WIC Participant and Program Characteristics 2014

Food Package Report

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I. INTRODUCTION

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is administered by the Food and Nutrition Service (FNS) of the U.S. Department of Agriculture. WIC's mission is "to safeguard the health of low-income women, infants, and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care."[1] WIC benefits include nutritious supplemental foods; nutrition education; counseling, including breastfeeding promotion and support; and referrals to health care, social service, and other community providers. WIC participation has been associated with improved fetal development and reduced incidence of low birthweight and short gestation for infants, and reduced incidence of anemia and improved dietary intake for children and pregnant and postpartum women.[2]

To receive WIC benefits, an individual must be categorically eligible: a pregnant, breastfeeding, or non-breastfeeding postpartum woman; an infant up to the age of 1 year; or a child age 1 until his or her 5th birthday. Each applicant must be found to be income eligible and at nutritional risk. Eligible applicants receive food instruments to be redeemed for nutritious supplemental foods, usually in the form of vouchers, checks, or electronic benefits transfer (EBT) cards that allow them to obtain food packages that include specific amounts and types of food (e.g., milk, juice, cereal) from participating retail vendors at no charge.

WIC was established as a pilot program in 1972 by an amendment to the Child Nutrition Act of 1966 and made permanent in 1974. In April 2014, the number of participants enrolled in WIC was 9.3 million (Thorn et al., 2015, page i). The full fiscal year 2014 appropriation for the program was $6.72 billion. WIC is not an entitlement program but rather a discretionary Federal grant program for which Congress authorizes a specific amount of funding each year.

Since 1988, FNS has produced biennial reports on participant and program characteristics in WIC. This information is used for general program monitoring and managing the information needs of the program, including estimating budgets, submitting civil rights reports, identifying needs for research, and reviewing current and proposed WIC policies and procedures.

This report on ***WIC food packages*** is a supplement to the recently published biennial report for 2014. Like all biennial WIC Program and Participant Characteristics (WIC PC) reports since 1992, the 2014 report (PC2014) employed the prototype reporting system developed by FNS that uses participant information compiled from State agencies. The reports, including PC2014, contain information on a census of WIC participants in April of the reporting year.[3]

In addition to information on characteristics of WIC participants, the reporting system collects information on the food packages or prescriptions that are issued to these participants. In April

[1] http://www.fns.usda.gov/wic/about-wic-wics-mission

[2] http://www.fns.usda.gov/wic/about-wic-how-wic-helps

[3] Because of management information system constraints, Virginia provided data for October 2013 rather than April 2014.

2014, WIC served 9,150,233 clients in the 50 States, Washington, DC, and Puerto Rico.[4] State agencies were able to provide valid food package data for 8,680,512 of these clients, or 94.2 percent. For this report, the most frequently reported food packages were coded until 95 percent of participants with food package data in each certification category had a coded food package. All packages containing WIC-eligible medical foods were identified and coded. This yielded food package descriptions for 8,532,559 clients (92.6 percent of all clients served by the 52 State agencies). The analyses that follow are based on this sample.

A. WIC PC FOOD PACKAGE DATA

The tabulations and analyses included in this report are based on PC2014 data reporting. It is helpful to keep in mind some of the variable definitions and State agency data reporting procedures used in the PC2014 data set, in particular those pertaining to breastfeeding intensity, age of infants, inclusion of null food packages, and level of detail in reported food packages.

Certification Category

PC2014 data capture the category under which a person is certified as eligible for WIC benefits. The categories include (1) pregnant women, (2) breastfeeding women, (3) postpartum women (not breastfeeding), (4) infants (younger than 12 months), and (5) children (12–59 months).

It should be noted that unlike WIC's regular program account reports, this variable in the PC2014 data set does not distinguish between women who are fully breastfeeding versus partially breastfeeding and does not identify infants according to whether they are fully breastfed, partially breastfed, or fully formula fed.

Partially breastfeeding women between 6 and 12 months postpartum who receive no food package are reported with a certification category of "breastfeeding woman." These women are still considered WIC participants and may receive WIC benefits other than supplemental foods; for example, nutrition education.

Age

PC2014 data contain each participant's date of birth; no ages are reported. For the purposes of this report, infant and child ages were calculated based on the date of birth and a reference date of April 1, 2014. Infant participants born in the month of April 2014 were assigned an age of 0 (zero) months.

A portion of participants, particularly infants, moved between two distinct age range categories during the month of April 2014. This should be kept in mind when considering very narrow infant age range categories. Depending on a State agency's computer system and protocols, PC2014 food package data may contain a food package based on the age of the participant as of another April date (i.e., not April 1, 2014) or a combination of two food packages based on the two age ranges appropriate for that month. The date used by State agencies to determine age

[4] Analysis of food packages excludes other territories (Guam, Samoa, American Virgin Islands, and Northern Marianas) and 34 Indian Tribal Organizations served by WIC. The number of WIC participants is higher than indicated in FNS administrative data because it includes those who may not have received or used their benefits (for additional information see Thorn et al., 2015, chapter 1, section E).

range category for the April food package is obviously later than April 1 for infant participants born in that month, and it may well be later than April 1 for other infants. One result is that tabulations show that a small percentage of participants certified as infants (1.6 percent) received food packages containing milk. This does not necessarily reflect errors on the part of State agencies but more likely infants who turned 1 year old during April.

Missing Food Package Data

For PC2014 reporting, "participants" are persons on WIC master lists or persons listed in WIC operating files who were certified to receive WIC benefits (supplemental foods and other benefits such as nutrition education, counseling, or health care referrals) in April 2014. This definition differs from WIC's regulatory definition of participants, which is based on the actual claim of WIC benefits that generally includes receipt of a WIC food instrument. Some State agencies are unable to report food package information for those participants who failed to pick up or redeem their food instruments.

State agencies differed in their reporting of food packages for partially (minimally) breastfeeding women between 6 and 12 months postpartum who do not receive a food package under the revised rules but are counted as participants because they are still eligible for other WIC services. In PC2014, 11 State agencies assigned these women a food package that did not contain any food: that is, a null food package. Therefore, zero quantities were entered for all foods for these participants. These women, who represented 14.1 percent of all partially breastfeeding women nationwide with valid quantities, are included in the tabulations that follow (see below for how partially breastfeeding women are defined). Breastfeeding women in these State agencies represent 51 percent of all breastfeeding women. The other 41 State agencies did not report a food package for these women; these participants are excluded from the tabulations.

State agencies also differed in reporting food packages for fully breastfed infants. Similar to partially (minimally) breastfeeding women who do not receive a food package, 23 State agencies assigned a null food package to fully breastfed infants less than 6 months old who received no foods through WIC. In these agencies, zero quantities were entered for these participants, and they are included in the tabulations. Infants in these State agencies represent 62 percent of all infants. The other 29 State agencies did not report a food package for these infants; these participants were excluded from the tabulations.

