#### **Illinois WIC Food Package Tables**

WIC food packages and nutrition education are the primary means by which WIC affects the dietary quality and habits of participants. Food packages are developed based on the deficiencies in the diets of low-income pregnant women, infants, and children to improve the nutritional balance of the WIC population. The Illinois WIC foods have been selected based on nutrient content criteria established by Federal Regulation and Department specification. Refer to IL WIC PM SFD 4.1 for minimum standards each food must meet to be included on the Authorized Food List. Food packages are designed with the following principles:

- Reduce the prevalence of inadequate or excessive nutrient intake by WICparticipants.
- Help participants achieve dietary patterns consistent with the Dietary Guidelines for Americans.
- Bring the diets of infants and children under the age of two into closer conformity with accepted recommendations, encouraging and supporting breastfeeding.
- Include foods in the packages that are commonly consumed and widely available, accommodate cultural preferences, and encourage WIC participation.

#### **Education on Food and Formula Benefits**

Providing education on shopping for and the use of WIC benefits is essential for participants to be successful in their shopping experience and obtaining full nutrition benefit. WIC staff must follow policies to provide the required education, referrals, and related materials. Staff should be familiar with the following educational points regarding WIC Medically Prescribed Formulas and Foods:

- Educate on the issued formula by reviewing the Family Shopping List Description, product form, container size and the description on the EBT receipt; refer to page 2.
- Where to shop for WIC formulas:
  - Refer to the Authorized WIC Vendors List, Store Type column to educate participants on where to purchase.

Authorized Vendor	Store Type Column
Grocer	WIC Foods & Contract Formula Only
Grocery with Pharmacy	All WIC Eligible Products
Pharmacy	All Formulas Only NO FOOD
Commissary	All WIC Eligible Products
WIC Food Grocery	All WIC Eligible Products

- Instruct participants who are issued Medically Prescribed products on the following:
  - Take Shopping List to get correct product, medically prescribed formulas may need to be ordered and take at least 24 hours for the pharmacy to obtain, do not wait until benefits are close to expiring.
  - If the formula is new to participant, ask if the pharmacy can only order 1 or 2 containers to ensure tolerance, WIC cannot replace redeemed benefits.
  - Ask Pharmacy about how to obtain future months benefits (i.e. how and when to order)
  - Provide with appointment reminder when another prescription form is needed to issue more benefits.
- Review Core Food Package tables and footnotes to understand the WIC allowed substitutions and foods provided for each category.
- Review Family Shopping List and Illinois Authorized WIC Food List to facilitate education on successful shopping such as: allowable brands, sizes and what is not allowed for purchase, type of milk, yogurt; whole grain options, use of Cash Value Benefit (CVB) for fruits and vegetables, how to purchase dry vs canned beans, etc.

