Contract Formula Change-Creating New Prescriptions

Starting July 25, 2023, all infants receiving Gerber contract formulas benefits with a First Date to Spend (FDTS) on or after October 1, 2023 must have a new prescription for Abbott Similac[®] products added in Crossroads. Infants that do not have a new prescription will receive an error message on the **Issue Food Instruments** screen:

Validation Summary: 1 *Participant has a Food Prescription for Food Subcategory, Gerber, that is no longer active for the FDTS.*

Take the following steps to create a new prescription:

1. <u>Select the green plus sign</u>. A Select the New Food Prescription Date popup will appear. <u>Select or enter October 1, 2023</u> and select Save.

			1 to 3 Months	4 to 5 Months	6 to 11 Months	12 to 23 Months	
od Prescription Date WIC			eastfeeding Status			uance Frequency	
/202: 🔶 Infant	t 6 to 11	Months Fu	ly Formula Fed	9	- 1 1	Month(s)	

Using the subcategory dropdown in the Infant Formula (IF) row of the Food Prescription Items container, <u>select the desired Similac product</u> for the October 1, 2023 prescription date.
 <u>Enter the formula quantity</u> and select Save. This should change all future prescriptions beyond October 1, 2023 to the new Similac product.

NOTE: It is best practice to <u>confirm the accuracy of all future prescriptions</u> in the prescription carousel.

Save Cancel

Food Prescription		5/9/2023 0 Months	6/1/202 1 to 3 M	13 7/13/2023 9/1/2023 10/1/2			(?
		Age Category 4 to 5 Months	Breastf Fully For	eeding Status Family Issuance Day Issuance Freq nula Fed 16 3 Month(s)	uency		
Food Prescription Ite	ms					Total Items:	1 (
	Category			Subcategory	Quantity	Category Max Quantity	40U
X Infant Formula (IF)				Similac Advance Powder 12.4 oz ~	884	884	Ounc
				Similac Advance Conc 13 oz			
				Similac Advance Powder 12.4 oz			
				Similac Advance RTF 32 oz			
				Similac Sensitive Powder 12.5 oz	<u> </u>		
				Similac Sensitive RTF 32 oz			
Add Item to Food Pres	scription			Similac Soy Isomil Concentrate 13 oz			
Category Subc	ategory	Quantity	Max	Similac Soy Isomil Powder 12.4 oz			
			FIGA	Similac Soy Isomil RTF 32 oz			
	-	0		Similac Total Comfort Powder 12.6 oz			

If the first method can't be used, use the second method described below:

- 1. <u>Select the green plus sign.</u> A Select the New Food Prescription Date popup will appear. Select or enter October 1, 2023 and select Save.
- 2. Use the **Add Item to Food Subscription** container to <u>add the desired Similac product</u> for the October 1, 2023 prescription date:
 - a. <u>Select Infant Formula from the Category dropdown</u>
 - b. <u>Select the desired Similac product from the Subcategory dropdown</u>
 - c. <u>Enter the formula quantity</u> and select **Add Item**.

Category	Subcategory	Quantity	Max / Med Max	UOM		
Infant Formula (IF) 💌		0	/		Add Item	Clear
	Similac Advance Conc Similac Advance Powd Similac Advance RTF 3 Similac Sensitive Powd Similac Sensitive RTF 3 Similac Soy Isomil Con Similac Soy Isomil Pow Similac Soy Isomil RTF Similac Total Comfort F	ler 12.4 oz 32 oz ler 12.5 oz 32 oz centrate 13 oz der 12.4 oz 32 oz				

The resulting October 1 prescription and any future prescriptions containing formula will have two rows, one with a blank subcategory, and the other with the new Similac product. Crossroads will prompt you with a validation summary stating, "Category maximum exceeded...." The extra row of formula with the blank subcategory must be deleted.

Food Prescription	on Validation Summary: 3			2
Food Prescription Date WIC Category Age Category 10/1/2023 Infant 6 to 11 Months i	 Category maximum exceeded for Infant Formula (IF) for prescription with date 10/1/2023 12:00:00 AM 6 to 11 month old Infants may not receive Food Products when the amount of Formula prescribed exceeds the Full Nutrition Benefit for WIC. Food Subcategory selection is required for category Infant Formula (IF). 	Total Items: 4 🕢		
Category	Subcategory	Quantity	Category Max Quantity	UOM
Infant Fruit & Vegetable	Infant Fruit & Vegetable	128	128	Ounces
Breakfast Cereal	Infant Cereal	24	24	Ounces
X Infant Formula (IF)		624	624	Ounces
× Infant Formula (IF)	Similac Advance Powder 12.4 oz	624	624	Ounces

3. <u>Select the red X in the Food Prescription Items</u> container next to Infant Formula (IF) with the blank subcategory.

If there are future prescriptions containing Gerber, a **Delete Formula** popup will appear. Select **Yes**.

Delete Formula	
Do you want to delete this formula Gerber Good Start Gentle Powder 12.7 oz from future	prescriptions?
Yes No	

 <u>Navigate to each future prescription and check for accuracy</u>, including correct Subcategory and Quantity of formula. Select Save.

Either method used will result in the **Food Prescription Items** container shown here with one row of formula containing the new contract Similac product.

▼Food Prescription						
5/9/2023 6/1/20 0 Months 1 to 3 M	23 9/1/2023 10/1/2023 11/1/2023 Ionths 4 to 5 Months 4 to 5 Months 6 to 11 Mont	hs				
Food Prescription DateWIC CategoryAge CategoryBr11/1/2023InfantInfant6 to 11 MonthsFut			ncy			
Food Prescription Items Total Items: 3 (?)						
Category	Subcategory	Quantity	Category Max Quantity	UOM		
Infant Fruit & Vegetable	Infant Fruit & Vegetable	128	128	Ounces		
Breakfast Cereal	Infant Cereal	24	24	Ounces		
X Infant Formula (IF)	Similac Advance Powder 12.4 oz	624	624	Ounces		