Specificity of Food Package Descriptions

State agencies vary in how specific food package prescriptions are reported in the PC data. Some State agencies may issue prescriptions that allow multiple types or forms of a supplemental food.[5] For example, 1 gallon of 1-percent or nonfat milk; 1 pound of dry beans or 64 ounces of canned beans; juice in 11- or 12-ounce cans of concentrate or 48 ounces of single-strength juice; 30 ounces of canned tuna, salmon, sardines, or mackerel; 1 pound of whole-grain bread or brown rice. All the types or forms included in the prescription description have been coded as part of the food package. The report uses the prescription information available, as reported in the State

[5] For further information on State agency options, see the WIC Food Packages Policy Options Study Final Report at http://www.fns.usda.gov/sites/default/files/WICFoodPackageOptions_0.pdf

agency data, to tabulate the amounts, types, and forms. When the prescription description received from the State agency includes more than one type or form of a supplemental food, this report uses the term allowed (or allowable). This means the prescription did not specify the exact form or type the participant was prescribed. Therefore, tables show allowable types and forms that are not mutually exclusive.

B. PARTICIPANT CATEGORIES FOR FOOD PACKAGE ANALYSIS

As noted above, WIC participants are enrolled in one of five certification categories. In this report, we examine the foods prescribed to WIC participants by a slightly modified certification category indicator, which we refer to as participant category. We have disaggregated the WIC category of breastfeeding women into two subgroups: partially breastfeeding women and fully breastfeeding women. This distinction is inferred from the State agency's food package type variable, with fully breastfeeding women defined as breastfeeding women receiving Food Package VII; all other breastfeeding women are considered partially breastfeeding.

The distinction is not perfect for two reasons:

1. Food Package VII is assigned not only to fully breastfeeding women whose infants do not receive infant formula from WIC but also to women partially breastfeeding multiple infants (and also women pregnant with multiples). These subgroups (fully breastfeeding and partially breastfeeding multiples) cannot be distinguished because PC data do not allow for linking of mothers' records with those of their infants.
2. As discussed in appendix C, the information provided by State agencies on food package types is not entirely complete and reliable.

Some State agencies had substantial missing data on food package type. Breastfeeding women with missing food package type in these State agencies were classed as partially breastfeeding.

Two State agencies included ***no*** information on food package type in their data submissions (Louisiana and New Mexico). For these State agencies, we categorized breastfeeding women as fully breastfeeding based on the presence of canned fish in their food package. This method undercounts fully breastfeeding women in that it fails to capture those who for whatever reason were not prescribed fish.

Partially (Mostly) Breastfeeding Women and Partially (Minimally) Breastfeeding Women[6]

Women in the partially breastfeeding participant category can be described as either mostly breastfeeding or minimally breastfeeding, based on breastfeeding intensity as measured by the amount of formula their infants receive from WIC. Each of these groups receives a different food package, with different types and amounts of food included in their prescriptions, as will be seen throughout the report.

[6] These definitions can be found at http://www.fns.usda.gov/wic/breastfeeding-promotion-wic-current-federal-requirements

As used in this report, the term "partially (mostly) breastfeeding women" refers to breastfeeding women up to 1 year postpartum whose partially breastfed infants receive some formula after their 1st month postpartum, but not more than the maximum amount allowed for a partially breastfed infant. These mothers receive Food Package V, which provides extra quantities and varieties of foods—more than for mothers who mostly formula feed.

The term "partially (minimally) breastfeeding women" refers to women whose infants receive more formula than is allowed for a partially breastfeeding infant. Partially (minimally) breastfeeding women up to 6 months postpartum receive the same Food Package VI as non-breastfeeding postpartum women (up to 6 months postpartum). Partially (minimally) breastfeeding women more than 6 months postpartum do not receive a food package but may receive other WIC benefits such as breastfeeding support and breast pumps, nutrition education, and referrals to health and social services.

For PC data reporting, all partially breastfeeding women are reported with a certification category of "breastfeeding."

C. PLAN OF THE REPORT

This report consists of two additional chapters and three appendices. Chapter II describes the food packages prescribed to WIC participants with regard to amounts and types of food. Chapter III discusses notable changes in the packages since the implementation of the Interim Rule in October 2009. Appendix A presents an overview of WIC food packages, appendix B presents an earlier memorandum that presented analyses of food packages for WIC 2008, and appendix C provides additional tabulations for WIC 2014 by food package type.

II. CONTENTS OF WIC FOOD PACKAGES IN 2014

In September 2003, FNS contracted with the National Institute of Medicine (IOM) to independently review the WIC food packages. FNS charged IOM with reviewing the nutritional needs of the WIC population and recommending scientifically based, cost-neutral changes to the WIC food packages.

In making its recommendations, IOM considered nutrient intakes and dietary patterns, the major diet-related health problems and risks faced by WIC's target population, the characteristics of the WIC Program, and the diversity of its participants. The Interim Rule revising the WIC food packages largely reflected the IOM recommendations and was published in the *Federal Register* on December 6, 2007, with a final implementation date of October 2009. The Final Rule revising the WIC food packages was published in the *Federal Register* on March 4, 2014, with implementation dates after the reference period for this report (April 2014).

The revised food packages under the interim rule align with the Dietary Guidelines for Americans and infant feeding practice guidelines of the American Academy of Pediatrics. The food packages better promote and support the establishment of successful, long-term breastfeeding; provide WIC participants with a wider variety of foods, including fruits and vegetables and whole grains; and provide State agencies greater flexibility in prescribing food packages to accommodate the cultural food preferences of WIC participants.

The foods provided through the WIC Program are designed to supplement participants' diets with specific nutrients. Different foods are provided to each category of participants. WIC foods under the interim rule include eggs, milk, cheese, whole wheat or whole grain bread, legumes(peanut butter, dry beans/peas), canned fish, fresh fruits and vegetables, breakfast cereal for women and children, infant foods (cereal, fruits and vegetables, and meat) and juice. At State agency option, alternatives may be offered, including soy beverage and tofu for milk, brown rice and other whole grains for whole wheat bread, canned beans for dry beans/peas, and processed forms of fruits and vegetables for fresh.

Federal regulations describe the minimum requirements and specifications of supplemental foods in WIC food packages and the maximum monthly allowances (MMA) for these foods. Beyond these minimum specifications, State agencies have broad discretion in the types and forms of the foods allowed. State agencies may choose brands and package sizes. Other examples of State agency choice include flavors (apple, orange, or grape juice; chocolate or strawberry milk); fat content of lower fat milks (i.e., just nonfat or nonfat and 1-percent milks); which whole-grain alternatives are allowed, if any, in addition to whole-grain bread; whether cash vouchers can be used on frozen, canned, or dried fruits and vegetables in addition to fresh fruits and vegetables; and whether powdered or liquid egg products are allowed in addition to whole eggs.[7] The WIC Program offers seven broad food packages that vary in the types and amounts of foods they contain. These packages are offered to—

I. Infants aged less than 6 months

II. Infants aged 6–11 months

[7] For further information on State agency options, see the WIC Food Packages Policy Options Study Final Report at http://www.fns.usda.gov/sites/default/files/WICFoodPackageOptions_0.pdf

III. Participants with medical conditions that require special foods

IV. Children aged 1–4 years

V. Women who are pregnant or partially (mostly) breastfeeding[8] up to 1 year postpartum

VI. Women who are non-breastfeeding or partially (minimally) breastfeeding[9] up to 6 months postpartum

VII. Women who are fully breastfeeding or pregnant with or partially (mostly) breastfeeding multiples

As noted above, the Interim Rule instituted in 2009 substantially revised the food packages, adding new food categories and revising MMAs.[10] The Interim Rule created detailed food package categories that are assigned to participants based on infant age and breastfeeding status, child age, the pregnancy or breastfeeding status of the mother, and whether the participant has a qualifying medical condition. Table II.1 defines the populations assigned to each of the broad food packages ("Food Package Number") and the detailed categories ("Interim Rule Food Package Type") created by the Interim Rule.

