

Food and Nutrition Service Mountain Plains Region 1244 Speer Boulevard, Suite 903 Denver, Colorado 80204-3585

Reply to

Attn of: CACFP-756 June 27, 2005

SP 05-26

Subject: Clarification on Acceptable Infant Formulas

To: STATE AGENCY DIRECTORS - Colorado DPHE, Colorado ED, Iowa, Kansas, (Special Nutrition Programs) - Missouri ED, Missouri DH, Montana OPI,

Missouri ED, Missouri DH, Montana OPI, Montana DPHHS, Nebraska, North Dakota,

South Dakota, Utah and Wyoming

This memorandum clarifies questions regarding determining if an infant formula is creditable and the use of Special Diet Statements for infant formulas.

## 1. Must the name of a formula served in the Child and Adult Care Food Program (CACFP) be listed exactly as it is on the CACFP Approved List?

The answer is a qualified no. The current list of the *Iron-Fortified Infant Formulas That Do Not Require A Medical Statement* is NOT an inclusive list, because new infant formula products are continually being developed.

According to the CACFP regulation, 7 CFR 226.20(b)(2), "either breast milk or ironfortified infant formula, or portions of both, must be served for the entire first year." Any product labeled as an iron-fortified infant formula, legally must meet the Food and Drug Administration (FDA) definition, 21 CFR 107.10(b)(4)(i), as a product "which contains 1 milligram or more of iron in a quantity of product that supplies 100 kilocalories when prepared in accordance with label directions for infant consumption." The number of milligrams of iron per 100 kilocalories of formula can be found on the nutrition label of infant formulas.

## 2. Must a provider have a medical statement on file for an infant formula to be part of a reimbursable meal?

If a formula is not on the current list of the *Iron-Fortified Infant Formulas That Do Not Require a Medical Statement*, a child care provider or institution may use the following criteria to determine whether or not a formula is reimbursable under the CACFP without the need of a medical statement:

a) Ensure that the formula is not listed as an FDA Exempt Infant Formula. The FDA, per 21 CFR 107.3, defines an exempt infant formula as "an infant formula labeled for use by infants who have inborn errors of metabolism or low birth weight, or who otherwise have unusual medical

or dietary problems". Formulas classified as Exempt Infant Formulas by FDA require a medical statement to be served to infants participating in the CACFP as part of a reimbursable meal. A medical statement must be signed by a licensed physician if an infant is considered disabled according to USDA's regulation, or a recognized medical authority specified by the State Agency (SA) if an infant has medical or other special dietary needs. To determine if an infant formula is an FDA Exempt Infant Formula, visit FDA's website at <a href="http://www.cfsan.fda.gov/~dms/inf-exmp.html">http://www.cfsan.fda.gov/~dms/inf-exmp.html</a>.

- b) Examine the nutrition label to make sure that the formula is iron-fortified. The statement "Infant Formula with Iron" or a similar statement must be on the label.
- c) Be aware of the fact that all infant formulas marketed in the United States must meet the nutrient specifications listed in FDA Regulation, 21 CFR 107 at <a href="http://www.cdsan.fda.gov/~lrd/cfr107.html#spD">http://www.cdsan.fda.gov/~lrd/cfr107.html#spD</a> and in the Section 412 of the Food, Drug and Cosmetic Act at <a href="http://www.fda.gov/opacom/laws/fdact/fdcact4.htm#sec412">http://www.fda.gov/opacom/laws/fdact/fdcact4.htm#sec412</a>. If a formula is purchased outside of the United States, it is likely that the formula is not regulated by FDA; therefore, it may not be creditable under the CACFP.

The nutritive values of each formula are listed on the product's nutrition label. Infant formula manufacturers may have their own proprietary formulations, but they must contain at least the minimum levels of all nutrients specified in FDA regulations without going over the maximum levels, when maximum levels are specified.

d) Also be aware of the fact that manufacturers of infant formula are required by FDA regulation to follow current Good Manufacturing Practices, including quality control procedures to assure that the infant formula provides nutrients in accordance with Section 412 of the Food, Drug, and Cosmetic Act, and to assure that the infant formula is manufactured in a manner designed to prevent adulteration.

A child care provider or institution can serve a formula if the exact product is on the current list of the *Iron-Fortified Infant Formulas* without the need of obtaining a medical statement.

In some cases, specific brands of infant formulas may have very similar names and still be different formulas. For example; Similac Advance is an iron-fortified infant formula that is currently included in the *List of Iron-Fortified Infant Formulas That Do Not Require a Medical Statement*. Similac Alimentum Advanced, is an infant formula that is on the FDA Exempt Infant Formula list; therefore, it is not creditable unless supported be a statement from a licensed physician or a recognized medical authority specified by the SA, as appropriate, that indicates the need for this special formula.

If a child care provider or institution is not sure of whether or not an infant formula is creditable under the CACFP, they should contact their SA who can contact the Regional Office for assistance, as needed.

3. Can you provide guidance about a formula supplied by the parent that is not ironfortified? Would service of this product require a medical statement in order to be creditable for a reimbursable meal for an infant?

As stated above, according to 7 CFR 226.29(b)(2), "either breast milk or iron-fortified formula, or portions of both, must be served for the entire first year." In addition, page 24 of *Feeding Infants: A Guide for Use in the Child Nutrition Programs*, paragraph 2, states that low-iron formulas do not meet the meal pattern and may be served as a dietary substitution only if an infant is unable to consume iron-fortified infant formula because of medical or other special dietary needs. The substitution can only be made when supported by a statement from a licensed physician or a recognized medical authority that indicates the recommended infant formula. These rules apply to formula provided by the CACFP facility or institution and to formula provided by the parent.

While our responses to these questions pertain to meals served to infants in the CACFP, it should be noted that they also apply to meals containing infant formula under the National School Lunch Program or the School Breakfast Program.

If you have any questions, please contact our office at (303) 844-0354.

DARLENE SANCHEZ

Regional Director

**Special Nutrition Programs** 

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