This resource provides step-by-step instructions on how to complete the following types of food prescription modifications in Crossroads:

- Modifying the Default Food Package
- Adding Food Prescription Items (Milk Substitution Calculator)
- Using Milk Substitution Calculator for Food Package VII +
- Modifying the Subcategory or Quantity of Infant Formula
- Adding WIC Eligible Nutritionals (WEN)
- Adding Exempt Infant Formula (EXF)
- Changing Breastfeeding Status from Fully Breastfed or Partially Breastfed to Fully Formula Fed
- Food Package VII for Pregnant and Breastfeeding Woman

Modifying the Default Food Package

- 1. Go to Quick Links \rightarrow Issue Benefits \rightarrow Prescribe Food. The Prescribe Food screen displays.
- 2. Review the default system-generated food items and quantity (based on the WIC category and breastfeeding status in the Food Prescription Items box).
- 3. To modify the item quantity displayed in the Food Prescription Items box, click on the Quantity field and replace the original value with the appropriate quantity value.

Note: The Category Maximum Quantity cannot be exceeded. Since an item cannot be deleted from the prescription, simply set the quantity to "0" when a food item is not used.

| | | | Prescribe Food 🔒 Cro | oss rossroads |
|--|--|------------|---|----------------------|
| Scheduling Vendor Operations Finance Administration Help | | | | Logout 🔒 |
| Pluto Family Family ID: F00600004641 847 Maplekaf Drive BOLIVIA, NC 28422 | | | Penelope N. P Participant ID: 960 Age: 17 years and WIC Category: Pr | 0138585L 5 months |
| Food Prescription Date WIC Category 7/2/2021 Fregnant Family Issuance Day 8 Family Issuance Day 7/2/2021 7/2/2 | Ince Frequency mth(s) | gular Snip | Tabla | ems: 7 |
| Category | Subcategory | Quantity | Category Max Quantity | |
| Eggs | Eggs | 0 | 1 | Dozen |
| Breakfast Cereal | Breakfast Cereal | 36 | 36 | Ounces |
| Legumes | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 2 | 2 | Containers |
| Bread/Whole Grains | WW Bread or Whole Grains | 16 | 16 | Ounces |
| Fruit & Vegetable CVB | Fruit and Vegetables | \$11.00 | \$11.00 | \$\$\$ |
| Juice - 48 oz | Juice 48oz fl/12oz Conc | 3 | 3 | Containers |
| Mik - Fat Reduced | Skim/Non Fat or 1% Milk | 5.50 | 5.50 | Gallons |

Adding Food Prescription Items (Milk Substitution)

- 1. Go to **Quick Links** \rightarrow **Issue Benefits** \rightarrow **Prescribe Food**. The **Prescribe Food** screen displays.
- 2. Under Add Item to Food Prescription, select an item from the Category and Subcategory drop down list box to add another item to the prescription.
- 3. Enter **Quantity**. The quantity cannot be more than the maximum without medical documentation.
- 4. Click **Add Item**. The screen refreshes and the newly added food item displays within the Food Prescription grid.

| Add Item to Food Prescription | | |
|---------------------------------|----------|--|
| CategorySubcategoryCheeseCheese | Quantity | Max / Med Max UOM 1 / 1 LB Add Item Clear |

5. Refer to the Milk Substitution Calculator located beneath Add Items to Food Prescription. Adjust the Milk Quantity on the Food Prescription grid to allow for the substitution. In this example, cheese is being substituted. One pound (1lb) of cheese is equivalent to 0.75 gallon of milk. The Validation Summary warns that the Milk Substitution Calculator indicates the milk must be reduced by 0.75 gallon. By reducing the total milk Quantity from 4 to 3.25 gallons, the error message disappears and the package may be saved.

| Soccer Family Family ID: F0060004402 125 Carolna Courage Way BOLIVIA, NC 28422 | | lidation Summary: 1 | | Mia Soccer Participant ID: 9603 Age: 3 years and 5 r WIC Category: Chi | months |
|--|--|------------------------------|--------------------------------------|---|------------|
| ▼Food Prescription | | | | | |
| Food Prescription Date WIC Category Age Category Pamily 7/2/2021 Chid 2 yr to 5 yr 7 | 5/11/2021 7/2/2021 2 yr to 5 yr 2 yr to 5 yr Issuance Day Issuance Frequency 3 Month(s) Month(s) | | Rectangular Snip | | |
| ▼Food Prescription Items | | | | Total Iter | ms: 8 🕐 |
| Category | | Subcategory | Quantity | Category Max Quantity | UOM |
| Eggs | Eggs | | 1 | 1 | Dozen |
| Breakfast Cereal | Breakfast C | Cereal | 36 | 36 | Ounces |
| Legumes | Bean/Pea, 4 | 4 Cans, 1 Dry, or Peanut Btr | 1 | 1 | Containers |
| Bread/Whole Grains | WW Bread | or Whole Grains | 32 | 32 | Ounces |
| Fruit & Vegetable CVB | Fruit and Ve | egetables | \$9.00 | \$9.00 | \$\$\$ |
| Juice 64 | Juice 64 oz | : Fluid | 2 | 2 | Containers |
| Milk - Fat Reduced | Skim/Non F | at or 1% Mik | 4 | 4 | Galons |
| Cheese | Cheese | | 1 | 1 | LB |
| Add Item to Food Prescription Category Subcategory Quantity Max / | Med Max UOM Add Item Clear | | | | |
| Total Milk Available Milk Prescribed Total Milk Substituted Milk Free 4 4 0.75 -0.75 | | | | | |

