cannot use the maximum monthly allowances
 - The quantities necessary to supplement another program's contribution to fill a medical prescription would be less than the maximum monthly allowances
 - A participant is new or being reinstated after the 20th of the month, in which they would be assigned a partial food package
 - Partially breastfed infants, see policy ♦ [713—Breastfeeding: Use of Supplemental Formula](#).

Assigning Food Packages

CPA Role

- 5.0 Food package assignment is the responsibility of the CPA. After the CPA completes a nutrition assessment, they can assign a food package other than the standard food package per category, if warranted. A CPA must be involved with any change to a participant's food package, including a breastfeeding infant requesting formula. Refer to policy 713 for breastfeeding assessment and documentation. The CPA documents the desired food package and modifications made in the participant's WIC data system record. TWIST Manual, Chapter 3, Section 6-Food.

A local agency may allow clerical staff to change the form of food provided, but not the type of food, once clerical staff complete the Food Package training module and attend WIC's data system training.

Changes include:

- Bottled juice to frozen juice
- \$ FVB back to juice

- Regular cow milk to evaporated or dry milk
- Concentrate formula to powder
- Powder formula to concentrate
- Ready to feed formula isn't an allowable change as there are CPA required assessments and documentation.

Food Package Education

- 6.0 Offer food package education at each certification and recertification appointment. Education needs to include the maximum monthly food quantities outlined in regulation; CPAs must review participant benefit list and Oregon's WIC food list to inform participants of how to spend the Maximum Monthly Allowance for their participant category. CPAs must explain that adult and child participants may request more milk in place of their cheese and/or yogurt benefit(s) and juice in place of the \$3 FVB. CPAs must also review food substitutions that are available to accommodate the participant's special dietary needs and cultural and personal preferences.

Food Package Tailoring

- 7.0 The CPA will collaborate with the participants to modify or tailor the standard food package. Consider any special dietary needs, food allergy or intolerance, cultural and personal preferences, housing/living conditions, or situations where the participant refuses or can't use a food item.
- Review any need for substitutions, reductions, or elimination of foods with the participants. Substitution options are outlined in Appendix A.
 - Refer to the WIC Nutritionist to make food substitutions for a participant on a specialized food package.

Documentation

- 8.0 Document the food package education provided in the WIC data system. Documenting the following way means that the certifier covered all the requirements listed under the food package education section and that tailoring occurred per participant preference.
- **Nutrition Education (NE) Topic dropdown:** Food package tailoring and maximums
 - Progress Note documentation is to be used only when tailoring occurs due to a reason other than participant preference, such as a medical documentation form.

Breastfeeding Participants Food Package

Fully breastfeeding participant food package

- 9.0 The food package for the fully breastfeeding participant should be issued in any month during which the breastfeeding participant's infant doesn't receive

supplemental formula from WIC. Participants can receive this food package up through the month of the infant's first birthday.

Issue the Fully Breastfeeding Food Package for the following participants:

- Fully breastfeeding participants whose infants do not receive formula from the WIC Program.
 - Participants mostly breastfeeding multiple infants.
 - Pregnant participants who are also fully or mostly breastfeeding an infant.
- 9.1. A participant fully breastfeeding multiple infants is issued a food package equivalent to one and a half times the fully breastfed food package.
- 9.2. When a fully breastfeeding participant's status changes, issue the food package appropriate for the participant's new status. For example, if the fully breastfeeding participant receives supplemental formula from WIC, their status changes to mostly breastfeeding or some breastfeeding.

Partially breastfeeding parent participant food packages

- 10.0 The food package that a partially breastfeeding parent participant receives is determined by the amount they breastfeed.

Mostly Breastfeeding vs. Some Breastfeeding

- 11.0 Mostly Breastfeeding: Issue the mostly breastfeeding food package to a participant who is mostly breastfeeding and is supplementing with a limited amount of infant formula received from WIC. Limited to the first year of postpartum. See Appendices A & B.
- Issue the Mostly Breastfeeding food package to a participant pregnant with two or more babies.
- 12.0 Some breastfeeding: The age of the infant and the quantity of formula received from WIC determines the food package for a some breastfeeding parent. This would be a participant who is doing some breastfeeding, but mostly formula feeding. (see Appendices A & B).
- Infant < 6 months old: Issue the Postpartum food package when a partially breastfed infant receives a food package with a quantity of formula that exceeds the amount listed in Appendix B for the mostly breastfed infant. The partially breastfeeding participant is eligible to receive the postpartum food package through the month the infant turns six months of age.
 - Infant 6 -11 months old: If the breastfed infant receives a food package with a quantity of formula that exceeds the amount listed in Appendix B for the mostly breastfed infant, the some breastfeeding parent participant is no longer eligible to receive a food package. However, they continue to receive breastfeeding education and support, nutrition education, and other WIC services.
- 13.0 When a participant discontinues breastfeeding an infant over six months of age, no food benefits will be issued.

