



John E. Baldacci, Governor Brenda M. Harvey, Commissioner

Department of Health and Human Services
 Maine Center for Disease Control and Prevention
 286 Water Street
 # 11 State House Station
 Augusta, Maine 04333-0011
 Tel: (207) 287-3991; Toll-Free: 1-800-437-9300
 Fax: (207) 287-3993; TTY: 1-800-606-0215



Maine WIC Nutrition Program New WIC Foods Coming October 1, 2009

Category of Participant	Change	Rationale
Fully Breastfed Infants	Addition of single ingredient 2 nd stage infant meats at 6 months (average 2.5 oz/day)	Additional iron and zinc in diet of exclusively breastfed infants
	Plain infant fruits and vegetables (no added sugar or salt, 2 nd stage; average 8 oz/day) and infant cereal provided 6-12 months; juice eliminated.	Juice replaced with nutrient-dense fruits and vegetables; adds developmentally appropriate foods and textures to infant diet.
Partially Breastfed Infants ^{1,2,3,4}	Maximum 1 can of supplemental powdered formula in the first month of life	Promotion of exclusive breastfeeding to ensure adequate maternal milk supply. Lactation counselors and breast pumps (with documented medical need) will continue to be available.
	Maximum formula issuance decreased to ½ total amount provided to fully formula-fed infants.	Encouragement for mothers to provide at least ½ of infant's nutrient needs with breastmilk.
	Maximum formula amount varies by age of infant: <ul style="list-style-type: none"> • 1-3 months—average 12 oz/day • 4-5 months—average 14 oz/day • 6-12 months—average 10 oz/day 	Formula amounts decrease at 6 months as infant's nutrient needs are supplemented with solid foods. Continue to encourage at least ½ of infant's nutrient needs to be provided by breastmilk.
	Plain infant fruits and vegetables (no added sugar or salt, 2 nd stage; average 4 oz/day) and infant cereal provided at 6-12 months; juice eliminated.	Replaces juice with nutrient-dense fruits and vegetables; adds developmentally appropriate food and textures to infant diet.

Category of Participant	Change	Rationale
Fully Formula Fed Infants ^{1,2,3,4}	Maximum formula amounts based on age: <ul style="list-style-type: none"> • 0-3 months—average 26 oz/day • 4-5 months—average 28.5 oz/day • 6-12 months—average 20 oz/day 	Formula benefits are supplemental. Decrease at 6 months allows for addition of complementary foods, provides essential nutrients without excess food energy, and reinforces nutrition education to initiate routine addition of complementary foods. Total benefits supply approximately: <ul style="list-style-type: none"> • 95% energy needs infants age 0-3 months • 88% energy needs infants age 4-5 months • 73% nutrient needs infants age 6-12 months
	Plain infant fruits and vegetables (no added sugar or salt, 2 nd stage; average 4 oz./day) and infant cereal provided 6-12 months; juice eliminated.	Replaces juice with nutrient-dense fruits and vegetables; adds developmentally appropriate foods and textures to infant diet.
Children 12 months to 60 months	Milk: Average 16 oz/day for all children <ul style="list-style-type: none"> • Whole milk only allowed for 1 year olds • Lowfat/skim milk for 2-4 year olds 	Maximum amounts of milk are reduced to meet current recommendations; whole milk option removed for children ≥24 months in agreement with DGA 2005.
	Milk Substitutes: <ul style="list-style-type: none"> • Cheese—maximum 1 lb./month; additional amounts of cheese allowed <u>by prescription only</u> • Soy beverage (must be fortified at specific nutrient levels)—may be substituted for milk <u>by prescription only</u> • Tofu—may be substituted for milk <u>by prescription only</u>; maximum 1 lb/month 	<ul style="list-style-type: none"> • Limiting cheese meets recommendations of Dietary Guidelines for Americans (DGA) 2005 to reduce saturated fat and cholesterol. • Fortified soy beverages and tofu ensure calcium intake for those who cannot consume milk products. • Requiring prescription for soy products ensures that health care provider has awareness of child's nutrition risk
	Eggs: reduced to 1 dozen/month for all children	Consistent with DGA 2005 to reduce saturated fat and cholesterol.
	Cereal: at least ½ of cereal choices must be whole grain	Consistent with DGA 2005 to encourage 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.
	Juice: amount provided reduced to average of 4 oz/day	Consistent with AAP and DGA 2005 recommendations for juice.
	Whole Grains: 2 lb. whole grain bread <u>or</u> 2 lb. other whole grains (brown rice, oatmeal) <u>or</u> 2 lb. soft corn or whole wheat tortillas per month.	Consistent with DGA 2005 recommendations for 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.