Formula	Form	Size	Reconst. fl oz	Shopping List Description	EBT Receipt Description	
	Powder	12.5 oz	90 fl oz	Enfamil Infant Powder-12.5oz Container	Enfamil Infant Pdr	
Enfamil Infant	Conc.	13 oz	26 fl oz	Enfamil Infant Concentrate-13oz Container	Enfamil Infant Conc	
Enfamil NeuroPro Infant	RTF <sup>2</sup>	32 oz	32 fl oz	Enfamil Infant Ready To Feed-32oz Container	Enf NPr Infant RTF	
Enfamil Gentlease	Powder	12.4 oz	90 fl oz	Enfamil Gentlease Powder-12.4oz Container	Enfamil Gentlease	
Enfamil NeuroPro Gentlease	RTF <sup>2</sup>	32 oz	32 fl oz	Enfamil NeuroPro Gentlease RTF- 32oz Container	Enf NPrGentlease RTF	
Enfamil Reguline	Powder	12.4 oz	90 fl oz	Enfamil Reguline Powder-12.4oz Container	Enfamil Reguline Pdr	
	Powder	12.9 oz	93 fl oz	Enfamil ProSobee Powder-12.9oz Container	Enfamil ProSobee Pdr	
Enfamil ProSobee	Conc.	13 oz	26 fl oz	Enfamil ProSobee Concentrate- 13oz Container	Enfamil ProSobee Con	
	RTF <sup>2</sup>	32 oz	32 fl oz	Enfamil ProSobee Ready To Feed-32oz Container	Enfamil ProSobee RTF	
Enfamil AR	Powder	12.9 oz	91 fl oz	Enfamil AR Powder- 12.9oz Container	Enfamil AR Powder	
Enfamil NeuroPro EnfaCare	Powder	13.6 oz	87 fl oz	Enfamil NeuroPro EnfaCare Powder- 13.6oz Container	Enf NProEnfaCare Pdr	
Similac NeoSure	Powder	13.1 oz	87 fl oz	Similac NeoSure Powder-13.1oz Container	Similac NeoSure Pdr	
Similac Neosure	RTF <sup>2</sup>	32 oz	32 fl oz	Similac NeoSure Ready To Feed- 32oz Container	Similac NeoSure RTF	
Similac Alimentum	Powder	12.1 oz	87 fl oz	Similac Alimentum Powder-12.1oz Container	Similac Alimentum Pdr	
Similac Allinentum	RTF <sup>2</sup>	32 oz	32 fl oz	Similac Alimentum Ready To Feed-32oz Container	Similac Alimentum RTF	
Nutramigen with Prebiotic LGG	Powder	12.6 oz	87 fl oz	Nutramigen with Prebiotic LGG Powder-12.6oz Container	NutramigenPrebLGG	
Nutramigen	RTF <sup>2</sup>	32 oz	32 fl oz	Nutramigen Ready to Feed- 32oz Container	Nutramigen RTF	
Similac PM 60/40	Powder	14.1 oz	102 fl oz	Similac PM 60/40 Powder-14.1oz Container	Similac PM 60/40 Pdr	
Peptamen Junior – No Fiber	RTF	8.45 oz	8.45 fl oz	Peptamen Junior (Any Flavor)-8.45oz Container	Peptamen Jr RTF	
Peptamen Junior -With Fiber	RTF	8.45 oz	8.45 fl oz	Peptamen Junior with Fiber-8.45oz Container	Peptamen Jr FiberRTF	
PediaSure Peptide 1.0 Cal	RTF	8 oz	8 fl oz	PediaSure Peptide 1.0 Cal (Any Flavor)-8oz Container	PedSur Peptide 1.0 Cal	
Elecare DHA/ARA	Powder	14.1 oz	95 fl oz	Elecare DHA/ARA Powder-14.1oz Container	EleCare DHA/ARA Pdr	
Neocate Infant DHA/ARA	Powder	14.1 oz	97 fl oz	Neocate Infant DHA/ARA Powder-14.1oz Container	Neocate Infant Pdr	
Neocate Syneo Infant	Powder	14.1 oz	95 fl oz	Neocate Syneo Infant Powder-14.1oz Container	Neocate Syneo Infant	
PurAmino DHA/ARA	Powder	14.1 oz	98 fl oz	PurAmino DHA/ARA Powder-14.1oz Container	PurAmino DHA/ARA Pdr	
EleCare Jr – Unflavored	Powder	14.1 oz	62 fl oz	EleCare Jr.Powder (Unflavored)-14.1oz Container	EleCare Jr Unflavor	
EleCare Jr – Flavored	Powder	14.1 oz	62 fl oz	EleCare Jr.Powder (Any Flavor)-14.1oz Container	EleCare Jr Flavor Pdr	
Neocate Junior	Powder	14.1 oz	63 fl oz	Neocate Junior Powder (Any Flavor)-14.1oz Container	Neocate Junior	
Neocate Junior with Prebiotics	Powder	14.1 oz	63 fl oz	Neocate Junior with Prebiotics Powder (Unflavored)- 14.1oz Container	Neocate JR Prebio	
Neocate Splash	RTF	8 oz	8 fl oz	Neocate Splash (Any Flavor)-8oz Container	Neocate Splash RTF	
PediaSure – No Fiber	RTF	8 oz (6 pk)	8 fl oz (6 pk)	PediaSure (Any Flavor)-Pack-6-8oz Containers	PediaSure RTF 6Pack	
PediaSure – With Fiber	RTF		7.4 fl oz (4 pk)	PediaSure with Fiber (Any Flavor)-Pack-4-7.4oz Container	PediaSure Fiber 4Pk	
Nutren Junior – No Fiber	RTF	8.45 oz	8.45 fl oz	Nutren Junior-8.45oz Containers	Nutren Junior RTF	
Nutren Junior – With Fiber	RTF	8.45 oz	8.45 fl oz	Nutren Junior with Fiber-8.45oz-Container	Nutren Junior Fiber	
PediaSure 1.5 Cal -No Fiber	RTF	8 oz	8 fl oz	PediaSure 1.5 Cal-8oz Container	PedSure 1.5Cal RTF	
PediaSure 1 Cal -With Fiber	RTF	8 oz	8 fl oz	PediaSure 1.5 Cal with Fiber-8oz Container	PedSure 1.5 Cal Fiber	