Breastfeeding participant becomes pregnant

- 14.0 If a breastfeeding participant becomes pregnant, they must be reinstated and certified as a pregnant participant. If they are fully or mostly breastfeeding, they receive the fully breastfeeding food package until the breastfed infant's first birthday.

Infant Food Package

Infants 6-11 months

- 15.0 Infants 6-11 months receive infant cereal, baby food fruits & vegetables and if fully breastfed, baby food meat as well.

Infants 6-11 months - Fruit and vegetable benefit

- 15.1. Infants receive 128 oz. of baby food fruits & vegetables starting at 6 months. After the CPA assesses the infant as developmentally ready and the parent/caregiver is interested, the CPA can offer to replace half **or** all the baby food with a fruit and vegetable benefit (FVB).
- The 128 oz. of baby food fruits & vegetables can either be replaced with:
 - \$11 FVB and 64 oz. of baby food **or** \$22 FVB.
 - When the baby food is replaced with a FVB, provide and document nutrition education that addresses the topics below.
- 15.2. Specific nutrition education topics must be covered and documented before assigning the infant FBV for the infant's 6th month or later food package.
- Provide the parent or caregiver with nutrition education that addresses safe food preparation, fruit and vegetable storage techniques, and the developmental readiness to the progression of infant feeding practices. This includes offering finger foods and foods with more texture. The purpose of this education is to ensure infants will have their nutritional needs met in a safe and effective manner.
 - Document the nutrition education provided in one of the following ways in the WIC data system:
 - **NE Topic dropdown** – preferred method. Choose one or more of these topics:
 - Infant FVB – this means that the certifier covered **ALL** the required topics listed above.
 - Combination of topics: Finger foods/Progress texture or Feeding Guide for Age **and** Food Safety or Homemade Baby Foods
 - **Progress Notes** – An alternative is to record a narrative of the education provided during the appointment in this section.
- 15.3. **NOTE:** If baby food has already been issued for the 6-11 month period and if any of the containers of baby food fruit and vegetable benefits have been spent, then only benefits for future months can be changed. Participants

cannot return purchased baby foods to the WIC clinic to exchange for the infant FVB.

Infants in the month of their first birthday

- 16.0 Infant foods and/or formula must be provided until the first birthday. An infant food and/or formula package will automatically be provided through the end of the month of the first birthday.
- On or after the participant's first birthday, if none of the issued infant's foods and/or formula for the month have been spent, the CPA may change the food package to a child 12-23 month food package if this better meets the needs of the child.

Specific Food Details

Milk Type-Children 12-23 months

- 17.0 WIC provides whole milk and offers whole milk or lowfat yogurt to children 12-23 months of age. Fat free, 1% or 2% milk and nonfat yogurt is allowed in limited circumstances based on a full nutrition assessment. Participant preference is not an allowed justification for the issuance of lower fat milks or nonfat yogurt.

After completion of a full nutrition assessment, the CPA may approve issuance of lower fat milks or nonfat yogurts for children 12-23 months of age based on at least one of the following:

- Assignment of Risk 115 High Weight for Length. No additional documentation is required when this risk is assigned. Presence of this risk, however, does not require the issuance of nonfat, 1% or 2% milk or nonfat yogurt.
- Participant trending toward overweight based on CPA assessment and/or consultation with the child's health care provider. Document justification in progress notes and reassess at each certification. Presence of trending does not require the issuance of nonfat, 1% or 2% milk or nonfat yogurt. Parent or caregiver expresses concerns about a family history of overweight, cardiovascular disease, or high cholesterol. Document justification in progress notes.

Milk Type-Participants two years and older

- 18.0 WIC provides fat free and 1% milk to adults and children two years and older. 2% milk is allowed in limited circumstances. Participant preference is not an allowed justification for issuance.