Table II.1
Types of Food Packages Prescribed: Broad and Detailed Categories

Participant Type	Food Package Number	Interim Rule Food Package Type	Age of Participant	Breastfeeding Status of Participant
Infants	Food Package I	I-FF-A	0–3.9 months	Fully formula fed
		I-FF-B	4–5.9 months	Fully formula fed
		I-BF/FF-A	0–0.9 months	Partially breastfed
		I-BF/FF-B	1–3.9 months	Partially breastfed
		I-BF/FF-C	4–5.9 months	Partially breastfed
		I-BF-A	0–3.9 months	Fully breastfed
		I-BF-B	4–5.9 months	Fully breastfed
	Food Package II	II-FF	6–11.9 months	Fully formula fed
		II-BF/FF	6–11.9 months	Partially breastfed
		II BF	6–11.9 months	Fully breastfed

[8] Partially (mostly) breastfeeding food packages are for mothers whose infants are mostly breastfed but also receive some formula from WIC after the 1st month postpartum; the amount of formula the infant receives is not more than the maximum allowed for a partially breastfed infant. Mothers may receive this package until the infant is 12 months old. For mothers, this package provides extra quantities and varieties of foods—more than for mothers who mostly formula feed. For infants, formula amounts are tailored to help mothers continue to successfully breastfeed (see http://www.fns.usda.gov/wic/breastfeeding-promotion-wic-current-federal-requirements).

[9] Women who are not breastfeeding or only breastfeeding a minimal amount receive Food Package VI. Minimally breastfeeding women whose infants are greater than 6 months of age and receive more formula from WIC than is allowed for a partially breastfeeding infant do not receive a food package (see http://www.fns.usda.gov/wic/breastfeeding-promotion-wic-current-federal-requirements).

[10] See http://www.fns.usda.gov/wic/regspublished/wicfoodpkginterimrulepdf.pdf. Published in the *Federal Register* December 7, 2007. Appendix A of this report includes two tables that provide a description of the food packages, showing types of foods and quantities prescribed for different categories of WIC participants.

Participant Type	Food Package Number	Interim Rule Food Package Type	Age of Participant	Breastfeeding Status of Participant
Medical	Food Package III	III I-FF-A	0–3.9 months	Fully formula fed
		III I-FF-B	4–5.9 months	Fully formula fed
		III I-BF/FF-A	0–0.9 months	Partially breastfed
		III I-BF/FF-B	1–3.9 months	Partially breastfed
		III I-BF/FF-C	4–5.9 months	Partially breastfed
		III II-FF	6–11.9 months	Fully formula fed
		III II-BF/FF	6–11.9 months	Partially breastfed
		III IV-A	1–1.9 years	Children
		III IV-B	2–4.9 years	Children
		III V	Women	Pregnant and partially breastfeeding (up to 1 year postpartum)
		III VI	Women	Non-breastfeeding postpartum and partially (minimally) breast feeding (up to 6 months postpartum)
		III VII	Women	Fully breastfeeding (up to 1 year postpartum)
Children	Food Package IV	IV-A	1–1.9 years	Children
		IV-B	2–4.9 years	Children
Women	Food Package V	V	Women	Pregnant and partially (mostly) breastfeeding (up to 1 year postpartum)
	Food Package VI	VI	Women	Non-breastfeeding postpartum and partially (minimally) breastfeeding (up to 6 months postpartum)
	Food Package VII	VII	Women	Fully breastfeeding; partially (mostly) breastfeeding multiples; pregnant with multiples
	No Food Package	N/A	Women	Partially (minimally) breastfeeding (over 6 months postpartum)

This report discusses the quantities of foods prescribed by participant category in relation to the Interim Rule MMAs. MMAs vary for the seven WIC food packages. When examining food package prescriptions by certification or participant category, it is important to keep in mind that participants in the same category may be prescribed different food packages with different MMAs. For example, partially breastfeeding women may be prescribed one of three different food packages, or no food package:

- As noted above, they may be prescribed Food Package VII if they are partially (mostly) breastfeeding multiple infants (a situation that is indistinguishable in the PC data from women fully breastfeeding one infant)
- Food Package V may be prescribed to women who are partially (mostly) breastfeeding a single infant
- Food Package VI is prescribed to partially (minimally) breastfeeding up to 6 months postpartum
- Women who are partially (minimally) breastfeeding between 6 and 12 months postpartum are prescribed no food package

Hence partially breastfeeding women may legitimately be prescribed a variety of quantities of each food.

Similar situations apply to pregnant women, who are prescribed different food packages for a singleton pregnancy (Food Package V) or a multiple pregnancy (Food Package VII); to fully breastfeeding women who may receive an extra half package if they are fully breastfeeding multiples; and to infants, depending on their age and breastfeeding status.

Participants may receive less than the MMA when their prescribed food package has been individually tailored. According to Federal regulations, the full monthly allowance must be prescribed to WIC participants except when:

1. Medically or nutritionally warranted (e.g., to eliminate a food due to a food allergy);
2. A participant refuses or cannot use the maximum monthly allowances; or
3. The quantities necessary to supplement another programs' contribution to fill a medical prescription would be less than the maximum monthly allowances (7 CFR § 246.10(c), 1-1-2014).

The remainder of this chapter presents tabulations of the amounts, types, and forms of prescriptions for each of the components of WIC food packages: formula, milk and milk substitutes, juice, cereal, eggs, legumes, canned fish, whole grains, infant foods, and fruit and vegetable cash value vouchers.

A. FORMULA

Food packages containing formula are generally prescribed to infants, with three exceptions. First, some WIC infants were not prescribed formula because they were fully breastfed. Second, some older infants (1.64 percent) were prescribed milk in lieu of formula, notably those with birthdays during the issuance month (see discussion in chapter I). Finally, some women and children with special nutritional needs (who were prescribed Food Package III) were also prescribed formula packages.

This section discusses formula received by WIC infants. The table and exhibits report data for all infants, including those who received medical packages.