6. Click **Save** to assign the new prescription. A status message indicates the prescription is added and the **Issue Food Instruments** screen displays (not shown).

| Soccer Family Family ID: F0060004402 125 Carolina Courage Way BOLIVIA, NC 28422 | | | | Participant ID: 960 Age: 3 years and 5 WIC Category: Ch | months |
|--|-------------------|--|-------------------|---|------------------|
| d Prescription Date WIC Cat 2021 🛟 Child | 2 yr to 5 yr 2 yr | 12021 to 5 yr illy Issuance Day J Issuance Frequency 3 Month(s) | = Recence of S | in and a second s | |
| d Prescription Items | | I | Í | Total Ite | |
| | egory | Subcategory | Quantity | Category Max Quantity | |
| Eggs | | Eggs | 1 | 36 | Dozen Ounces |
| Breakfast Careal | | Breakfast Cereal | 36 | 30 | Ounces |
| Breakfast Cereal | | | | | Cantaina |
| Legumes | | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 1 | 1 | Containe |
| Legumes Bread/Whole Grains | | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr WW Bread or Whole Grains | 1 32 | 1 32 | Ounces |
| Legumes | | | 1 | 1 32 \$9.00 | |
| Legumes Bread/Whole Grains | | WW Bread or Whole Grains | 1 32 | | Ounces \$\$\$ |
| Legumes Bread/Whole Grains Fruit & Vegetable CVB | | WW Bread or Whole Grains Fruit and Vegetables | 1 32 \$9.00 | \$9.00 | Ounces |

NOTE: Maximum Substitution Rates of Milk

Crossroads enforces the maximum substitution rates of milk outlined in the final rule for Revisions in the WIC Food Packages released by the USDA on March 4, 2014. This final rule limits the cheese, tofu and yogurt substitutions for milk to four (4) quarts (1 gallon) for children receiving Food Package IV and women receiving Food Package V and VI. Cheese, tofu and yogurt substitutions for milk are limited to six (6) quarts (1.5 gallons) for women receiving Food Package VII (regular or extended). If a user substitutes more than the maximum limits allowed for cheese, tofu and yogurt, a message will display as shown below. The user must adjust the amount substituted to the correct amount for the food package.

Validation Summary: 1

 Federal regulations restrict the amount of substitutions on default food package for milk to 1 gallon.



Additional quantities of tofu may be prescribed and issued above the Federal Guidelines for milk substitution of 4 quarts or 6 quarts, up to the maximum allowances for fluid milk for lactose intolerance or other reasons assessed and documented by the CPA. The Medical Documentation screen must be completed to prescribe more tofu than the Federal Guidelines for milk substitution. When a CPA is completing the Medical Documentation screen for additional quantities of tofu, "CPA assessed" may be written in the **Physician's Name** field and the CPA's phone number may be entered in the **Physician's Phone** field. **Expiration Date** and **Medical Reason** will vary by participant and assessment. **For ICD Code, please enter N/A.** The assessment must be documented in the participant's Care Plan.

Milk Substitution scenarios: Food Package VII+

Depending on how milk substitutions are used (up to 1.5 gallons for Food Package VII+), the **Milk Remaining** will vary for Food Package VII+

1) Full amount of cheese is given (3.5 pounds), the milk calculator "appears" accurate because Milk Remaining=0:

The participant will receive 3 lbs of cheese one month and 4 lbs of cheese the next month.

| od Prescription Items | | | | Total Item | IS: 10 |
|--|--|--|----------|-----------------------|---------|
| | Category | Subcategory | Quantity | Category Max Quantity | UOM |
| Cheese | | Cheese | 3.50 | 3.50 | LB |
| Eggs | | Eggs | 3 | 3 | Dozen |
| Breakfast Cereal | | Breakfast Cereal | 54 | 54 | Ounces |
| Legumes | | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 3 | 3 | Contain |
| Bread/Whole Grains | | WW Bread or Whole Grains | 24 | 24 | Ounces |
| Fruit & Vegetable CVB | | Fruit and Vegetables | \$35.00 | \$35.00 | \$\$\$ |
| Juice - 48 oz | | Juice 48oz fl/12oz Conc | 4.50 | 4.50 | Contain |
| Fsh | | Chnk Lt Tuna/Pink Salmon | 45 | 45 | Ounces |
| Mik - Fat Reduced | | Skim/Non Fat or 1% Mik | 7.50 | 9 | Gallons |
| Yogurt | | Yogurt Non/Low Fat 32 oz | 0 | 1 | Contain |
| I Item to Food Prescription tegory Subcategory Qu | Jantity Max / Med Max UOM Add Item | Cear | | | |
| k Substitution Calculator | | | | | |
| tal Milk Available Milk Prescribed Total Milk 7.50 1.50 | k Substituted Milk Remaining Unit of Measure | 2 | | | |