After a full nutrition assessment has been completed, the CPA may approve the issuance of 2% milk instead of fat free and 1% milk for adults and children two years and older based on at least one of the following:

- Assignment of Risk 101 Underweight (adults), 103 Underweight or At Risk of Underweight (children), 131 Low Maternal Weight Gain, 134 Failure to Thrive. No additional documentation is required when these risks are assigned. Presence of these risks does not, however, require issuance of 2% milk.

- Participant trending toward underweight based on CPA assessment and/or consultation with the participant's health care provider. Document justification in progress notes and reassess at each certification. The presence of trending alone does not require the issuance of 2% milk.
- Participant is at risk of inadequate intake of calcium or vitamin D. Document justification in progress notes and reassess at each certification.
- Support transition from whole or 2% milk to fat free or 1% milk at two years of age or as a trial for new participants who have never used lower fat milk. Assigned by CPA for one to two months. Document justification and the plan for transitioning to fat free or 1% in progress notes.
- For children participants, a parent or caregiver expresses concerns about a family history of underweight. For adult participants, concern about a personal history of underweight or low weight gain in pregnancy is expressed. Document justification in progress notes.

19.0 Adults and children over the age of two, must have medical documentation with a qualifying condition and be issued a WIC formula in order to receive whole milk.

Special Food Packages and Medical Formula

Special food packages

20.0 When the use of conventional foods or formulas does not address special nutritional needs, special food packages are available for adults, infants, and children who have a documented qualifying condition that requires the use of:

- infant formula,
- special medical formula, or
- nutritional formula plus special food package changes (e.g. infant foods for a child or adult)

See Appendix C for requirements.

Allowable formulas

20.1. For allowable formulas and information on formula use, refer to:

- ◆ [713 – Breastfeeding: Use of Supplemental Formula](#)
- ◆ [720 – General Information on Formula Use](#)
- ◆ [730 – Bid Formula: Use and Description](#)
- ◆ [760 – Medical Formulas](#)

Medical Documentation

21.0 Medical documentation is required for both the formula and the foods in food packages of adults, infants, and children who require medical formula. See ◆ [765—Medical Documentation](#) for medical documentation requirements.

22.0 When a health care provider determines that infant foods (infant cereal, baby fruits and vegetables) are contraindicated based on a medical condition, infants can receive the maximum formula amount that a 4-month-old infant would receive instead of the infant foods.

- Medical documentation is also required to provide the maximum infant formula for infants over 6 months. Refer to Appendix B, 6 through 11 Months listed for non-breastfed infants on Medical Formula or Nutritionals.

Specific Circumstances

Homelessness or Limited storage/refrigeration

23.0 For participants living in a homeless facility, refer to ♦ [655—Homeless Applicants](#), when determining if it is appropriate to issue food to the participant. Provide the maximum food package that will be safe and sanitary as per the guidance below.

- For limited storage, consider:
 - suggesting milk be purchased more frequently or in half gallons rather than gallons
 - offering evaporated milk or powdered milk
- When no refrigeration or freezer is available:
 - you may suggest buying quarts of milk or issue powdered milk, evaporated or shelf-stable soy and plant beverages
 - suggest substituting the eggs for peanut or nut butter, canned beans or dry beans, or peas or lentils
 - ask the participant if storing cheese is feasible
- If safe water is not available:
 - ready-to-feed formula may be appropriate instead of powdered formula (document reason in participant's record)
 - suggest 64 oz. plastic bottles of juice instead of frozen juice

Issuing additional foods

24.0 Additional food(s) can be issued to a participant, but the total quantity of foods provided for the month cannot exceed the maximum amount allowed for the participant category.

When a participant has a category change, their current and future months benefits will change (increase or decrease) to match their new category, taking into account any previously spent benefits. This change happens at the time of their category change. They do not keep the remainder of their current month's unspent benefits that are over the max for their new category. Refer to ♦ [561—Program Integrity: Replacement of Food Benefits](#).