Formula for Infants by Age

Food prescriptions for formula are designed to ensure that infants receive formula amounts that are consistent with the nutritional and health goals of WIC. To allow States flexibility in meeting these goals, formula has both a maximum monthly allowance (MMA), and a full nutritional benefit (FNB). The FNB acts as the minimum amount that an infant should receive (except in cases where the package is individually tailored to meet the needs of the infant). The FNB of formula varies by infant age and breastfeeding status. According to WIC regulations, the FNB for fully formula-fed infants aged 4 to 5.9 months is 884 ounces of reconstituted liquid concentrate, while older and younger infants who are fully formula fed have lower FNBs: 806 ounces of reconstituted liquid concentrate for infants aged 0 to 3.9 months and 624 ounces reconstituted liquid concentrate for infants aged 6 to 11.9 months. Partially breastfed infants may be issued only 104 ounces of reconstituted powder in their first month to encourage breastfeeding; thereafter, the FNB is 312 to 442 ounces of reconstituted liquid concentrate, depending on the infant's age. The MMA is higher than the FNB, and like the FNB varies based on infant age and breastfeeding status, but also based on formula form (concentrate, powder, or concentrate). Powder formula has the highest MMA, followed by ready-to-feed, and then reconstituted liquid concentrate. The FNB to MMA ranges are shown for each infant age group in table II.2.

Due to the various physical forms (powder, ready-to-feed, and liquid concentrate), container sizes, and reconstitution yields of formula, FNS regulations allow States to round up to the next whole container of infant formula to ensure that participants receive the FNB over the timeframe of the food package prescribed. When a state uses rounding up, the reconstituted ounces of formula may be above the MMA or below the FNB in any given month. But, States must issue the FNB on average over the timeframe that the participant receives the food package. This gives the State some flexibility in providing the FNB to participants (7 CFR § 246.10(h)(1), 1-1-2014).

The prescribed formula amounts reported in the data may vary from the FNB-MMA ranges for additional reasons. First, all participants receive a nutrition assessment before being prescribed a food package. The results of the assessment may indicate the need for a food package to be individually tailored. For example, one of the goals of formula issuance is to tailor the amount of formula prescribed based on the breastfeeding assessment. So, for partially breastfeeding infants who receive formula from WIC, it is possible for them to receive less than the FNB. Second, the exact age in months of an infant at the time of issuance is not always clear from the recorded data (see discussion in chapter 1). For example, infants aged 3 to 3.9 months on April 1 are substantially more likely than other infants aged 1 to 3.9 months to be prescribed more than the age-appropriate amount for fully formula-fed infants, presumably because if the date that was used to assign the April food package was later than April 1, some of these infants will already be 4 months old and therefore entitled to a higher FNB.

The data on quantities prescribed have therefore been tabulated in broad bands that are sufficient to show the proportions of infants who are prescribed formula amounts corresponding to fully formula-feeding packages versus partially breastfeeding packages (table II.2; figure II.1). For infants under 6 months of age, a prescription of 800 ounces or more indicates a fully formula-fed package, and such a package is prescribed to 50 to 65 percent of these infants. For infants 6 months of age and older, fully formula feeding is indicated by a prescription of at least 600 ounces, which is the case for 77 percent of these infants.

Table II.2
Quantity and Types of Formula Prescribed for WIC Infants by Age of Infant (2014)

	Age of Infant[a]					Total Infants[b]
	0–0.9 months	1–3.9 months	4–5.9 months	6 months and older	Age not reported	
FNB-MMA for fully formula fed (oz)[c]	806–870	806–870	884–960	624–696	884–960	
FNB-MMA for partially breastfed (oz)[c]	104	364–435	442–522	312–384	442–522	
Quantity (oz)						
Mean, all[d]	594	674	675	535	571	598
Mean, receiving formula[d]	705	749	750	603	713	674
Percent Prescribed Quantity Issued (oz)						
At least 800	57.4%	65.1%	50.0%	1.8%	28.0%	31.1%
At least 600 but less than 800	9.9%	8.4%	26.6%	75.6%	50.0%	44.2%
At least 400 but less than 600	4.3%	5.6%	9.4%	1.2%	2.0%	4.0%
At least 200 but less than 400	7.5%	9.9%	3.5%	9.6%	0.0%	8.4%
Less than 200	5.2%	0.9%	0.5%	0.4%	0.0%	1.1%
None (fully breastfed)[e]	15.7%	10.0%	10.0%	11.4%	20.0%	11.3%
Form Allowable[f]						
Powdered	97.1%	97.5%	97.6%	97.7%	100.0%	97.5%
Concentrate	15.4%	14.4%	14.6%	14.9%	5.0%	14.8%
Ready-to-feed	13.0%	12.6%	12.9%	13.0%	5.0%	12.9%

	Age of Infant[a]					Total Infants[b]
	0–0.9 months	1–3.9 months	4–5.9 months	6 months and older	Age not reported	
Type Allowable[f]						
With iron	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Low iron	< 0.1%	< 0.1%	< 0.1%	< 0.1%	0.0%	< 0.1%
Milk based	93.6%	89.5%	89.1%	89.5%	87.5%	89.8%
Soy based	27.4%	29.9%	31.2%	33.0%	15.0%	31.4%
Hydrolysate[f]	2.5%	4.8%	4.9%	4.4%	2.5%	4.4%
Special[f]	3.6%	4.9%	4.6%	3.7%	7.5%	4.1%
Metabolic	0.1%	0.1%	0.1%	0.2%	2.5%	0.1%
Formula Type[g]						
Nonexempt	94.9%	92.4%	92.8%	94.1%	97.5%	93.5%
Exempt	5.1%	7.5%	7.1%	5.9%	2.5%	6.4%
WIC-eligible Medical food	< 0.1%	< 0.1%	< 0.1%	< 0.1%	0.0%	< 0.1%
Not specified	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
N	200,794	457,489	322,001	921,199	50	1,901,533

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, and Puerto Rico.

[a] Age calculations from the reported data may result in some age group misclassification (see chapter I for more on age calculations).

[b] Excludes infants receiving milk packages (1.64 percent of all infants).

[c] The full nutritional benefit (FNB) is the lower number in this range, and represents the minimum monthly amount each participant should receive (in the absence of individual tailoring). The higher end of the range is the maximum monthly allowance (MMA) for infant formula, and differs depending on the form of formula: powder, concentrate, or ready-to-feed. The range shown includes the three standards; powder formula has the highest standard and concentrate has the lowest.

[d] In ready-to-feed reconstituted ounces. Concentrate and powdered formula converted to ready-to-feed equivalent based on reconstitution rates.

[e] The None (fully breastfeeding) category includes infants with a food package prescription that contains zero ounces of formula. As discussed in chapter I, not all State agencies report a null food package for fully breastfed infants. For this reason, fully breastfed infants under 6 months old are undercounted in the data (where they represent 15.7 percent of 0–0.9-month-olds, 10.0 percent of 1–3.9-month-olds, and 10.0 percent of 4–5.9-month-olds). Fully breastfed infants 6 months and older receive supplemental foods and are prescribed a food package, so there is no reason to think they would be undercounted (11.4 percent of 6 month and older infants).

[f] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

A *hydrolysate* formula contains proteins that are partially broken down or hydrolyzed- partially hydrolyzed or extensively hydrolyzed formulas- in order to prevent allergic reactions. Formulas are identified as hydrolysate if they are exempt formula or WIC-eligible medical foods, and based on the manufacturer's description, along with any additional information in the WIC Formula Database (http://wicworks.nal.usda.gov/wic-formula).