2) Quantity 3 lbs cheese and 1 container yogurt, the milk calculator does not "appear" accurate because Milk Remaining= 0.13

| Cheese | Category | | | Total Item | ns: 10 🕜 |
|-----------------------|----------|--|----------|-----------------------|----------|
| Cheese | | Subcategory | Quantity | Category Max Quantity | UOM |
| | | Cheese | 3 | 3.50 | LB |
| Eggs | | Eggs | 3 | 3 | Dozen |
| Breakfast Cereal | | Breakfast Cereal | 54 | 54 | Ounces |
| Legumes | | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 3 | 3 | Containe |
| Bread/Whole Grains | | WW Bread or Whole Grains | 24 | 24 | Ounces |
| Fruit & Vegetable CVB | 3 | Fruit and Vegetables | \$35.00 | \$35.00 | \$\$\$ |
| Juice - 48 oz | | Juice 48oz fl/12oz Conc | 4.50 | 4.50 | Contain |
| Fish | | Chnk Lt Tuna/Pink Salmon | 45 | 45 | Ounces |
| Mik - Fat Reduced | | Skim/Non Fat or 1% Mik | 7.50 | 9 | Gallons |
| Yogurt | | Yogurt Non/Low Fat 32 oz | 1 | 1 | Containe |

In this example, 1.5 lbs of cheese are added to the default food package which equals 3 quarts of milk (.75) for 1 lb of cheese + 1.5 quarts of milk (.375) for .50 lb of cheese = 1.125; a yogurt (or 1 pound of tofu) can be added for 1 quart of milk (.25) so the total milk substituted = 1.375 rounded to **1.38** (the remaining 0.13 cannot be used).

3) Quantity 1.5 lbs cheese, 1 container yogurt and 5 lbs of tofu, the milk calculator "appears" accurate because Milk Remaining=0

| pory Max Quantity UG LB Doze Ounc Conta Ounc Ounc |
|---|
| Dozer Ounc Conta |
| Ounc Conta Ounc |
| Conta |
| Ounc |
| |
| \$\$\$ |
| |
| Conta |
| Ounc |
| Gallor |
| Conta |
| LB |
| |

4) Quantity 1.0 lb cheese, 1 container yogurt and 6 lbs of tofu, the milk calculator does not "appear" accurate because Milk Remaining= 0.13

| d Prescription Items | | | | | l otal Iten | ms: 11 (|
|---------------------------|----------------|------------------------|--|----------|-----------------------|----------|
| | Category | | Subcategory | Quantity | Category Max Quantity | 100 |
| Cheese | | | Cheese | 1 | 3.50 | LB |
| Eggs | | | Eggs | 3 | 3 | Dozen |
| Breakfast Cereal | | | Breakfast Cereal | 54 | 54 | Ounce |
| Legumes | | | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 3 | 3 | Contai |
| Bread/Whole Grains | | | WW Bread or Whole Grains | 24 | 24 | Ounce |
| Fruit & Vegetable CVB | | | Fruit and Vegetables | \$35.00 | \$35.00 | \$\$\$ |
| Juice - 48 oz | | | Juice 48oz fl/12oz Conc | 4.50 | 4.50 | Contai |
| Fish | | | Chnk Lt Tuna/Pink Salmon | 45 | 45 | Ounce |
| Mik - Fat Reduced | | | Skim/Non Fat or 1% Milk | 7.50 | 9 | Gallons |
| Yogurt | | | Yogurt Non/Low Fat 32 oz | 1 | 1 | Contai |
| Cheese | | | Tofu 14-16oz Pkg | 6 | 36 | LB |
| | | | | | | _ |
| Item to Food Prescription | | | | | | _ |
| egory Subcategory | Quantity Max / | Med Max UOM / Add Item | Clear | | | |
| Substitution Calculator | | | | | | |

In this case, the participant is giving up .50 lb cheese from default food package which equals 0.375 gallon milk. Yogurt is added to use .25 gallon milk and 0.125 rounded up to 0.13 remains.

Modifying the Subcategory or Quantity of Infant Formula

- 1. Go to **Quick Links** \rightarrow **Issue Benefits** \rightarrow **Prescribe Food**. The **Prescribe Food** screen displays.
- 2. For Initial Certifications of Infants, *Breastfeeding Status* will be based on the answer to 'How much formula do you give your infant in a 24-hour period?' on the Health Information screen. Quantity will default to 0 if the infant is receiving a quantity of formula below category max. CPA must adjust Quantity based on discussion with mother. Quantity chosen will determine Breastfeeding Status.
 - a. Enter the Quantity of formula to be prescribed
 - **b.** Click **Save**. A status message indicates success and the **Issue Food Instruments** screen is displayed.

Note: It is up to the CPA to determine the quantity for each of the prescriptions covering the infant certification period. If a default quantity is provided, the CPA may change the quantity or confirm the default quantity.

| | | Prescribe Food Cross RoadsTwo |
|--|---|---|
| Home Tamily Services Sch | eduling Vendor Operations Finance Administration Help | Lagaut |
| Quick Links 2 A New Family Ø, Family Search | Straw Family Family Dis Polyconcess HHS Work Line 20045 | Seth P. Straw Participant ID: 954922367 Apr: 27 days WK Category: Infant |
| Certification | +Tood Prescription | |
| Pamily Demographics Pamily Assessment Participant Demographics Income Information Health Information | Food Prescription Date 11/28/2016 WIX Category Defect Age Category 0 Homets Age Category 0 Homets Age Category 0 Homets Age Category 2 Homets <td></td> | |
| Arthra /Lab | +Tood Prescription Rems | Total Items: 2 |
| Eco-Social Assessment | Category Subcategory | Quantity Category Hax Quantity UOH |
| Eco-Social Assessment Detary & Health Assigned Risk Rectors Certification Signature Certification Summary Identification Document | X Infect Formula (P) X Infect Formula (P) ABC mill-based powder 14 or | 0 806 Ounce 806 806 Ounce |
| Family Alerts | Add Item to Food Prescription | |
| Scanned Desuments | Category Subcategory Quantity Plax / Hed Hax UDH Add Item Clear | |
| Ssue Benefits | Infant Formula | |
| Prescribe Food Issue Food Instruments Issue FM Food Instruments Food Instrument List Exchange,/Increase Formula | Plosth Bov Dec Jan Feb Total ABC std pudr Quandity 005 805 806 805 3224 / 90 # Cases 9 5 9 36 36 | |