- **Example 1:** A participant requests only 1 gallon of milk for the month. If they later call and ask for more milk, they will only be issued the maximum amount of milk for their category.
- **Example 2:** A mostly breastfeeding infant received a formula package with two cans of formula for a month, but changes to not breastfeeding. The food package will be changed to the new maximum formula amount for a fully formula fed infant. Any formula previously spent will not be reissued.
- **Example 3:** After a pregnant participant delivers, if the baby is only formula feeding, the non-breastfeeding postpartum participant's category is changed to postpartum to enroll the baby as formula fed and issue formula. They are recertified to postpartum and lose any of their extra pregnant participant benefits that were unspent in the current month.
- **Example 4:** If a fully breastfed infant 6 through 11 months is changing from fully breastfeeding to mostly breastfeeding or not breastfeeding, the WIC data system will remove any unspent baby food meat and reduce infant cereal.

25.0 Exception: There is one exception when a participant is able to receive the remainder of the unspent benefits for the month. If a participant has changed from a participant fully breastfeeding or mostly breastfeeding an infant to not breastfeeding and is more than six months postpartum, the non-breastfeeding postpartum participant is terminated, but keeps the remainder of their breastfeeding benefits for the current month. All future food benefits are removed.

Hospitalized or institutionalized participants

26.0 If a participant is in the hospital, long term care facility or an institution, a WIC food package cannot be provided until discharged, since the institution is responsible for feeding the patient. If an infant is with their parent who is staying in a residential treatment center, see ♦ [655—Homeless Applicants](#) for an exception which allows the infant to receive infant foods and infant formula.

Participants transferring from out of state

27.0 If a participant is transferring in from another state, Oregon food benefits can be issued if they did not use the food benefits for the current month. Food benefits can be reissued when any food benefits they received are brought in for replacement with Oregon food benefits. For more information, refer to ♦ [650—WIC Transfers/VOC and WIC Overseas Program](#).

If you need this in large print or an alternate format, please call 971-673-0040.

This institution is an equal opportunity provider.

POLICY HISTORY

Date	* Major Revision, Minor revision
12/7/2018	Revision
1/4/2019	Revision
6/28/2019	Major Revision
1/8/2021	Major revision
10/26/2022	Minor revision (jarred baby food)
8/3/2023	Revised
4/01/2025	Major Revision

The date located at the top of the policy is the implementation date unless an “effective date” is noted on the policy. Policies will become compliance findings 6 months from the implementation date.

Release notes can be found in the corresponding document on the [Policy and Procedure Manual page](#).

***Major Revisions:** Significant content changes made to policy.

Minor Revisions: Minor edits, grammatical updates, clarifications, and/or formatting changes have occurred.

Date of Origin: Date policy was initially released

APPENDIX A

WIC Monthly Standard Food Packages for Children

Foods	CHILDREN	
	Children 12-23 months	Children 24-60 months
Fruits and Vegetables (fresh, frozen or canned)	\$29	\$29
Cereal	36 oz.	36 oz.
Whole grains (whole wheat bread, whole wheat or corn tortillas, oatmeal, whole wheat pasta, bulgur, or brown rice)	24 oz	24 oz
Milk (g)(h)(i)(j)(k)	8 qt. [2 gal]	10 qt. [2.5 gal]
Yogurt (k)	32 oz.	32 oz.
Cheese (i)	1 lb.	1 lb.
Eggs (l)	1 dozen	1 dozen
Beans (dry or canned) or peanut butter	1 lb. dry beans, or (4) 15-16 oz. canned beans OR 18 oz. PB	1 lb. dry beans, or (4) 15-16 oz. canned beans OR 18 oz. PB
Fish – canned tuna, salmon or sardines	6oz	6 oz

WIC Monthly Standard Food packages for Adults

Foods					
	Pregnant	Mostly Breastfeeding participant (up to 1 year postpartum), and Pregnant participants with twins (a)	Postpartum Non-breastfeeding participants (up to 6 months postpartum) and Some Breastfeeding (up to 6 months postpartum)(d)	Fully Breastfeeding Participant (up to 1 year post-partum), Mostly breastfeeding participant with twins or more, and Pregnant participant who is also fully or mostly breastfeeding an infant(b)	Participant who is Fully Breastfeeding Multiple Infants (Odd Month / Even Month)(c)
Fruits and Vegetables (fresh, frozen or canned)	\$50	\$55	\$50	\$55	\$84/81
Cereal	36 oz.	36 oz	36 oz.	36 oz.	54 oz.
Whole grains (whole wheat bread, whole wheat or corn tortillas, oatmeal, whole wheat pasta, bulgur, or brown rice)	48 oz	48 oz	48 oz	48 oz	72 oz
Milk (g)(h)(i)(j)(k)	12 qt. [3 gal]	12 qt [3 gal]	12 qt. [3 gal]	12 qt. [3 gal]	17 qt. [4.25 gal]
Yogurt (k)	32 oz.	32 oz	32 oz.	32 oz.	32 oz.
Cheese (i)	1 lb.	1 lb.	1 lb.	1 lb.	2 lb.
Eggs (l)	1 dozen	1 dozen	1 dozen	2 dozen	3 dozen