A formula is identified as "special" if it contains characteristics not captured by the other categories, such as increased-calorie formulas, sucrose-free formulas, starch-thickened formulas, MCT-fat formulas, tube-fed formulas, PKU-diet formulas, and any other highly specialized formulas used to treat specific diseases. It does not include hydrolysate formulas.

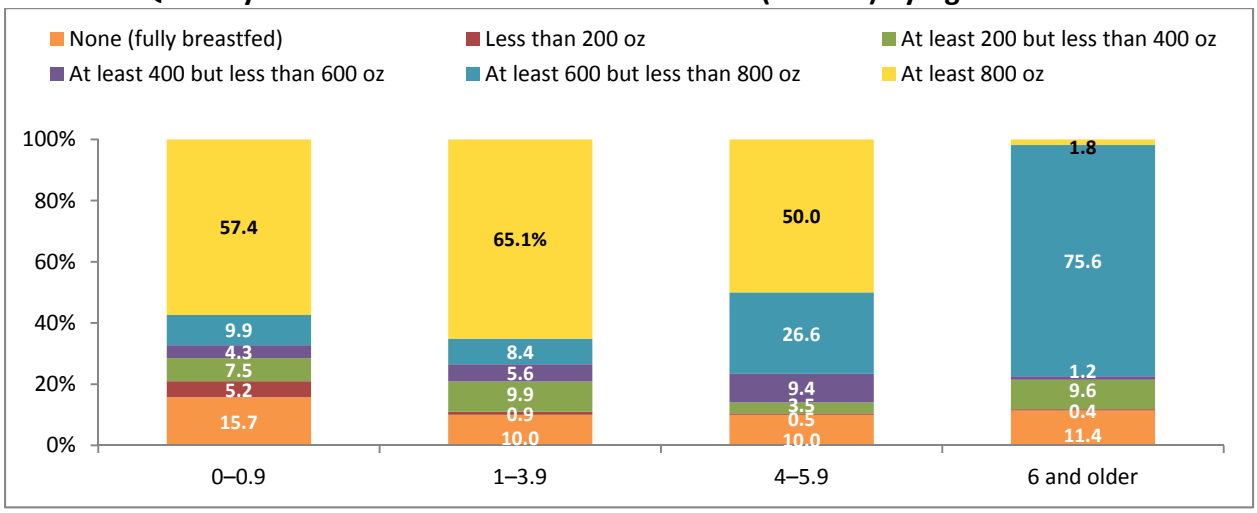
[g] *Nonexempt* in this report means *infant formula* as described in WIC regulations. *Infant formula* means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.

Exempt infant formula means an infant formula that meets the requirements for an exempt infant formula under section 412(h) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a(h)) and the regulations at 21 CFR parts 106 and 107.

An *exempt infant formula* is an infant formula intended for commercial or charitable distribution that is represented and labeled for use by infants who have inborn errors of metabolism or low birthweight, or who otherwise have unusual medical or dietary problems (21 CFR 107.3).

WIC-eligible medical foods refer to certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible medical foods must serve the purpose of a food, meal, or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible medical foods include many but not all products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C. 360ee(b)(3)).

Figure II.1
Quantity of Formula Prescribed to WIC Infants (Ounces) by Age in Months



The "None (fully breastfeeding)" category includes infants with a food package prescription that contains zero ounces of formula. As discussed in chapter I, not all State agencies report a null food package for fully breastfed infants. For this reason, fully breastfed infants under 6 months old are undercounted in the data (where they represent 15.7 percent of 0–0.9-month-olds, 10.0 percent of 1–3.9-month-olds, and 10.0 percent of 4–5.9-month-olds). Fully breastfed infants 6 months and older receive supplemental foods and are prescribed a food package, so there is no reason to think they would be undercounted (11.4 percent of 6 month and older infants).
Age calculations from the reported data may result in age group misclassification (see chapter I for more on age calculations).

Comparing the amounts prescribed with the FNB-MMA ranges for partially breastfed infants suggests that partial breastfeeding packages are prescribed to about 5 percent of infants aged 0 to 0.9 months (less than 200 ounces); 16 percent of infants aged 1 to 3.9 months (at least 200 but less than 600 ounces); 13 percent of infants aged 4 to 5.9 months (at least 200 but less than 600 ounces); and 10 percent for infants 6 months and over (at least 200 but less than 400 ounces). Quantities prescribed between the partially breastfeeding and fully formula feeding FNB-MMA ranges are common for both the youngest infants and those aged 4 to 5.9 months.

As noted above, age calculations from the reported data (that are based on age as of April 1, 2014) may result in some age group misclassification for infants who age into an older category during the reference period (see chapter I for more on age calculations). For example, infants categorized in the table as 4 to 5.9 months old who are prescribed between 600 and 800 ounces may be correctly prescribed a (smaller) fully formula-fed package for an infant aged 6 months and older. This partially explains the distribution of formula amount prescribed to 4- to 5.9-month-olds, with a decreased percentage prescribed 800 ounces or more (the fully formula-feeding FNB-MMA range) and an increased percentage being prescribed 600 to 800 ounces, compared to 1- to 3.9-month-olds.

The infants shown as receiving no formula have been prescribed a fully breastfed package.[11] As discussed in chapter I, not all State agencies report a null food package for fully breastfed infants. For this reason, fully breastfed infants under 6 months old are undercounted in the data (where they represent 15.7 percent of 0–0.9-month-olds, 10.0 percent of 1–3.9-month-olds, and 10.0 percent of 4–5.9-month-olds). Fully breastfed infants 6 months and older receive

[11] A small number of infants received food packages where formula was provided by an organization outside of WIC. These packages were also coded with a formula quantity of zero and so are included in the "None (fully breastfed)" category.

supplemental foods and are prescribed a food package, so there is no reason to think they would be undercounted (11.4 percent of 6 month and older infants).

Prescription data received from State agencies do not always specify one formula in one form (e.g., Enfamil powder). For these prescriptions that include multiple forms or types of formula, we code all forms and characteristics, and use the term "allowed" or "allowable" when discussing the contents of the prescription. Prescriptions may allow for multiple brands, types, or forms. For example, certain State agencies provide prescription descriptions where one prescription might include all State agency contract formula. In these cases, the prescription is coded with all the "allowed" formulas types (milk based and soy based) and their forms (powdered and concentrate). Therefore, we tabulate the form(s) "allowed" in the prescription, and they are not mutually exclusive. Similarly for other characteristics, we can only report the forms that were available or "allowed" in the prescription and not necessarily exactly what was received. (For additional information on forms of food allowed in a prescription, please see Chapter I, Section A.)

Nearly all (97.5 percent) infant prescriptions allowed powdered formula; concentrate and ready-to-feed forms were permitted in 14.8 and 12.9 percent of infant prescriptions, respectively. All formula prescriptions provided infant formula with iron. Milk-based formula was allowed in 89.8 percent of infant prescriptions. Soy-based formula was allowed in about a third of infant prescriptions and other special types in some prescriptions as medically necessary.

