

Subject: Therapeutic Formula and WIC-Eligible Nutritionals**Item: Coordinating with Healthcare**

PURPOSE:

Provides information on

POLICY:

WIC staff must coordinate with health plans and other programs that reimburse for the provision of prescribed therapeutic formulas and/or WIC-eligible nutritionals to ensure access to medically necessary formulas and WIC-authorized WIC-eligible nutritionals only when access to these products from another health plan or program is not available and a documented medical condition exists.

PROCEDURES:

- I. Coordinating with Health Plans: Local agency (LA) staff must determine if the participant currently has healthcare, is in the process of applying for healthcare, or if appropriate, provide referral to healthcare as discussed below.
 - A. If the participant currently has Medi-Cal, send the participant to their Medi-Cal pharmacy to fill their therapeutic formula prescription (Rx).
 1. If participant has Fee-for-Service (FFS) Medical, the participant, must take their Rx to any private that provides services for Medi-Cal
 2. If a participant has Medi-Cal Managed Care (MMC), the participant must take their Rx to their MMC contracted pharmacy. For information on MMC pharmacy services, have the participant contact their MMC plan membership services.
 3. LA must provide one month only of therapeutic formula while participant is waiting for MMC or FFS to process their therapeutic formula or WIC-eligible nutritionals.
 - B. If participant has no healthcare plan, refer them to Medi-Cal or other programs that provide formula and/or WIC-eligible nutritionals such as California Children's Services (CCS).
 1. While the participant is applying for healthcare, WIC may provide up to 2 months of therapeutic formula or WIC-eligible nutritionals, if all WIC therapeutic formula requirements are met (refer to WPPM 390-10).
 2. If after 2 months, healthcare has not been established, further issuance of formula must be assessed monthly.

Subject: Therapeutic Formula and WIC-Eligible Nutritionals**Item: Coordinating with Healthcare**

- C. Document and update the above information in the WIC management information system (WIC MIS) "Family Comments".
- II. Healthcare Denials: If a Rx for a therapeutic formula or WIC-eligible nutritionals is denied by a health plan, LA staff must take the following action depending on the type of health plan:
- A. Private or military insurance:
 - 1. Have participant contact their insurance plan for therapeutic formula/WIC-eligible nutritionals coverage.
 - 2. Document denial in IWIC management information system (WIC MIS) "Family Comments"; verbal or written denials are acceptable.
 - 3. LA may provide therapeutic formula/WIC-eligible nutritionals only if WIC therapeutic issuance requirements are met (refer to WPPM 390-10).
 - B. Medi-Cal Managed Care:
 - 1. Determine from the MMC denial letter if participant needs to follow-up with the medical provider or the pharmacy.
 - 2. If participant follow-up with the medical provider or the pharmacy is needed, LA staff may provide one month of therapeutic formula or WIC-eligible nutritionals if the issuance requirements are met (refer to WPPM 390-10).
 - 3. If no follow-up is needed, LA staff may provide therapeutic formula/WIC-eligible nutritionals only if therapeutic formula issuance requirements are met (refer to WPPM 390-10).
 - 4. Document the receipt of the denial letter and any follow up needed in the WIC MIS family comments section; verbal or written denial accepted.
 - 5. Fax written denial letters, only Medi-Cal, including the pediatric form, the participant consent form and any medical documents to the CDPH/WIC.
 - 6. If it is apparent the participant was incorrectly denied, according to [Medi-Cal enteral nutrition policy](#), ask the participant or the participant's parent/caretaker to appeal the denial. Provide the participant a copy of the [MMC Policy Letter 14-003](#) and refer the participant to the MMC's Ombudsman phone number (1-888-452-8609). Any questions, contact the CDPH/WIC formula team for assistance.
 - a. Advise participant to update the LA if appeal is successful and Medi-Cal begins to provide therapeutic formula.
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Subject: Therapeutic Formula and WIC-Eligible Nutritionals**Item: Coordinating with Healthcare**

- b. LA may provide therapeutic formula/or WIC eligible nutritionals until the appeal process is successful. Therapeutic formula and/or WIC-eligible nutritionals must only be issued if WIC therapeutic formula issuance requirements are met. (Refer to WPPM 390-10) and must stop if the appeal process is successful.
 - C. Fee-for-Service:
 1. Determine from the Medi-Cal denial letter if participant needs to follow-up with the medical provider or the pharmacy.
 2. If participant follow-up with the medical provider or the pharmacy is needed, LA may provide one month of formula/WIC-eligible nutritionals until follow-up is complete. Therapeutic formula and/or WIC-eligible nutritionals must only be issued if WIC therapeutic formula issuance requirements are met (see WPPM 390-10).
 3. If no follow-up is needed, LA may provide therapeutic formula/WIC-eligible nutritionals if all WIC therapeutic formula issuance requirements are met. (see WPPM 390-10).
 4. If no follow-up is needed, LA may provide therapeutic formula/WIC-eligible nutritionals if all WIC therapeutic formula issuance requirements are met (see WPPM 390-10).
 5. Document the receipt of the denial and any follow-up needed in WIC MIS "Family Comments".
 6. Fax the denial letter, the pediatric referral form, the participant consent form and all medical documentation provided from the medical provider to CDPH/WIC.
 7. If it is apparent the participant was incorrectly denied, according to [Medi-Cal enteral nutrition policy](#), ask the participant or the participant's parent/caretaker to appeal the denial. If the LA has any questions after reading the denial letter contact CDPH/WIC therapeutic formula team for assistance.
 - a. Advise participant to update WIC if Medi-Cal begins to provide therapeutic formula or WIC eligible nutritionals due to appeal.
 - b. LA may provide therapeutic formula or WIC eligible nutritionals until the appeal process is successful. Therapeutic formula and/or WIC-eligible nutritionals must only be issued if WIC therapeutic formula issuance
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Subject: Therapeutic Formula and WIC-Eligible Nutritionals**Item: Coordinating with Healthcare**

requirements are met (refer to WPPM 390-10) and must stop if the appeal process is successful.

GUIDELINES:

The LA is strongly encouraged to establish a memorandum of understanding with local Medi-Cal Managed Care health plans and CCS to coordinate nutrition services and improve access for participants needing therapeutic formula or WIC-eligible nutritionals.

AUTHORITY:

[7 CFR 246.10 Part \(2\) \(ii\) \(A\) through \(E\)](#)

[7 CFR 246.10 Part \(3\) \(ii\) through \(vi\)](#)

[22 CCR Part 51313.3 \(e\) \(2\)](#)

RESOURCE:

Therapeutic Formula Training Part 2 – Medi-Cal Training (powerpoint)

Therapeutic Formula Training Part 2 Q and A (PDF)

[California Children's Services](#)

[Regional Center](#)

[Child Health and Disability Prevention \(CHDP\)](#)

CROSS REFERENCE:

WPPM 120-10 Access to and Security of Confidential Information

WPPM 390-10 Provision of Therapeutic Formulas and WIC Eligible Nutritionals