3. Click on each future date/age range in the Food Prescription Carousel, validate that the correct formula name and quantity is listed and delete the old formula.

| Family ID: F04900006505 1458 Windy Lane | eryl Seth | Seth P. Straw Participant ID: 954492236T Age: 27 days WIC Category: Infant |
|--|--|---|
| ▼Food Prescription | | 0 |
| Food Prescription Date WIC Category Age Category 12/1/2016 | 11/28/2016 12/1/2016 3/1/2017 5/1/2017 11/1/2017 0 Months 1 to 3 Months 4 to 5 Months 6 to 11 Months 12 to 23 Month / Breastfeeding Status Partially Breastfed <= MMA | |
| ▼Food Prescription Items | | Total Items: 1 🕢 |
| Category | Subcategory | Quantity Category Max Quantity UOM |
| X Infant Formula (IF) | ABC soy-based powder 15 oz | 150 806 Ounces |
| | | |

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- 4. To select a different contract infant formula, go to **the Food Prescription Items** grid and select the desired formula under the **Subcategory** column.
- 5. Enter the **Quantity** of the formula prescribed.
- 6. Click **Save**. A status message indicates success and the **Issue Food Instruments** screen displays.
- 7. To modify the quantity of formula (based on your estimate of usage) enter the appropriate amount in the **Quantity** column field.

| | | Prescribe Food 🔓 Cross RoadsTwo |
|---|---|--|
| Home Family Services Sch | eduling Vendor Operations Finance Administration Help | Logout 👸 |
| Quick Links | Straw Family | Seth P. Straw |
| Rew Family | Family ID: (0-500005535 A See See See See See See See See See S | Participant ID: 9544922367 Age: 27 days WIC Category: Infant |
| Certification | Food Prescription Valdation Summary: 1 | 0 |
| Family Assessment Participant Demographics Income Information Health Information | Food Prescription Date WIC Category Age Category Breastfeeding Status Family Issuance Day Issuance Frequency Issuance Frequency Distribution (IF). | |
| Anthro / Lab | *Food Prescription Items | Total Items: 2 🚱 |
| Eco-Social Assessment Dietary & Health | Category Subcategory | Quantity Category Max Quantity UOM |
| Assigned Risk Factors | X Infant Formula (IF) | 0 806 Ounces |
| Certification Signature | X Infant Formula (IF) ABC soy-based powder 15 oz | • 806 806 Ounces |
| Certification Summary | ABC mik-based conc 13 oz ABC mik-based powder 14 oz | |
| Identification Document Family Alerts | ABC milk-based RTF 32 oz | |
| Notes | Add Item to Food Prescription ABC soy-based conc 13 oz ABC soy-based powder 15 oz | - |
| Scanned Documents | Category Subcategory Quantity Hax / Hed Hax (ABC soy-based RTF 32 oz | |
| 🗄 🚮 Care Plan | O Add Item Gear | |
| 🕬 Issue Benefits | | |
| Prescribe Food | Infant Formula | |
| Issue Food Instruments Issue PM Food Instruments Food Instrument List | Honth Nov Dec Jan Feb Total ADC soy pwdr Quantity 806 806 806 3224 / 90 # Cans 9 9 9 36 | |

Infant Formula Container

| Infant Formula | _ | _ | | _ | | | | |
|---------------------------------|-----------------------------|---|-----------------|-----------------|-----------------|-----------------|-----------------|--------------------------|
| Similac Advance Powder 12.9 oz. | Month Quantity # Cans | | Jul 600 7 | Aug 600 6 | Sep 600 6 | Oct 600 6 | Nov 600 6 | Total 3600 / 95 38 |

- The value of the subcategory description field is the name of the formula.
- The value of the **months** field is the number of months in the certification period.
- The value of the **quantity** field is the prescribed ounces per month.
- The value of the **# can** field is the number of whole cans prescribed per month.
- The **Total** field represents the total number of ounces to be issued during the time-period according to the federal regulations based on age and food classification.
- The **Total** field also displays the reconstituted ounces of the formula being issued and the total number of cans that will be issued over the time-period.

Adding WIC Eligible Nutritionals (WEN)

- 1. Go to **Quick Links** → **Issue Benefits** → **Prescribe Food**. The **Prescribe Food** screen displays
- 2. Under Add Item to Food Prescription, select an item from the Category and Subcategory drop down list box to add item to the prescription.
- 3. Enter **Quantity**. The quantity cannot be more than the maximum.
- 4. Click Add Item. This will bring up the Medical Documentation Screen.