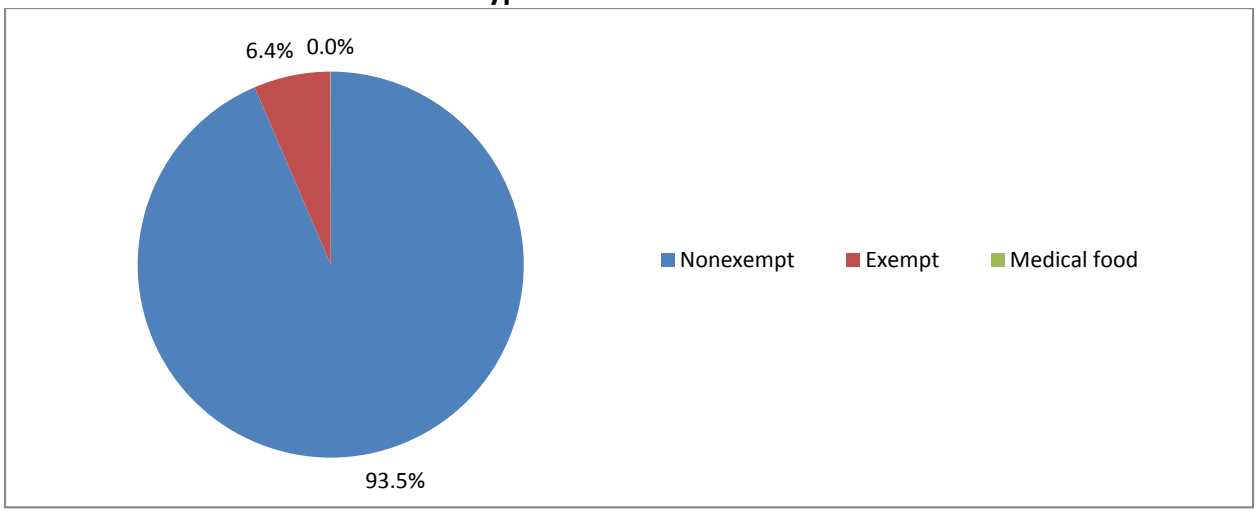
Finally, some infants have special dietary needs that prohibit the use of standard WIC infant formula (figure II.2). With medical documentation, they are prescribed Food Package III for medically fragile participants. For example, premature infants and low birthweight infants may need a formula that supplies extra calories and nutrients. These participants were issued prescriptions for exempt infant formula[12] (6.4 percent of infants) or a WIC-eligible medical food[13] (<0.1 percent of infants).[14]

[12] An exempt infant formula is an infant formula intended for commercial or charitable distribution that is represented and labeled for use by infants who have inborn errors of metabolism or low birthweight or who otherwise have unusual medical or dietary problems (21 CFR 107.3).

[13] WIC-eligible medical foods are certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible medical foods must serve the purpose of a food, meal, or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible medical foods include many but not all products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C. 360ee(b)(3)).

[14] As noted above, women and children with special nutritional needs also receive Food Package III, which includes WIC formula (infant formula, exempt infant formula, and medical foods). There were 1,112 women and 74,763 children who were prescribed WIC formula. The maximum monthly allowance for these groups is 455 ounces of concentrate or 910 ounces of reconstituted WIC formula. Nearly half of both groups received between 400 and 800 ounces of reconstituted formula, and 42 percent of children along with 22 percent of women received more than 800 ounces of reconstituted formula (up to a maximum of 1,200 ounces).

Figure II.2
Formula Types Prescribed for WIC Infants



B. MILK AND MILK SUBSTITUTES

The MMA for fluid milk is 24 quarts per month for fully breastfeeding women, women mostly breastfeeding multiples, and women pregnant with multiples (recipients of Food Package VII); 22 quarts per month for other pregnant and breastfeeding women; and 16 quarts per month for children and non-breastfeeding postpartum women (table II.3).[15] Women who are fully breastfeeding multiples are entitled to 1.5 times the standard MMA for fluid milk and for all other foods (e.g., 36 quarts of fluid milk per month).

The maximum amount of cheese substitution permitted is 1 pound of cheese in lieu of 3 quarts of milk for most women and children; it is 2 pounds of cheese in lieu of 6 quarts of milk for fully breastfeeding women and mostly breastfeeding and pregnant women with multiples (recipients of Food Package VII). An additional pound of cheese is also included in Food Package VII. At State agency option, participants may choose to substitute tofu at the rate of 1 pound of tofu for 1 quart of milk, up to a maximum of 6 pounds in Food Package VII and up to a maximum of 4 pounds for other women (Food Packages V and VI). Cheese and tofu substitution up to the maximum allowance of fluid milk is permitted for women and children with medical documentation of lactose intolerance or other qualifying conditions.

Milk by Participant Category

Most participants were not prescribed the full fluid milk MMA in the form of milk (due to the substitution of cheese for milk as shown in the next section). Still, 30 percent of fully breastfeeding women were prescribed 24 quarts or more.[16] Most of the remainder were prescribed between 16 and 22 quarts (table II.3, figure II.3). Most pregnant women (83.1 percent) were likewise prescribed between 16 and 22 quarts. Among children and non-

[15] Some State agencies reclassify 11-month-old infants without recertifying them so they receive children's food packages containing milk. Such infants are excluded from these tabulations.

[16] The participant category "fully breastfeeding" includes women who are fully breastfeeding multiples who are allowed 1.5 times the MMA of Food Package VII (36 quarts of fluid milk).

breastfeeding postpartum women, for whom the MMA is 16 quarts, approximately 80 percent were prescribed less than this amount.

The category of partially breastfeeding women represents three subgroups with different MMAs: partially (mostly) breastfeeding women (22 quarts); partially (minimally) breastfeeding women up to 6 months postpartum (16 quarts); and partially (minimally) breastfeeding women more than 6 months postpartum (no milk; these participants are not authorized to receive a food package). This composition is reflected in the distribution of the issuances: 40.7 percent received at least 16 but less than 22 quarts, 36.3 percent were issued less than 16 quarts, and 16.0 percent were issued none. Recall that around 14 percent of partially breastfeeding women are considered partially (minimally) breastfeeding and are not prescribed any food, including milk.