Beans (dry or canned) and/or peanut butter	1 lb. dry beans or (4) 15-16 oz. canned beans AND 18 oz. PB (m)	1 lb. dry beans, or (4) 15-16 oz. canned beans AND 18 oz. PB (m)	1 lb. dry beans, or (4) 15-16 oz. canned beans OR 18 oz. PB	1 lb. dry beans or (4) 15-16 oz. canned beans AND 18 oz. PB (m)	2 lb. dry beans, or (8) 15-16 oz. canned beans AND 2 jar/1 jar 18 oz. PB (m)
Fish – canned tuna, salmon or sardines	10 oz	15 oz.	10 oz	20 oz.	30 oz.

Breastfeeding Food Packages:

- (a) The mostly breastfeeding food package is to be issued to mostly breastfeeding participants and participants pregnant with 2 or more fetuses.
- (b) The fully breastfeeding food package is to be issued to 3 categories: fully breastfeeding participants whose infants do not receive formula from the WIC program; participants who are partially breastfeeding multiple infants; and pregnant participants who are also fully or mostly breastfeeding an infant.
- (c) Participants fully breastfeeding multiple infants receive a food package that is 1.5 times the fully breastfeeding food package. To provide a maximum food package, quantities will be averaged over 2 months (Month 1 and Month 2) when the packaging of the foods does not accommodate the 1.5 times amount.
- (d) The food package a partially breastfeeding participant receives is determined by the amount they are breastfeeding. The adult's category and the infant's category must match for each to receive the appropriate food package. If an infant is "mostly breastfed" per Appendix B, then the adult participant is considered mostly breastfeeding. A mostly breastfeeding participant is mainly breastfeeding with some formula supplementation during the 1st year postpartum.

For a participant who is doing some breastfeeding, but whose infant is receiving mostly formula, the age of the infant and the quantity of formula received from WIC determines the food package (See Appendix B for specific quantities):

- If a partially breastfed infant less than 6 months of age receives a food package with a quantity of formula that exceeds the amount listed in Appendix B, until the infant turns 6 months of age, the partially breastfeeding participant is eligible to receive the some breastfeeding food package which includes the same foods as the non-breastfeeding participant.
- If the partially breastfed infant is 6-12 months, but receives a food package with a quantity of formula that exceeds the amount listed in Appendix B for the mostly breastfeeding infant, the some breastfeeding participant is no longer eligible to

receive a food package, but continues to receive breastfeeding education and support, nutrition education and other WIC services.

Juice:

- (e) Juice substitution: \$3 FVB may be substituted for 1-64 fl. oz. juice or 1-11.5-12 oz. frozen juice.
- (f) Juice substitution: Participants who are fully breastfeeding multiple infants may substitute Month 1 \$6 FVB by receiving 2- 64 fl oz juice or 2-11.5-12 oz. frozen juice and may substitute Month 2 \$3 FVB by receiving 1 – 64 fl oz juice or 1 – 11.5-12 oz. frozen juice.

Milk and Cheese:

- (g) Whole milk is the standard type of milk allowed for 1 year old children (12 through 23 months). Lower fat milks (fat free and 1%) are the standard types allowed for adults and children $\geq$ 24 months of age.
- (h) Milk substitutions: When a combination of different milk forms is provided, the full maximum monthly fluid milk allowance must be provided.

Lactose-free milk: may be substituted for milk on a quart for quart basis up to the total maximum allowance for milk.

Evaporated milk: may be substituted at the rate of 16 fluid ounces of evaporated milk per 32 fluid ounces of fluid milk or a 1:2 fluid ounce substitution ratio.

Dry milk: may be substituted at an equal reconstituted rate to fluid milk.

Soy and plant beverage : may be substituted for milk on a quart for quart basis up to the total maximum allowance for milk.