Category of Participant	Change	Rationale
Children 12 months to 60 months (cont)	Fruits and Vegetables: \$6 voucher for fresh, frozen or canned fruits/vegetables (no added ingredients)/month.	Consistent with DGA 2005; provides increased amounts of vitamins A and C, fiber, folate, and potassium.
	Legumes or peanut butter: participant choice at point of purchase; options expanded to include canned varieties of legumes (up to 4-15 oz. cans) as well as dried legumes (1 lb.) per month <u>or</u> peanut butter (up to 18 oz/month).	Increased variety of options available.
Children >12 months and Women with Special Needs ²	Medical food issuance—up to 910 oz. reconstituted formula per month (average 29 oz/day) <u>by prescription only with documented medical need</u> (need for formula or medical food based on medical condition that precludes or restricts participant's ability to consume conventional foods).	Infant formula or medical food issuance based on reconstituted volume (powder or concentrate) or total volume (ready to use); infant formula or medical food issuance provided to meet specific medical needs of special needs children and women.
	Other supplemental foods (milk and/or milk substitutes, juice, cereal, eggs, legumes or peanut butter, whole grains, fruits and vegetables) allowed in addition to medical food. <u>Prescriber must specify which foods participant is not allowed to have based upon medical condition (no peanut butter if nut allergy...).</u>	Ensure supplemental foods prescribed are not contraindicated by participant's medical condition, are appropriate to participant's medical needs, and medical provider is aware of foods issued by WIC.
	Whole milk for children \geq 24 months and women allowed by prescription only; participant must also have prescription for medical formula/food based upon individual medical need.	Consistent with AAP and DGA 2005 guidance for provision of lowfat milk for all children after they have reached the age of 24 months. WIC counselors may review ways to provide additional calories to parents of underweight children.

- 1 Medically fragile infants \geq 6 months of age who receive exempt infant formula and whose medical condition prevents them from consuming complementary infant foods (cereal, fruits/vegetables) will be allowed to receive infant formula at the same allowance for 4-5 month olds of the same feeding option.
- 2 Medically fragile infants and children may receive ready to feed formula if it better accommodates the participant's condition or if it improves compliance in consuming the prescribed formula.
- 3 Only contract infant formula will be provided for those infants receiving standard cow's milk and soy based infant formulas. The current WIC contract formulas are Nestle Good Start Gentle Plus and Nestle Good Start Soy Plus.
- 4 Participants enrolled in MaineCare who require hydrolysate, elemental or hypercaloirc infant formulas, and pediatric or adult medical formulas for the treatment of a medical condition will receive those items from MaineCare. WIC will provide the items until prior authorization has been approved through MaineCare.

Category of Participant	Change	Rationale
Pregnant Women ³ Or Partially Breastfeeding Women ⁴	Milk: <ul style="list-style-type: none"> • Lowfat/skim milk only (whole milk allowed <u>with medical documentation</u>) • Average 23 oz/day 	Lowfat/skim options only consistent with DGA 2005 recommendations; 23 oz/day provides supplemental Ca (860 mg/day).
	Milk Substitutes: <ul style="list-style-type: none"> • Cheese—maximum 1 lb./month; additional amounts of cheese allowed <u>by prescription only</u> • Soy beverage—(must be fortified at specific nutrient levels) may be substituted for milk for lactose intolerance <u>or</u> cultural preference • Tofu—may be substituted for milk for lactose intolerance <u>or</u> cultural preference; maximum 1 lb/month 	<ul style="list-style-type: none"> • Limiting cheese meets recommendations of Dietary Guidelines for Americans (DGA) 2005 to reduce saturated fat and cholesterol. • Soy beverages and tofu ensure calcium intake for those who do not or cannot consume milk.
	Eggs: reduced to 1 dozen/month	Consistent with DGA 2005 to reduce saturated fat and cholesterol.
	Cereal: at least ½ of cereal choices must be whole grain	Consistent with DGA 2005 to encourage 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.
	Juice: amount provided reduced to average of approximately 4 oz/day	Consistent with DGA 2005 recommendations that whole fruits be used for majority of total daily fruit intake.
	Whole Grains: 1 lb. whole grain bread <u>or</u> 1 lb. other whole grains (brown rice, oatmeal) <u>or</u> 1 lb. soft corn or whole wheat tortillas per month.	Consistent with DGA 2005 recommendations for 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.
	Legumes: options expanded to include canned varieties (up to 4-15 oz. cans) as well as dried (1 lb.) per month.	Increased variety of options available.
	Peanut butter: up to 18 oz/month.	
Fruits and Vegetables: \$8 voucher for fresh, frozen or canned fruits/vegetables (no added ingredients) per month.	Consistent with DGA 2005; provides increased amounts of vitamins A and C, fiber, folate, and potassium.	