Table II.3
Quantity and Types of Milk Products Prescribed by Participant Category (2014)

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[b]	Postpartum Women	Children
Quantity (qt)[c]					
MMA	22-24[d]	24–36[a]	0–22[b]	16	16
Mean amount prescribed	19.0	21.3	13.8	13.6	13.4
Mean amount prescribed to those prescribed any	19.0	21.3	16.4	13.6	13.5
Percent Prescribed					
Quantity Issued (qt)[c]					
24 or more	1.2%	29.5%	2.9%	0.7%	0.5%
At least 22 but less than 24	12.3%	0.6%	4.1%	0.3%	0.0%
At least 16 but less than 22	83.1%	67.1%	40.7%	20.1%	18.1%
Less than 16	3.3%	2.6%	36.3%	78.7%	80.4%
None	0.1%	0.2%	16.0%	0.2%	0.9%
Form Allowable[e]					
Fluid	99.7%	99.7%	99.2%	99.8%	99.7%
Evaporated	22.6%	24.3%	15.7%	6.6%	22.4%
Dry	26.2%	27.5%	24.5%	21.1%	14.8%
Type Allowable[e]					
Skim or Nonfat (0.5% or less)	98.7%	98.8%	99.1%	99.5%	71.7%
Low fat (1 or 1½%)	98.8%	99.6%	98.9%	99.3%	72.3%
Reduced fat (2%)	76.6%	74.3%	69.2%	76.6%	55.5%
Whole	2.0%	1.8%	1.4%	2.5%	31.7%
Buttermilk	18.5%	14.9%	21.7%	18.7%	14.4%
Acidophilus	11.6%	12.1%	12.7%	12.9%	11.4%
Lactose-free or reduced	6.1%	5.5%	5.4%	5.3%	5.4%
Flavored	3.0%	1.9%	1.3%	3.8%	2.2%
UHT	1.4%	0.7%	0.7%	1.7%	1.5%
Soy-based beverage	1.6%	1.4%	1.2%	1.5%	1.1%
Kosher	0.1%	0.4%	0.2%	<0.1%	0.2%
N	835,675	246,599	364,507	587,580	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and women partially (mostly) breastfeeding multiples, with an MMA of 24 quarts. Women fully breastfeeding multiples are also included in this category and have an MMA of 36 quarts.

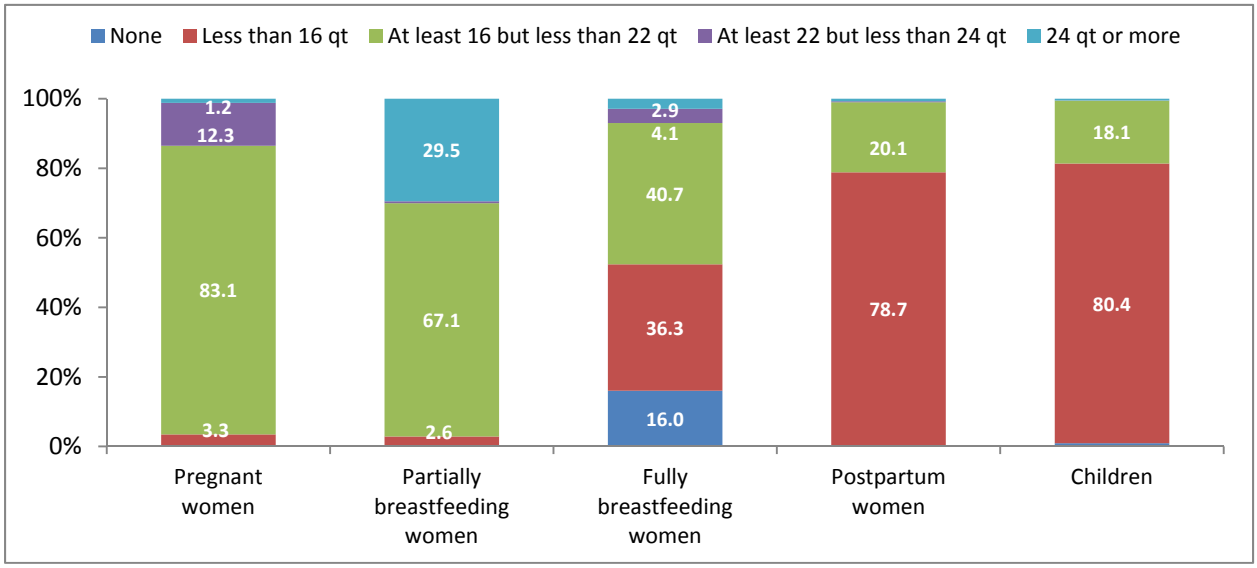
[b] *Partially breastfeeding women* category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of 16 quarts, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of 22 quarts, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of zero quarts.

[c] Fluid milk. Evaporated and dry milk are converted to fluid equivalent. MMA is for fluid milk. The MMA can be met by combining fluid, dry, and evaporated milk, as well as substituting cheese or tofu for part of the fluid milk allowance. Cheese and tofu are not included in this table.

[d] *Pregnant women* category includes women pregnant with one fetus with an MMA of 22 quarts and women pregnant with multiples with an MMA of 24 quarts.

[e] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

Figure II.3
Quantity of Milk Prescribed to WIC Participants (Quarts)



Values less than 1 percent are not shown.

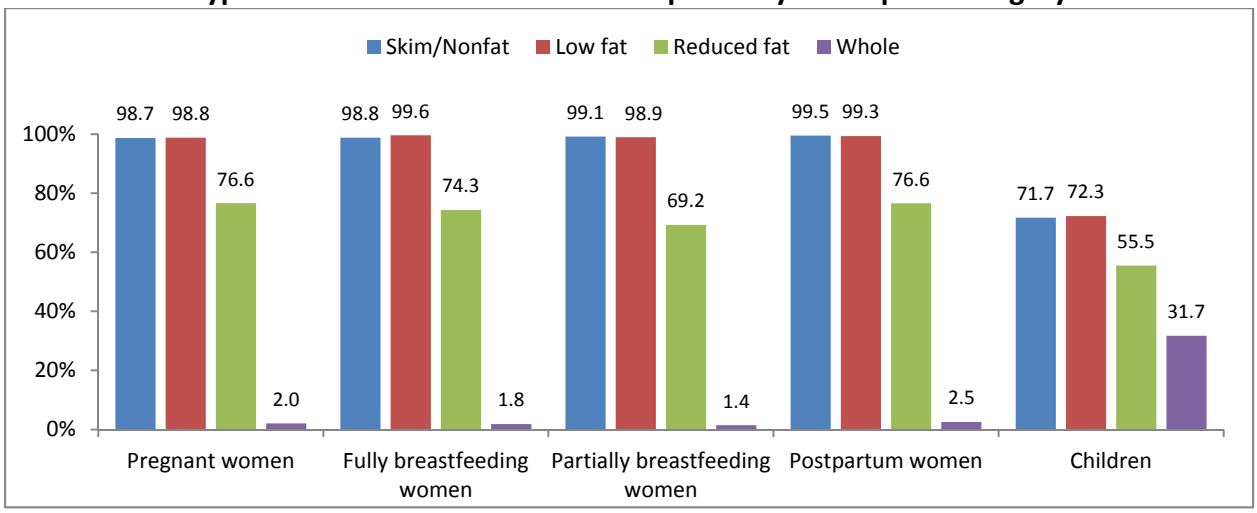
Prescriptions often allow more than one form or type of milk. Virtually all prescriptions allowed fluid milk. Within the categories of pregnant and breastfeeding women, 25 to 28 percent of prescriptions allowed nonfat dry milk, and 16 to 24 percent allowed evaporated milk (table II.3, fourth panel). Postpartum (non-breastfeeding) women were somewhat less likely to have received these options. Evaporated milk was also permitted in 22 percent of child prescriptions, and nonfat dry milk was permitted in 15 percent of child prescriptions.