- (i) Cheese: May be substituted at the rate of 1 pound cheese for 3 quarts milk. Children, pregnant, partially breastfeeding and postpartum adults can receive no more than 1 pound of cheese per month. Fully breastfeeding adults and adults breastfeeding multiples can receive a maximum of 2 pounds of cheese each month.
- (j) Tofu: May be substituted at the rate of 16 oz. tofu for 1 quart milk. Tofu may replace milk on a quart for quart basis up to the maximum milk benefit
- (k) Yogurt: If yogurt is not desired, it can be replaced with 1 quart of milk. The rate of substitution is 1 quart (32 oz.) of yogurt for 1 quart milk. The monthly standard food package for adults and for children automatically includes 1 quart yogurt. Children 12-23 months automatically receive whole milk yogurt, but they can swap this with lowfat milk yogurt. Adults and children 2 and older receive lowfat or nonfat yogurt. The monthly maximum amount of yogurt is 2 quarts.

Eggs:

(l) Each 1 dozen eggs may be substituted with 16 oz. of dry beans or 4 cans of 15-16 oz. canned beans or 18 ounces of peanut butter.

Beans and Peanut Butter:

(m) Adults who receive both beans and peanut butter have the option of replacing the 18 ounces of peanut butter with 16 oz. of dry beans or 4 cans of 15-16 oz. canned beans. Peanut butter may be substituted with 16-18 ounces of nut and seed butters at the grocery stor

APPENDIX B

WIC Monthly Standard Food Packages for Infants

Assess the amount of breastfeeding, the breastfeeding assessment drives the participants' category, and therefore the food package selection to assign the appropriate number of cans. Refer to Policy 713 Breastfeeding: Use of Supplemental Formula.

When the infant is not fully breastfed, the infant food package provides iron-fortified bid brand infant formula. To maximize the number of eligible participants served, the Oregon WIC program has a policy of “**no exception**” to the standard bid formulas. Other than the current standard infant bid formula, no other standard infant formulas are allowed.

If an infant needs a medical formula or WIC eligible Nutritional, refer to Appendix C: WIC Monthly Food Packages for Special Adults, Infants and Children for additional information.

The infant period is divided into 0-3 months, 4-5 months and 6 through 11 months. See the tables below for the maximum amount of formula and food allowed for an infant's age and amount of breastfeeding.

Infants 0-3 months

Foods	Fully Breastfed	Mostly Breastfed	Some Breastfed (c)	Non-Breastfed
Formula	0-3 months: None needed	0-3 months: Bid formula or medical formula (a): 1 can up to 435 fl. oz. reconstituted powder (b) (e.g. 1 to 4 cans Similac Advance) 388 fl. oz. reconstituted liquid concentrate 384 fl. oz. ready-to-feed	0-3 months: Bid formula or medical formula (a): 436 up to 776 fl. oz. reconstituted powder (b) (e.g. 5 to 8 cans Similac Advance) 389 to 728 fl. oz. reconstituted liquid concentrate	0-3 months: Bid formula or medical formula (a): 870 fl. oz. reconstituted powder (b) (e.g. 9 cans Similac Advance) 823 fl. oz. reconstituted liquid concentrate 832 fl. oz. ready-to-feed

			385 to 763 fl. oz. ready-to-feed	
--	--	--	----------------------------------	--

(a) Medical formulas require medical documentation.

(b) Reconstituted fluid ounce is the form prepared for consumption as directed on the container.

(c) A “some” breastfeeding infant receives more formula than the mostly breastfed infant and up to the equivalent of one can powder less than a non-breastfed infant (or less 3 cans concentrate or less 3 cans ready-to-feed.)

Infants 4-5 months

Foods	Fully Breastfed	Mostly Breastfed	Some Breastfed (c)	Non-breastfed
Formula	4-5 months: None needed	4-5 months: Bid infant formula or medical formula (a): 1 can up to 522 fl oz. reconstituted powder (b) (e.g. 1 to 5 cans Similac Advance) 460 fl. oz. reconstituted liquid concentrate 474 fl. oz. ready-to-feed	4-5 months: Bid infant formula or medical formula (a): 523 up to 866 fl. oz. reconstituted powder (b) (e.g. 6 to 9 cans Similac Advance) 461 to 806 fl. oz. reconstituted liquid concentrate	4-5 months: Bid infant formula or medical formula (a): 960 fl. oz. reconstituted powder (b) (e.g. 10 cans Similac Advance) 896 fl. oz. reconstituted liquid concentrate 913 fl. oz. ready-to-feed

			475 to 800 fl. oz. ready-to-feed	
--	--	--	----------------------------------	--

(a) Medical formulas require medical documentation.