| Iome Family Services Sc | heduling Vendor Operati | ons Finance Administration Help | | | | Logout |
|--|--|--|---|------------------------------|--|---|
| Quick Links | Straw Family Family ID: F049000065 1458 Windy Lane RURAL HALL, NC 2704 | os 🚢 🚽 🎱 📥 🌞 🔗 | eth | | Sheryl M. Straw Participant ID: 954492239. Age: 24 years and 6 months WIC Category: Breastfeed | |
| 2 Certification | *Food Prescription | | | | | 6 |
| Family Demographics Family Assessment Participant Demographics Income Information Health Information | Food Prescription Date V | MIC Category reastfeeding Status Partially Breastfed > MMA 2 2 | amily Issuance Day 🤙 Issuance Frequency | | | |
| Anthro / Lab | +Food Prescription Iten | 1IS | | | Total Ite | ems: 6 💡 |
| Eco-Social Assessment | | Category | Subcategory | Quantity | Category Max Quantity | UOM |
| A CONTRACTOR OF | and the second se | concegory | | Quantity | and the second sec | |
| Dietary & Health | Eggs | conquit | Grade "A" Large White Eggs | 1 | 1 | Dozen |
| Assigned Risk Factors | Eggs Cereal (Adult) | cacegory | | 1 36 | 1 36 | |
| | and a second sec | | Grade "A" Large White Eggs | 1 | 1 | Dozen Ounces |
| Assigned Risk Factors Certification Signature | Cereal (Adult) | | Grade "A" Large White Eggs Breakfast Cereal | 1 | 1 | Dozen Ounces |
| Assigned Risk Factors Certification Signature Certification Summary | Cereal (Adult) Legumes | | Grade "A" Large White Eggs Breakfast Cereal Peanut Butter 16 - 18 oz | 1 36 1 | 1 36 1 | Dozen Ounces Container \$\$\$ |
| Assigned Risk Factors Certification Signature Certification Summary Identification Document Family Alerts Notes | Cereal (Adult) Legumes Fruit & Vegetables Cash | | Grade "A" Large White Eggs Breakfast Cereal Peanut Butter 16 - 18 oz Fruit and Vegetables - Cash Value Voucher | 1 36 1 \$11.00 | 1 36 1 | Dozen Ounces Container |
| Assigned Risk Factors Certification Signature Certification Summary Identification Document Family Alerts | Cereal (Adult) Legumes Fruit & Vegetables Cash Juice - 48 oz | | Grade "A" Large White Eggs Breakfast Cereal Peanut Butter 16 - 18 oz Frut and Vegetables - Cash Value Youcher Juice 48 oz. or 11.5 - 12 oz. Concentrate | 1 36 1 \$11.00 2 | 1 36 1 | Dozen Ounces Container \$\$\$ Container |
| Assigned Risk Factors Certification Signature Certification Summary Identification Document Family Alerts Notes | Cereal (Adult) Legumes Fruit & Vegetables Cash Juice - 48 oz | Value | Grade "A" Large White Eggs Breakfast Cereal Peanut Butter 16 - 18 oz Frut and Vegetables - Cash Value Youcher Juice 48 oz. or 11.5 - 12 oz. Concentrate | 1 36 1 \$11.00 2 | 1 36 1 | Dozen Ounces Container \$\$\$ Container |

5. Complete starred fields on Attach Medical Documentation screen based on the prescription from the participant's medical provider. For ICD Code, please enter the ICD code from the prescription or if it is not available, enter N/A.

Use the **Scan Document** button to scan the prescription. **Save** Attach Medical Documentation screen. Review Food Prescription to verify that WEN has been added to the Food Prescription and click Save.

Adding Exempt Infant Formula (EXF)

- 1. Go to **Quick Links** → **Issue Benefits** → **Prescribe Food**. The **Prescribe Food** screen displays
- 2. Under Add Item to Food Prescription, select an item from the Category and Subcategory drop down list box to add item to the prescription.
- 3. Enter **Quantity**. The quantity cannot be more than the maximum.
- 4. Click Add Item. This will bring up the Medical Documentation Screen.

| Home Family Services Sch | eduling Vendor Operations | Finance Administration H | lelp | | | Logos |
|--|--|---|--|--|--------|--|
| Quick Links Image: Constraint of the second secon | Nissan Family Family ID: F0490006465 154 Modangbird Lane RURAL HALL, NC 27045 | Lancy | O O O O O O O O O O O O O O O O O O O | | | Niah Nissan Participant ID: 9544595055 Age: 7 months WIC Category: Infant |
| 🖻 😤 Certification | *Food Prescription | | | | | |
| Family Demographics Family Assessment | | 8/18/ 4 to 5 | 2016 8/23/2016 9/21/20 Months 4 to 5 Months 4 to 5 Mo | | | |
| Participant Demographics Income Information Health Information | Food Prescription Date WIC Ca 11/28/2016 | tegory Age Category Breast 6 to 11 Months Fully Fo | rmula Fed 21 | e Day J Issuance Frequency 3 Month(s) | | |
| Anthro / Lab | *Food Prescription Items | | | | | Total Items: 4 |
| Eco-Social Assessment | | Category | | Subcategory | Quanti | ty Category Max Quantity U |
| Dietary & Health Assigned Risk Factors | Infant Cereal | | Infant Cereal Plain, Dry | | 24 | 24 Ou |
| Certification Signature | Infant Fruits and Vegetables | | Infant Fruits & Vegetable | 8 | 128 | 128 Out |
| Certification Summary | X Infant Formula (IF) | | | | 624 | 624 Ou |
| Identification Document | X Infant Formula (IF) | | ABC milk-based powder | 14 oz | 624 | 624 Out |
| Family Alerts | alization of the second s | | | | | |
| Notes | Add Item to Food Prescriptio | 0 | | and the second | | |
| Scanned Documents | Category | Subcategory | Quantity Max / Hed Max | UOH Ounces Add Item Clear | | |
| B 🔂 Care Plan | Exempt Infant Formula (EXF) | Nutramigen RTF 32 oz. 💌 | 884 0 / 884 | Junces Add Item Chear | | |
| S Issue Benefits | | | | | | |
| Prescribe Food | Infant Formula | | | | | |
| Issue Food Instruments | Month Oct | Nov Dec Jan | Feb Mar Total | | | |
| | Null Quantity 624 | 624 624 624 7 7 7 7 | 624 624 3744 / 9 7 7 42 | * | | |
| Issue FM Food Instruments | | | | | | |
| Food Instrument List | | Here Day Ave | Eah Max Total | | | |
| | ABC std pwdr Quantity 624 | Nov Dec Jan 624 624 624 7 7 7 7 | Feb Mar Total 624 624 3744/9 7 7 42 | • | | |

