



Nebraska WIC Nutrition Program
Physician Authorization Form
 For Specialty Formulas and WIC Supplemental Foods
Infants up to 12 months

Formula and food cannot be issued until **all** appropriate sections are completed. Thank You!

WIC Clinic: _____
Phone #: _____
Fax #: _____
Attention: _____

A. Patient Information

Name: _____ DOB: _____

Parent/Caregiver's Name: _____

B. Medical Reason/Diagnosis – (required)

DX: _____

Specialty formulas are not allowed for non-specific conditions such as: poor appetite, picky eater, parental preference, spitting up, colic, constipation, fussiness, or gas.

C. Formula
 WIC Provides approximately: **28 oz/day:** birth-3 mo. **30 oz/day:** 4-5 mo. **22 oz/day:** 6-11 mo.

Name of Formula	_____
Formula Amount (oz/day)	<input type="checkbox"/> Maximum allowable OR <input type="checkbox"/> _____ oz per day
Special Instructions	_____

D. WIC Foods (6-12 months of age, only): All WIC infant foods will be issued if nothing is marked.

<input type="checkbox"/> No WIC Infant Foods – cereal/fruits/vegetables <ul style="list-style-type: none"> • <i>Infant is not medically or developmentally ready for solid foods AND needs additional formula</i> <input type="checkbox"/> Yes <input type="checkbox"/> No 	<input type="checkbox"/> All WIC Infant Foods are allowed
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E. Requested Length of Issuance: 6 months will be issued including current month if nothing is marked.

1 mo.
 2 mo.
 3 mo.
 4 mo.
 5 mo.
 6 mo.

F. Health Care Provider Information (required)

Date: _____ Phone No.: _____ Fax No.: _____

Provider's Name (Please Print): _____

Signature/Stamp of Health Care Provider (MD, DO, PA, NP): _____

For WIC Use Only	Approved by: _____	Date _____
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WIC approved formulas: [Nebraska WIC Formulary](#) [Nebraska WIC Contract Formulas](#)

WIC PROVIDES specialty formula for infants to support qualifying medical conditions:

EXAMPLES OF QUALIFYING MEDICAL CONDITIONS FOR SPECIALTY FORMULAS FROM WIC

Life-threatening disorders, diseases and medical conditions that impair the ingestion, digestion, absorption or utilization of nutrients that could adversely affect the infant's nutritional status are qualifying medical conditions for special formula:

Conditions Including But Not Limited To:

ICD – 10 Codes

INFANTS (0 – 11 months)

Anemia	D50, D64
Autoimmune Disorder	D89
Celiac Disease	K90.0
Cerebral Palsy	G80.9
Cleft Lip/Palate	Q35 – Q37
Congenital Malformations of Digestive System	Q38 – Q45
Congenital Heart Disease	Q20 – Q28
Cystic Fibrosis	E84
Developmental Sensory/Motor Delays	R62
Diabetes	E10
Digestive System Disorders of the Newborn	P05, P76-78
Diseases of Digestive System	K92
Failure to Thrive/ Inadequate Growth	R62.51
Feeding Disorders of Infancy/Early Childhood	F98.29
Severe Food Allergies	
• Food Allergy - milk products	Z91.011
• Intolerance to carbohydrate/fat/protein/starch	K90.4
• Allergic and dietetic gastroenteritis and colitis	K52.2
• Dermatitis due to ingested food	L27.2
Gastro Esophageal Reflux Disease	P78.83, K21.0
Gastroenteritis and Colitis	K52
Gastrointestinal Disorders	K31
Genetic-Congenital Disorders	Q00 – Q99
Inborn Errors of Metabolism/ Metabolic Disorders	E88
Immunodeficiency Disorders	D84
Intestinal Malabsorption	K90
Intestinal Infectious Disease	A00-A09
Lactose Intolerance	E73
Prematurity/ Low Birth Weight	P05, P08
Underweight	R63.6, Z68.51

NON-QUALIFYING CONDITIONS

*Specialty Formula is **NOT PROVIDED FOR:***

- Parent preference
- Food dislikes
- Picky eating
- Poor appetite
- Non-specific symptoms or diagnoses (i.e. formula intolerance, spitting up, colic, constipation, picky eater, fussiness, and gas)
- Formula intolerance that can be successfully managed with the use of other WIC foods or contract formulas.

Clients with non-qualifying conditions may receive our regular **Contract Formulas:**

- **Similac Advance**
- **Similac Soy Isomil**
- **Similac for Spit Up**
- **Similac Total Comfort**
- **Similac Sensitive**

Specialty Infant Formulas -

provided by NE WIC with a qualifying medical condition:

- *Alfamino Infant*
- *Elecare Infant*
- *Enfamil Enfacare*
- *Neocate Infant*
- *Nutramigen*
- *Pregestimil*
- *PurAmino*
- *Similac Alimentum*
- *Similac Neosure*
- *Human Milk Fortifier*

Current WIC Formulary can be found on the NE WIC Website: [Nebraska WIC Formulary](#)

*ICD=International Classifications of Diseases Tenth Revision <https://www.icd10data.com/>

Questions?
Contact NE WIC State Office: 402-471-2781;
DHHS.NebraskaWIC@nebraska.gov