(b) Reconstituted fluid ounce is the form prepared for consumption as directed on the container.

(c) A “some” breastfeeding infant receives more formula than the mostly breastfed infant and up to the equivalent of one can powder less than a non-breastfed infant (or less 3 cans concentrate or less 3 cans ready-to-feed.)

Infants 6 through 11 months

All infants 6 through 11 months receive infant cereal and baby food fruits and vegetables. Fully breastfed infants receive baby food meat. For the 6-11 month food benefits, after a full assessment and appropriate education is provided, infants may replace either half or all of the baby food fruits and vegetables in their food package for a cash value fruit and vegetable benefit. (See 4.1 for details.) Infants who are not fully breastfed receive infant formula based on how much they are breastfeeding.

Foods	Fully Breastfed	Mostly Breastfed	Some Breastfed (c)	Non-breastfed	
Formula	6 through 11 Months: None needed	6 through 11 months: Bid Infant Formula OR Medical Formula (a) with infant foods: 1 can up to 384 fl. oz. reconstituted powder (b)(e.g. 1 to 4 cans Similac Advance) 315 fl. oz. reconstituted liquid concentrate 338 fl. oz. ready-to-feed	6 through 11 months: Bid Infant Formula OR Medical Formula (a) with infant foods: 385 up to 602 fl. oz. reconstituted powder (b) (e.g. 5 to 6 cans Similac Advance) 316 to 546 fl. oz. reconstituted liquid concentrate 339 to 544 fl. oz. ready-to-feed	6 through 11 months: Bid Infant Formula OR Medical Formula (a) with infant foods: 696 fl. oz. reconstituted powder (b) (e.g. 7 cans Similac Advance) 630 fl. oz. reconstituted liquid concentrate 643 fl. oz. ready-to-feed	6 through 11 months: Bid Infant Formula OR Medical Formula (a) Without infant foods, (infant foods are contraindicated based on medical condition)(d) 960 fl. oz. reconstituted powder (b) (e.g. 11 cans NeoSure) 896 fl. oz. reconstituted liquid concentrate 913 fl. oz. ready-to-feed
Infant Cereal	16 oz.	8 oz.	8 oz.	8 oz.	N/A
Baby Food Fruits and Vegetables	128 oz. (e)	128 oz. (e)	128 oz. (e)	128 oz. (e)	N/A

Foods	Fully Breastfed	Mostly Breastfed	Some Breastfed (c)	Non-breastfed	
Baby Food Meat	40 oz. (g)	N/A	N/A	N/A	N/A

(a) Medical formulas and Nutritionals require medical documentation.

(b) Reconstituted fluid ounce is the form prepared for consumption as directed on the container.

(c) A “some” breastfeeding infant receives more formula than the mostly breastfed infant and up to the equivalent of one can powder less than a non-breastfed infant (or less 3 cans concentrate or less 3 cans ready-to-feed.)

(d) *Medical documentation is required to provide the maximum infant formula over 6 months in lieu of infant foods.*

(e) 128 oz. baby food fruits & vegetables is 32 –4 oz. containers. The 128 oz. of baby food may be replaced with either a

- \$11 fruit and vegetable benefit plus 64 ounces of baby food fruits and vegetables, or
- \$22 fruit and vegetable benefit

(g) 40 oz. baby food meat is 16 – 2.5 oz. containers.

APPENDIX C

WIC Monthly Food Packages for Special Adults, Infants and Children

- 1.0 This food package is reserved for adults, infants and children who have a documented qualifying condition that requires use of an infant formula, medical formula or nutritional because the use of conventional foods or formula is precluded, restricted or inadequate to address their special nutritional needs.

Participants who are not medically eligible for a WIC formula, but need modification in food consistency, should receive nutrition education on selecting and preparing foods that meet the participant's needs (e.g. pureeing fruits and vegetables, choosing foods with correct texture, and consistency).