6. Complete starred fields on Attach Medical Documentation screen based on the prescription from the participant's medical provider. For ICD Code, please enter the ICD code from the prescription or if it is not available, enter N/A.

Use the **Scan Document** button to scan the prescription. **Save** Attach Medical Documentation screen. Review Food Prescription to verify that EXF has been added to the Food Prescription and click Save.

| | Prescription Date 1/28/2016 | | |
|---|--------------------------------|---|-------|
| Diagnosis Information Medical Reason * Special Dietary Need * N/A | Diagnosis Code 🚖 OR | Verbal Order 🗯 | |
| Physician Information Physician's Name Physician's Phone Physician's Phone (919) 555-1212 | Physician's Email Medical f | Food Prescribed Non-Medical Food Prescribed | |
| Medical Food Prescription | | | Total |
| Categ | ory | Subcategory Infant Cereal Plain, Dry | |
| Infant Fruits and Vegetables | | Infant Fruits & Vegetables | |
| Infant Formula (IF) | | Similac Advance Stage 1 Powder 12.4 oz | |
| ON Infant Formula (IF) | | ABC milk-based powder 14 oz | |
| Exempt Infant Formula (EXF) | | Nutramigen RTF 32 oz. | |
| Add Additional Medical Foods Category Subcategory | Add Item Clear | | |

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5. The **Food Prescription Items** section now displays two or more formulas. Click the red X next to the formulas you want removed from the Food Prescription.

| Certification | *Food Prescription | Validation Summary: 3 | | | 0 |
|--|---|--|-------------|------------------|----------------|
| Family Demographics Family Assessment Participant Demographics Income Information Health Information Anthro / Lab | Food Prescription Date WIC Category Age Catego 11/28/2016 Infant 6 to 11 Mon | Category maximum exceeded for Infant Formula (IF) for prescription with date 11/28/2016 12:00:00 AH for U month old Infants may not receive Food Products when the amount | | Total Items: S 🕢 | |
| Eco-Social Assessment | Category | Subcatego | Quant Quant | tity Category Ma | x Quantity UOM |
| Dietary & Health | Infant Cereal | Infant Cereal Plain, Dry | 24 | 24 | Ounces |
| Assigned Risk Factors | In ant Fruits and Vegetables | Infant Fruits & Vegetables | 128 | 128 | Ounces |
| Certification Signature Certification Summary | × In ant Formula (IF) | | 624 | 624 | Ounces |
| Identification Document | × In ant Formula (IF) | ABC mik-based powder 14 oz | 624 | 624 | Ounces |
| Family Alerts | × E empt Infant Formula (EXF) | Nutramigen RTF 32 oz. | 884 | 884 | Ounces |

6. If the infant is 6 to 11 months and prescribed an exempt infant formula, a maximum of 884 ounces of exempt formula may be prescribed if the Infant Cereal and Infant Fruits and Vegetables are zeroed out. If the family would like to keep Infant Cereal and Infant Fruits and Vegetables in the Food Prescription, a maximum of 624 ounces of exempt formula is allowed.

In this example, Infant Cereal and Infant Fruits and Vegetables are zeroed out:



7. Go to each age category in the Carousel if appropriate. Click Save to assign the new prescription.

Changing Breastfeeding Status from Fully Breastfed or Partially Breastfed to Fully Formula Fed

These instructions are for modifying food packages to an infant and mother dyad at the infant's first issuance. To add or increase formula after issuance, refer to the resource **Increase or Add Formula After Issuance**.

- 1. Navigate to the **Prescribe Food** screen to review the current Food Prescription.
- 2. Select Infant record in the Family Carousel.
- 3. Navigate to the infant's **Health Information** screen on the Quick Links menu.
- 4. Scroll down to change the **Breastfeeding Information**. Answer the following questions:
 - Are you breastfeeding?
 - Do you give your infant any formula?
 - How much formula to you give your infant in a 24- hour period?
- 5. Click Save.

| Home Family Services Schee | deling Vendor Operations Finance Adr | ninistration Help | Logout |
|---|--|--|---|
| Quick Linits Q Particle Linits | Jamaica Family Family ID: POHODODE485 125 Grapes Drive RURAL HALL, NC 22045 | arce Jaka Tronas Tranksg | Julia Jamaica Participant III:s (54-66/505P Age: 2 months W2C Category: Infect |
| | *Infant / Child Health Information | | |
| Family Demographics Family Assessment Parkspart Demographics Jircone Information Anthro (Jua Boo Good Assessment Detary & Health Assigned Dial Factors Certification Signature Certification Signature | Heasurement Units Standard Hedical Health Conditions | Birth Length 20 Pn. Birth Weight 6 b. 0c. Hedical Home Last Seen By Physician Multiple Gestation | Hospital Discharge Date Hospital Discharge Weight b. 02. Weeks Gestation 33 |
| Identification Document Family Alerts Notes Scanned Documents Care Plan | Breastfeeding Information Janice Jamaica Data Collection Date | Yes Sho Ukhoown Are you breastfeeding? | fver Breatford? |
| Prescribe Food Issue Food Instruments Issue FM Food Instruments Food Instrument List Exchange/Thorease Formula Sciences Formula | (11/28/2016 (ii)) Breastfeeding Prequency Complexitions | © Yes @ No Age Infant Stopped Breastfeeding Age Supplement Was Given Rumber of Wet Diapers / 24 | © Yes © No @ Unknown Reason Infant Stopped Breastfeeding |
| Subsequent Certification Scheduling System Fanity Accordumnts Quid Accordumnts Cline Master Calendar | Prosterior Para | Do you give your haby any formula? Proc 5 16 How much formula do you give your infant in a 24-hour po cc. | (4) |

