Blast Communication

Coming Soon: Changes to Georgia WIC Policy on Enhanced Calorie Nutritional Supplements

The Georgia Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) has provided the Georgia AAP with new guidance regarding issuance of nutritional supplement products for children and women receiving Georgia WIC. The effective date for this policy is pending approval from the USDA which is expected soon. We’ll notify you again on final implementation date.

-Pending Policy-

New Medical Documentation Requirements for the Issuance of Nutritional Supplements (Enhanced Calorie) for Children & Women

The Georgia Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) requires documentation of one of the following medical conditions for the issuance a nutritional supplement. Georgia WIC defines a nutritional supplement as a concentrated source of nutrients for children and adults, often in the form of a beverage, providing supplemental or complete nutrition intended for oral or tube feedings. Participants with diagnoses requiring enhanced nutrient intake for the management of body weight, without an underlying medical condition, will be provided with nutrition education and dietary counseling on increased and adequate intake of conventional foods.

A. Failure to Thrive (FTT)
The FTT diagnosis requires a growth assessment meeting any of the conditions detailed below. Growth measurements must be taken within the last 6 months and may be provided by the medical office or determined from the WIC medical record.

1. Gender specific weight for length or BMI <5th percentile
2. Two or more consecutive weight for age measurements below the 5th percentile (must reflect the most recent measures taken at least 1 month apart)
3. A progressive decrease to below the 5th percentile for weight for age
4. Weight for length decreasing across at least one major percentile channels in children with established growth patterns at less than or equal to the 50th percentile.
5. No weight gain for three or more months
6. Weight loss in children with established growth patterns less than the 10th percentile for BMI or weight for age

B. Oral motor feeding problems or developmental disorders causing severely restricted or limited and inadequate food intake (i.e. tube feedings, dysphagia, and food aversions).

C. Hypermetabolic conditions (i.e. cancer/blastoma, Cystic Fibrosis).

D. Low maternal weight gain with:

1. Intrauterine growth restriction (IUGR)
2. Hyperemesis gravidarum
3. Cystic fibrosis (CF)
4. HIV/AIDS
5. Any hypermetabolic disease conditions

For questions or concerns regarding this blast communication, please contact the Chapter’s Nutrition Coordinator, Kylia Crane, RDN, LD, at (404) 881-5093 or kcrane@gaaap.org

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