- 2.0 Participants eligible to receive this food package must have one or more qualifying conditions, as determined by a health care professional licensed to write medical prescriptions under State law, and the appropriate medical documentation. Qualifying conditions include, but are not limited to, premature birth, low birth weight, malnutrition, gastrointestinal disorders, malabsorption syndromes, immune system disorders, severe food allergies that require an elemental formula, and life-threatening disorders, diseases and medical conditions that impair ingestion, digestion, absorption or the utilization of nutrients that could adversely affect the participant's nutrition status.
- 3.0 This package may not be used for infants whose only condition is:
- A diagnosed formula intolerance or food allergy to lactose, sucrose, milk protein or soy protein that does not require the use of an exempt infant formula; or
 - A non-specific formula or food intolerance.
- 4.0 This package may not be used for adults and children:
- Who have a food intolerance to lactose or milk protein that can be successfully managed with the use of one of the other WIC food packages;
 - For the sole purpose of enhancing nutrient intake or managing body weight without an underlying condition.
- 5.0 All apparatus or devices (e.g., enteral feeding tubes, bags and pumps) designed to administer WIC formulas are not allowable WIC costs.
- 6.0 All infants, children and adults receiving the WIC bid formula, medical formula or nutritionals in this food package require medical documentation in order to receive other allowable WIC supplemental foods. Refer to ♦ [765—medical documentation](#) for requirements.
- 7.0 The special infant food package is allowed:
- For infants 0-11 months that require a medical formula. Follow the quantities in Appendix B, listed for infants on medical formula for 0-3, 4-5 and 6 through 11 months and whether mostly breastfed, some breastfed or non-breastfed.
 - For non-breastfed infants greater than 5 months receiving the WIC bid formula, a medical formula or nutritionals and whose health care provider has

determined that the infant foods are contraindicated based on medical condition. In place of receiving infant foods (infant cereal, and baby fruits and vegetables) participants can receive the same maximum formula quantity as infants 4 through 5 months of age who are non-breastfed. Refer to Appendix B, 6 through 11 Months listed for non-breastfed infants on Medical Formula or Nutritionals.

8.0 The special adult and child food package allows up to:

- 910 oz. of ready to feed nutritional or reconstituted powder formula or reconstituted concentrate formula (1365 oz. for adults exclusively breastfeeding multiple infants), and
- The foods and quantities that are identified for the participant's category, as long as they are prescribed by their health care provider. Refer to Appendix A, WIC Monthly Food Packages for Children and Adults for the foods and quantities.

9.0 Infant foods, whole milk and other foods for children and adults:

- The following substitutions are allowed for children and adults with a documented qualifying medical condition that requires use of a WIC formula (standard bid, medical formula or nutritional).
- The substitutions must address the qualifying condition and be requested by a qualified health care provider on the WIC medical documentation form.
- These substitutions are not allowed in the absence of a WIC formula.
- For a child fed by tube feeding (e.g. nasogastric or gastrostomy tube), bid formulas can be provided by WIC. Medical formulas are to be provided by the medical supply company and formula paid by Medicaid.
- When receiving medical formula(s) by another provider, WIC can provide the other WIC supplemental foods that are deemed appropriate by the medical provider and documented on the WIC medical documentation form.
- WIC staff will enter the information in the progress notes. The reason for the substitution must be documented in progress notes along with appropriate risks assigned (e.g. Risk 362: Developmental, Sensory or Motor Delays interfering with Eating); a referral to the local agency WIC nutritionist is required.
- Local agencies will need to contact their assigned Nutrition Consultant to have these foods added to the participant's benefits.

9.1. Pureed foods:

- 32 ounces infant cereal may be substituted for 36 ounces of cold or hot cereal, as determined appropriate by the health care provider per medical documentation.
- Infant food fruits and vegetables may be substituted for the fruit and vegetable benefit as determined appropriate by the health care provider per medical documentation.

- For children and women who require jarred infant food fruits and vegetables in place of the fruit and vegetable benefit (FVB), the conversion is \$1 FVB= 6.25 ounces of jarred infant food fruits and vegetables.

9.2. Whole milk:

Whole milk may be substituted for a lower fat milk if the participant is receiving a WIC formula and has medical documentation demonstrating a medical need for whole milk and WIC formula.

9.3. Other foods:

- With medical documentation, other foods may be assigned as deemed safe to consume by their health care provider including juice, milk/cheese, eggs, whole wheat bread/corn tortilla/brown rice, peanut butter/beans, canned fish. Participants with feeding difficulties need to be monitored carefully and their care coordinated by the WIC dietitian/nutritionist.