## Core Food Packages - Women & Children

		Woman, Mostly BF one infant <u>or</u> PG single fetus (FP V <sup>2</sup> )	Woman, Fully BF one infant <sup>1</sup> <u>or</u> PG multiples <u>or</u> PG Fully/Mostly BF one infant (FP VII <sup>2</sup> )	Woman, Limited BF 0-5 months or Postpartum Non-BF (FP VI²) Woman, Limited BF beyond 6 months (No FP)	Child, 12-23 months (FP IV <sup>2</sup> ) and Child, 24-60 months (FP IV <sup>2</sup> )
Milk Group (Cow's Milk, Mil	k Alternative	es, and substitutions for mil	k <sup>2,3</sup> ):		
Milk (Cow's milk)	GAL, HGL)	5 1/2 gallons	6 gallons	4 gallons	4 gallons
Lactose Free milk	(HGL)	11 half-gallons	12 half-gallons	8 half-gallons	8 half-gallons
Soy-based beverage	(HGL)	11 half-gallons	12 half-gallons	8 half-gallons	8 half-gallons
UHT milk	(HGL)	11 half-gallons	12 half-gallons	8 half-gallons	8 half-gallons
Cheese	(LB)	NA <sup>2</sup>	1-pound cheese	NA	NA
Protein Group (Beans, Eggs,	Peanut Butt	er, Fish):			
Peanut Butter	(JAR)	1 (16-18 oz) jar	1 (16-18 oz) jar	1 (16-18 oz) jar <u>OR</u>	1 (16-18 oz) jar
Dry Beans OR	(CTR)	1 (16 oz) container OR	1 (16 oz) container OR	1 (16 oz) container OR	1 (16 oz) container OR
Canned Beans	(CTR)	4 (15.5-16 oz) container	4 (15.5-16 oz) container	4 (15.5-16 oz) container	4 (15.5-16 oz) container
Eggs	(DOZ)	1 dozen	2 dozen	1 dozen	1 dozen
Canned Fish	(OZ)	N/A	6 (5 oz) cans	N/A	N/A
Grain Group (Whole Grains,	Cereal):				
Whole Grains	(OZ)				
100% whole wheat bread, pasta, or tortillas; brown r bulgur; soft corn tortillas;	ice;	16 ounces	16 ounces	N/A	32 ounces
Cereals	(OZ)	36 ounces	36 ounces	36 ounces	36 ounces
Fruit & Vegetables (Fruit & V	egetables, J	uice):			
Fruits & Vegetables <sup>4</sup> Fresh, Canned and/or Froze		\$11.00	\$11.00	\$11.00	\$9.00
100% Juice	(CTR)	3 (48 oz)	3 (48 oz)	2 (48 oz)	2 (64 oz)

 $<sup>^{</sup>m 1}$  Breastfeeding Multiples will be issued one and one-half times the amount of foods listed for FP VII. .

Note: Whole milk and whole milk yogurt is provided to Child category 12-23 months, all other categories will be provided non- or low-fat milk and yogurt.

<sup>&</sup>lt;sup>2</sup> Allowed to substitute up to 4 quarts of milk/alternatives and FPVII is allowed to substitute up to 6 quarts as follows:

<sup>3</sup> quarts = 1-pound (lb.) Cheese

<sup>1</sup> quart = 32 ounces (oz) Yogurt

<sup>1</sup> quart = 16 ounces (oz) Tofu

<sup>&</sup>lt;sup>3</sup> Milk is issued only by ½ gallons (HGL) or gallons (GAL); thereby, any benefits with a 'dangling quart' that quantity of milk is rounded up to ½ gallon every other month.