- 6. Navigate back to the **Prescribe Food** screen. Note the infant's category.
- 7. Update the Food Prescription Date by selecting the green PLUS sign and click **Save**. The Quantity of Formula will automatically change.
- 8. Click on the Red X to delete any formula not needed.

| | Category | Subcategory | Quantity | Category Max Quantity | UOM |
|-----------------------|----------|-----------------------------|----------|-----------------------|--------|
| X Infant Formula (IF) | | | 806 | 806 | Ounces |
| Statements (15) | | ABC milk-based powder 14 oz | 805 | 806 | Ounces |

- 9. Click through the age categories in the food prescription carousel and update the Quantity on each prescription as needed.
- 10. Click on the mother's icon in the Family Carousel. The mother's WIC Category and Food Prescription should automatically update. Review the mother's prescription, modify as needed and select **Save**.

NOTE: If you click **Save** on the Infant's Prescribe Food screen before you update the Mother's Food Prescription screen, the following message will appear:



If this occurs, return to the Mother's Food Prescription screen, verify that she has the correct Food Prescription and click Save.

| A New Family | | Jamaica Family Family ID: F04900005485 125 Grapes Drive RIFAL HALL, NC 27045 | | Ala Thomas Thoma | | Janice Jamaica Participant ID: 95446550-R Age: 26 years and 9 months WIC Category: Non-Greastfeed | ing Woman |
|--|------|---|---------------------------|--|------------------------|--|--|
| , Family Search | *For | od Prescription | Contraction of the second | | | | ด |
| Family Demographics Family Assessment Participant Demographics Income Information | | | 9/28/2016 | 6 N | | | |
| Income Information | | d Prescription Date WIC Categor 8/2016 | y of Family Issuance Day | Issuance Frequency 3 Month(s) | | | |
| | 11/2 | d Prescription Date WIC Categor 8/2016 A Non-Breastfee | ng 🥜 28 | 3 Month(s) | | Total It | ems: 6 🕢 |
| Income Information Health Information Anthro / Lab Eco-Social Assessment | 11/2 | 8/2016 🔶 Non-Breastlee | y Family Issuance Day | 3 Month(s) Subcategory | Quar | Total It | |
| Income Information Health Information Anthro / Lab Eco-Social Assessment Dietary & Health | 11/2 | 8/2016 🔶 Non-Breastlee | ảng 🎸 28 | 3 Month(s) | Quan 1 | | |
| Income Information Health Enformation Anthro / Lab Elco-Social Assessment Dietary & Health Assigned Risk Factors | 11/2 | 8/2016 🔶 Non-Breastfee od Prescription Items | ảng 🎸 28 | 3 Month(s) Subcategory | | | UOM |
| Income Information Health Information Anthro / Lab Eco-Social Assessment Dietary & Health | 11/2 | 8/2016 🐥 Non-Breastfee od Prescription Items Ca Eggs | ảng 🎸 28 | Grade "A" Large White Eggs | 1 | tity Category Max Quantity | UOH Dozen |
| Income Information Health Information Anthro / Lab Eco-Social Assessment Dietary & Health Assigned Rick Factors Certification Signature | 11/2 | 18/2016 Ann-Breastfee Ind Prescription Items Eggs Cereal (Adult) | ảng 🎸 28 | Grade "A" Lurge White Eggs Breakfast Cereal | 1 36 | titly Category Hax Quantity 1 36 1 | UOH Dozen Ounces |
| Income Information Health Information Anthro / Lab Eco-Social Assessment Dietary & Health Assigned Risk Factors Certification Signature Certification Summary | 11/2 | 18/2016 Ann-Breastfee ad Prescription Items Eggs Cereal (Adult) Legumes | ảng 🎸 28 | Grade "A" Large White Eggs Breakfast Cereal Peanut Butter 16 - 18 oz | 1 36 1 | titly Category Hax Quantity 1 36 1 | UOH Dozen Ounces Containers |
| Income Information Health Information Andrey (Lab Eco-Social Assessment Dietary & Health Assigned Risk Factors Certification Signature Certification Summary Identification Document | 11/2 | 18/2016 Ann-Breastee ad Prescription Items Eggs Cereal (Adult) Legumes Fruit & Vegetables Cash Value | ảng 🎸 28 | Grade "A" Large White Eggs Breakfast Coreal Pearul Butter 15 - 18 or Pruit and Vegetables - Cash Value Youcher | 1 36 1 \$11.0 | titly Category Hax Quantity 1 36 1 | UOH Dozen Ounces Containers \$\$\$ |

Pregnant and Breastfeeding: Food Package VII

The participant who is pregnant **and** fully or partially breastfeeding \leq MMA is entitled to receive Food Package VII until the infant she is breastfeeding turns one year of age.