Category of Participant	Change	Rationale
Exclusively Breastfeeding Women ⁵	Milk: <ul style="list-style-type: none"> • Lowfat/skim milk only (whole milk allowed <u>with medical documentation</u>) • Average 24 oz/day 	Lowfat/skim options only consistent with DGA 2005 recommendations; 24 oz/day provides supplemental Ca (900 mg/day).
	Milk Substitutes: <ul style="list-style-type: none"> • Cheese—maximum 2 lb./month; additional amounts of cheese allowed <u>by prescription only</u> • Soy beverage—(must be fortified at specific nutrient levels) may be substituted for milk for lactose intolerance or cultural preference • Tofu—may be substituted for milk for lactose intolerance or cultural preference; maximum 1 lb/month 	<ul style="list-style-type: none"> • Limiting cheese meets recommendations of Dietary Guidelines for Americans (DGA) 2005 to reduce saturated fat and cholesterol. • Soy beverages and tofu ensure calcium intake for those who do not or cannot consume milk.
	Eggs: 2 dozen/month	
	Cereal: at least ½ of cereal choices must be whole grain	Consistent with DGA 2005 to encourage 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.
	Juice: amount provided reduced to average of 4 oz/day	Consistent with DGA 2005 recommendations that whole fruits be used for majority of total daily fruit intake.
	Whole Grains: 1 lb. whole grain bread <u>or</u> 1 lb. other whole grains (brown rice, oatmeal) <u>or</u> 1 lb. soft corn or whole wheat tortillas per month.	Consistent with DGA 2005 recommendations for 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.
	Legumes: options expanded to include canned varieties (up to 4-15 oz. cans) as well as dried (1 lb.) per month.	Increased variety of options available.
	Peanut butter: up to 18 oz. per month.	
	Fruits and Vegetables: \$10 voucher for fresh, frozen or canned fruits/vegetables (no added ingredients) per month.	Consistent with DGA 2005; provides increased amounts of vitamins A and C, fiber, folate, and potassium.
Canned fish: Options include salmon, sardines, and chunk light tuna.	Increased variety of lower mercury fish options available	

Category of Participant	Change	Rationale
Postpartum Women (up to 6 months after delivery)	Milk: <ul style="list-style-type: none"> • Lowfat/skim milk only (whole milk allowed <u>with medical documentation</u>) • Average 16oz./day 	Lowfat/skim options only consistent with DGA 2005 recommendations; 16 oz./day provides supplemental Ca (600 mg/day).
	Milk Substitutes: <ul style="list-style-type: none"> • Cheese—maximum 1 lb./month; additional amounts of cheese allowed <u>by prescription only</u> • Soy beverage—(must be fortified at specific nutrient levels) may be substituted for milk for lactose intolerance or cultural preference • Tofu—may be substituted for milk for lactose intolerance or cultural preference; maximum 1 lb/month 	<ul style="list-style-type: none"> • Limiting cheese meets recommendations of Dietary Guidelines for Americans (DGA) 2005 to reduce saturated fat and cholesterol. • Soy beverages and tofu ensure calcium intake for those who do not or cannot consume milk.
	Eggs: 1 dozen/month	Consistent with DGA 2005 to reduce saturated fat and cholesterol.
	Cereal: at least ½ of cereal choices must be whole grain	Consistent with DGA 2005 to encourage 3 servings of whole grains per day to reduce risk of chronic diseases and increase dietary fiber.
	Juice: amount provided reduced to average of 3 oz/day	Consistent with DGA 2005 recommendations that whole fruits be used for majority of total daily fruit intake.
	Legumes <u>or</u> Peanut Butter: options expanded to include canned varieties (up to 4-15 oz. cans) as well as dried (1 lb.) per month <u>or</u> up to 18 oz. peanut butter per month.	Increased variety of options available.
	Fruits and Vegetables: \$8 voucher for fresh, frozen or canned fruits/vegetables (no added ingredients) per month.	Consistent with DGA 2005; provides increased amounts of vitamins A and C, fiber, folate, and potassium.

5 Pregnant women with >1 fetus are eligible to receive the same food amounts as exclusively breastfeeding women.

6 Partially breastfeeding women eligible for these food amounts if the infant enrolled is receiving < ½ the full formula amount for a fully formula fed infant.

7 Women exclusively breastfeeding multiple infants are eligible to receive 1.5 times the maximum amounts of foods.