<sup>&</sup>lt;sup>4</sup> Medically fragile children, if prescribed, may substitute 128 ounces of infant fruits & vegetables in lieu of the Cash Value Benefit (CVB)

## Core Food Packages for Infants - Breastfeeding or Fully Formula with Contract Formulas

Breas	tfeeding and/o	r with Contra	ct Formul	a - Amounts	per Infant Age			Infant F	oods (offered 6-1.	1 months)
<b>Exclusive Breastfeeding</b>										
			0-5 months			6-8 months	9-11 months	Infant Cereal	Infant Fruits & Vegetables	Infant Meats
WIC provides No formula				0		0	0	24 oz	64-4 oz containers <sup>1</sup>	31-2.5 oz containers
Partial Breastfeeding (Most	tly)									
Contract Formula:	Form	Size (oz)	0-1 month	1-3 months	4-5 months	6-8 months	9-11 months	Infant Cereal	Infant Fruit & Vegetables	Infant Meats
Enfamil Infant	powder	12.5 oz	1	up to 4	up to 5	up to 4	up to 4			
	concentrate	13	4	up to 14	up to 17	up to 12	up to 12			
Enfamil NeuroPro Infant	RTF <sup>2</sup>	32	3	up to 12	up to 14	up to 10	up to 10			
Enfamil Gentlease	powder	12.4 oz	1	up to 4	up to 5	up to 4	up to 4		32-4 oz containers <sup>1</sup>	
Enfamil NeuroPro Gentlease	RTF <sup>2</sup>	32 oz	3	up to 12	up to 14	up to 10	up to 10	24 oz		0
Enfamil Reguline	powder	12.4 oz	1	up to 4	up to 5	up to 4	up to 4			
	powder	12.9 oz	1	up to 4	up to 5	up to 4	up to 4			
Enfamil ProSobee	concentrate	13	4	up to 14	up to 17	up to 12	up to 12			
	RTF <sup>2</sup>	32	3	up to 12	up to 14	up to 10	up to 10			
Enfamil AR	powder	12.9 oz	1	up to 4	up to 5	up to 4	up to 4			
Breastfeeding Some/Limite	d or Fully Form	ula Feeding								
Contract Formula:	Form	Size		0-3	4-5 months	6-8	9-11	Infant	Infant Fruits &	Infant
		(oz)	m	onths		months	months	Cereal	Vegetables	Meats
- C	powder	12.5 oz		9	10	7	7			
Enfamil Infant	concentrate	13		31	34	24	24			
Enfamil NeuroPro Infant	RTF <sup>2</sup>	32		26	28	20	20			
Enfamil Gentlease	powder	12.4 oz		9	10	7	7		22.4	
Enfamil NeuroPro Gentlease	RTF <sup>2Enf</sup>	32 oz		26	28	20	20	24 oz	32-4 oz	0
Enfamil Reguline	powder	12.4 oz		9	10	7	7		containers <sup>1</sup>	
	powder	12.9 oz		9	10	7	7			
Enfamil ProSobee	concentrate	13		31	34	24	24			
	RTF <sup>2</sup>	32		26	28	20	20			
Enfamil AR	powder	12.9 oz		9	10	7	7			

amii AR powder 12.9 02 9 10 / / / / / Infants 9-11 months option: replace a portion of the jarred infant fruits and vegetables (FV) with a cash-value benefit (CVB) towards fresh fruits/vegetables. Exclusive breastfeeding portion replaced with \$8 CVB plus 128 oz of jarred infant FV; Partially breastfeeding and Fully Formula fed replaced with \$4 CVB plus 64 ounces of jarred infant FV.

<sup>&</sup>lt;sup>2</sup> RTF/RTU formula must meet policy requirements to be issued, refer to policy and document need.