Crossroads will indicate **Food Package VII** on the Prescribe Food screen, **IF** the following steps are completed on the **Health Information** screen of the Pregnant Woman:

1) A checkmark is placed in the Currently Breastfeeding? box

| Skunk Family Family ID: F00600004649 5214 Fragrant Lane BOLIVIA, NC 28422 | stephen | Shelley P. Skunk Participant ID: 960138633P Age: 20 years and 2 months WIC Category: Pregnant |
|--|---|---|
| Pregnancy Last Menstrual Period 🚖 5/25/2021 📰 | Expected Delivery Date 🚖 | First Prenatal Healthcare Visit Date |
| Pregnancy Induced Health Condition | Number of Prenatal Healthcare Visits 2 Proof of Pregnancy | Date Last Seen By Physician |
| Health Conditions | Dietary Supplement Taken Before Pregnancy | Number of Fetuses this Pregnancy Gravida Para 1 2 1 |
| | Medical Home Private Provider | Adequacy of Prenatal Care Yes Age at Conception 20 years and 1 month Inter-Conception Time in Months 2 |
| | Currently Breastfeeding? | |

 The Breastfeeding Information section indicates full breastfeeding or partial breastfeeding ≤ MMA

| | stfeeding Information ephen Skunk | | Rectangular Snip | |
|---------------------------|--|---|--|-----------------------|
| Breastfeeding Information | Data Collection Date * 7/2/2021 Breastfeeding Frequency Complications | Are you breastfeeding? Yes No Age Infant Stopped Breastfeeding Age Supplement Was Given Number of Wet Diapers / 24 hr Period Do you give your baby any formula? Yes No | Ever Breastfed? Yes No Unknown Reason Infant Stopped Breastfeeding | Breastfeeding History |

The Prescribe Food screen will then list Pregnant Fully Breastfed (Food Package VII) until the breastfed infant turns 1 year of age.

| Skunk Family Family ID: F00600004649 5214 Fragrant Lane BOLIVIA, NC 28422 | | ephen | | Shelley P. Sku Participant ID: 966 Age: 20 years and WIC Category: Pr | 0138633P 2 months |
|--|-------|---|------------------|--|----------------------|
| Food Prescription | | | | | ? |
| Food Prescription Date WIC Categ | BBB | 1/2021 7/2/2021 4/1/2022 p p mily Issuance Day 3 Month(s) | | | |
| Food Prescription Items | | | Rectangular Snip | Total Ite | ems: 9 🕜 |
| | egory | Subcategory | Quantity | Category Max Quantity | UOM |
| Eggs | | Eggs | 2 | 2 | Dozen |
| Breakfast Cereal | | Breakfast Cereal | 36 | 36 | Ounces |
| Bread/Whole Grains | | WW Bread or Whole Grains | 16 | 16 | Ounces |
| Fruit & Vegetable CVB | | Fruit and Vegetables | \$11.00 | \$11.00 | \$\$\$ |
| Cheese | | Cheese | 1 | 3 | LB |
| Legumes | | Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 2 | 2 | Containers |
| Juice - 48 oz | | Juice 48oz fl/12oz Conc | 3 | 3 | Containers |
| Fish | | Chnk Lt Tuna/Pink Salmon | 30 | 30 | Ounces |
| Milk - Fat Reduced | | Skim/Non Fat or 1% Milk | 6 | 6 | Gallons |

In this scenario, the breastfed infant turns 1 year of age on 4/1/22: Crossroads automatically changes the woman's Food Package to V (Pregnant) on 4/1/22.

| Skunk Family Family ID: F00600004649 5214 Fragrant Lane BOLIVIA, NC 28422 | | ephen | | Shelley P. Skunk Participant ID: 96013 Age: 20 years and 2 m WIC Category: Pregr | 8633P nonths |
|--|---------------------------------|---|-------------------------------|---|--|
| od Prescription | | | | | (|
| od Prescription Date WIC Catego | B B Family Issuance Day _ Is | 1/2021 7/2/2021 4/1/2022 p p | | | |
| /2022 🕂 Pregnant | 12 3 | B Month(s) | | | |
| /2022 od Prescription Items | 12 3 | 3 Month(s) | Rectangular Snip | Total Ite | ems: 7 (|
| od Prescription Items | 12 3 | 3 Month(s) Subcategory | Rectangular Snip Quantity | Total Ite Category Max Quantity | |
| od Prescription Items | | | Quantity | | |
| od Prescription Items Cat | | Subcategory | Quantity 1 36 | | UON Dozen |
| od Prescription Items Cat Eggs | | Subcategory Eggs | 1 | Category Max Quantity 1 | UON |
| od Prescription Items Cat Eggs Breakfast Cereal | | Subcategory Eggs Breakfast Cereal | 1 36 | Category Max Quantity 1 36 | Dozen Ounces Contair |
| od Prescription Items Eggs Breakfast Cereal Legumes | | Subcategory Eggs Breakfast Cereal Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr | 1 36 2 | Category Max Quantity 1 36 2 | UON Dozen Ounces |
| od Prescription Items Eggs Breakfast Cereal Legumes Bread/Whole Grains | | Subcategory Eggs Breakfast Cereal Bean/Pea, 4 Cans, 1 Dry, or Peanut Btr WW Bread or Whole Grains | 1 36 2 16 | Category Max Quantity 1 36 2 16 | UOI Dozen Ounce Contai Ounce |