## **WIC-Eligible Nutritionals and Therapeutic Formulas**

## **Contract Standard Formulas on WIC Card**



Similac Advance 12.4 oz powder or 13 fl oz liquid concentrate



Similac Sensitive 12.5 oz powder only



Similac Total Comfort 12.6 oz powder only



**Enfamil ProSobee** 12.9 oz powder or 13 fl oz liquid concentrate

## **Therapeutic Formulas and Nutritionals on WIC Card**

The WIC Pediatric Referral Form and medical diagnosis/conditions are required.

\*See details below.

For any products not listed below, local WIC agency will check if they can be provided by CDPH/WIC.



## Please refer patient, first, to their health plan or Medi-Cal for medically necessary formulas or medical foods for approval.

If these products are denied, unavailable, or in a pending status, please send a request to WIC.

Some pharmacies accepting Medi-Cal or other health plan:			* <u>Suggested procedures:</u>
Pharmacy (Health Plan)	Phone Number	Fax Number	<ol> <li>Refer patient to health plan/pharmacy</li> <li>Submit medical justification</li> <li>Wait for approval</li> <li><u>If approved</u>, accept formula shipment and reorder monthly</li> <li><u>If denied</u>, refer the request to WIC</li> <li>*Friendly reminder to always complete a WIC pediatric referral form every 3-6 months.</li> </ol>
Shield HealthCare (Santa Clara Family Health Plan) (Straight Medi-Cal)	1- 800-675-8840	1- 925-256-1639	
Delta Drugs (Straight Medi-Cal)	1- 800-700-6401	1- 866-700-6401	
Byram Health Care (Kaiser) Tube Feeding	1- 800-552-2633	1- 800-992-6331	

Updated March 2023. County of Santa Clara Department of Public Health WIC Program. This institution in an equal opportunity provider.

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