# Core Food Packages for Infants - Partial Breastfeeding (Mostly) with Medically Prescribed Formulas

Partial Breastfeedi	Partial Breastfeeding (Mostly) with Medically Prescribed Formulas - Amounts per Infant Age								oods (offered 6-11 m	onths)
Medically Prescribed Formula:	Form	Size (oz)	0-1 month	1-3 months	4-5 months	6-8 months	9-11 months	Infant Cereal	Infant Fruits & Vegetables	Infant Meats
Premature & Transitional		T			1					
Enfamil NeuroPro EnfaCare	powder	13.6 oz	1	up to 5	up to 6	up to 4	up to 4		32-4 oz containers <sup>1</sup>	
	powder	13.1 oz	1	up to 5	up to 6	up to 4	up to 4	24 oz		0
Similac NeoSure	RTF <sup>2</sup>	32 oz	3	up to 12	up to 14	up to 10	up to 10			
Casein Hydrolysates										
	powder	12.1 oz	1	up to 5	up to 6	up to 4	up to 4		32-4 oz containers <sup>1</sup>	0
Similac Alimentum	RTF <sup>2</sup>	32 oz	3	up to 12	up to 14	up to 10	up to 10	24		
Nutramigen with Prebiotic LGG	powder	12.6 oz	1	up to 5	up to 6	up to 4	up to 4	24 oz		
Nutramigen	RTF <sup>2</sup>	32 oz	3	up to 12	up to 14	up to 10	up to 10			
Other Specialized										
Similac PM 60/40	powder	14.1 oz	1	up to 4	up to 5	up to 3	up to 3	24 oz	32-4 oz containers <sup>1</sup>	0
Amino Acid Based										
PurAmino DHA/ARA	powder	14.1 oz	1	up to 4	up to 5	up to 3	up to 3		32-4 oz containers¹	
Elecare DHA/ARA	powder	14.1 oz	1	up to 4	up to 5	up to 4	up to 4	- 24 oz		
Neocate Infant DHA/ARA	powder	14.1 oz	1	up to 4	up to 5	up to 3	up to 3			0
Neocate Syneo Infant	powder	14.1 oz	1	up to 4	up to 5	up to 4	up to 4			

<sup>&</sup>lt;sup>1</sup> Infants 9-11 months option: replace a portion of the jarred infant fruits and vegetables (FV) with a cash-value benefit (CVB) towards fresh fruits/vegetables. Exclusive breastfeeding portion replaced with \$8 CVB plus 128 oz of jarred infant FV; Partially breastfeeding and Fully Formula fed replaced with \$4 CVB plus 64 ounces of jarred infant FV.

<sup>&</sup>lt;sup>2</sup> RTF/RTU formula must meet policy requirements to be issued, refer to policy and document need.

# Core Food Packages for Infants - Breastfeeding Some/Limited & Fully Formula Fed with Medically Prescribed Formulas

Fully Formula Fe	Infant Foods (offered 6-11 months)								
Medically Prescribed Formula:	Form	Size (oz)	0-3 months	4-5 months	6-8 months	9-11 months	Infant Cereal	Infant Fruits & Vegetables	Infant Meats
Premature & Transitional								_	
Enfamil NeuroPro EnfaCare	powder	13.6 oz	10	11	8	8		32-4 oz containers <sup>1</sup>	
	powder	13.1 oz	10	11	8	8	24 oz		0
Similac NeoSure	RTF <sup>2</sup>	32 oz	26	28	20	20			
Casein Hydrolysates									
	powder	12.1 oz	10	11	8	8		32-4 oz	0
Similac Alimentum	RTF <sup>2</sup>	32 oz	26	28	20	20			
Nutramigen with Prebiotic LGG	powder	12.6	10	11	8	8	24 oz	containers <sup>1</sup>	
Nutramigen	RTF <sup>2</sup>	32 oz	26	28	20	20			
Other Specialized									
Similac PM 60/40	Powder	14.1 oz	8	9	6	6	24 oz	32-4 oz containers <sup>1</sup>	0
Amino Acid Based									
PurAmino DHA/ARA	powder	14.1 oz	8	9	7	7			
Elecare DHA/ARA	powder	14.1 oz	9	10	7	7	24 oz	32-4 oz	0
Neocate Infant DHA/ARA	powder	14.1 oz	8	9	7	7	24 02	containers <sup>1</sup>	U
Neocate Syneo Infant	powder	14.1 oz	9	10	7	7			

<sup>&</sup>lt;sup>1</sup> Infants 9-11 months option: replace a portion of the jarred infant fruits and vegetables (FV) with a cash-value benefit (CVB) towards fresh fruits/vegetables. Exclusive breastfeeding portion replaced with \$8 CVB plus 128 oz of jarred infant FV; Partially breastfeeding and Fully Formula fed replaced with \$4 CVB plus 64 ounces of jarred infant FV.<sup>2</sup> RTF/RTU formula must meet policy requirements to be issued, refer to policy and document need.