The type of milk allowable is of particular interest as a result of the Interim Rule change eliminating whole milk for women and older children (figure II.4).[17] Whole milk is still recommended for children aged 12–23 months. Only about 1 to 3 percent of prescriptions for women allowed whole milk. The great majority allowed reduced-fat (2 percent) milk, and virtually all allowed low-fat (1 or 1½ percent) and nonfat milk. Buttermilk was allowed in 15 to 22 percent of prescriptions for women, and acidophilus in 12 to 13 percent. Other special kinds of milk (lactose-free or reduced, UHT, kosher, soy based beverage, flavored) were allowed at rates of 6 percent or less.

Whole milk was more likely to be permitted for children (32 percent of prescriptions). Lower fat milk was permitted in 72 percent of children's milk prescriptions.

[17] According to Federal Guidelines, with medical documentation, whole milk may be substituted for reduced-fat milk for children greater than 24 months of age and women who receive Food Package III. See appendix table C.4 for milk types allowable by child age and medical packages.

Figure II.4
Types of Milk Allowable to WIC Recipients by Participant Category



Milk Substitutes: Cheese and Tofu by Participant Category

Under the Interim Rule, participants receiving milk can choose to substitute 1 pound of cheese for 3 quarts of milk. Fully breastfeeding women and other recipients of Food Package VII can substitute up to 2 pounds of cheese for 6 quarts of milk in addition to the 1 pound of cheese that Food Package VII already provides, for a total of up to 3 pounds of cheese. Consequently, women and children are typically prescribed a pound of cheese—2 pounds if fully breastfeeding (table II.4 and figure II.5). The proportion of participants that chose *no* cheese was only 1 percent among fully breastfeeding women and 16 to 28 percent among the other participant categories. Recall that around 14 percent of partially breastfeeding women are considered partially (minimally) breastfeeding and are not prescribed any food, including milk, to exchange for cheese.[18]

Table II.4
Quantity of Cheese Prescribed by Participant Category (2014)

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Quantity (lb)					
MMA	0-1[c]	1–1.5[a]	N/A	N/A	N/A
Maximum substitution allowance[b]	1-2[c]	2[a]	0–1[a]	1	1
Mean amount prescribed	0.9	1.7	0.7	0.8	0.8
Mean amount prescribed to those prescribed any	1.0	1.8	1.0	1.0	1.0
Percent Prescribed					

[18] See discussion in Chapter I, Section A, Missing Food Package Data.

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Quantity Issued (lb)					
3 or more	0.1%	8.2%	0.3%	0.1%	0.0%
At least 2 but less than 3	1.3%	58.6%	0.8%	0.8%	0.6%
At least 1 but less than 2	82.0%	31.9%	70.6%	76.9%	77.7%
Less than 1	1.2%	0.2%	0.7%	1.6%	1.1%
None	15.5%	1.1%	27.7%	20.6%	20.7%
N	835,675	246,599	364,507	587,580	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

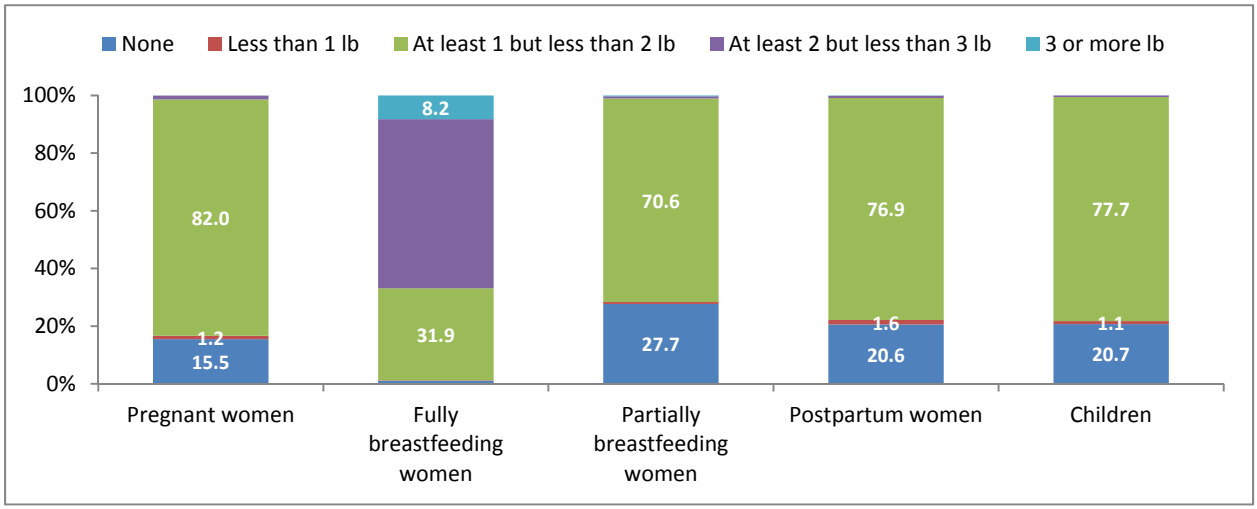
[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples, with an MMA of 1 pound. Women fully breastfeeding multiples are also included in this category with an MMA of 1.5 pounds. These women are also allowed to substitute up to an additional 2 pounds of cheese for 6 quarts of milk.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum and partially (mostly) breastfeeding women up to 1 year postpartum; cheese is not standard in these food packages, but 1 pound of cheese may be substituted for 3 quarts of milk. Also included in this category are partially (minimally) breastfeeding women more than 6 months postpartum, with a maximum substitution allowance of zero.

[b] With medical documentation, additional cheese may be issued on an individual basis.

[c] *Pregnant women* category includes women pregnant with one fetus who are allowed to substitute 1 pound of cheese for 3 quarts of milk and women pregnant with multiples with an MMA of 1 pound of cheese plus they may substitute up to 2 pounds of cheese for 6 quarts of milk.

Figure II.5
Pounds of Cheese Prescribed by Participant Category



Values less than 1 percent are not shown.

Few participants were prescribed any tofu—1 to 3 percent of women and almost no children (table II.5). Under the Interim Rule, tofu can be substituted for milk without medical documentation at the rate of 1 pound of tofu for 1 quart of milk up to the maximum substitution allowance shown in Table II.5. With medical documentation, women may substitute additional tofu up to the maximum allowance of fluid milk (see table II.3 for fluid milk MMA). For children, tofu may be substituted with appropriate medical documentation up to a maximum of 16 pounds. The mean amount prescribed to those who were prescribed any tofu was about a pound for pregnant and breastfeeding women and 0.5 pounds for postpartum women. The few children who were prescribed tofu were prescribed nearly 3 pounds.

Table II.5
Quantity of Tofu Prescribed by Participant Category (2014)

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Quantity (lb)					
MMA	N/A	N/A	N/A	N/A	N/A
Maximum substitution allowance[b]	4–6[c]	6	0–6[a]	4	0
Mean amount prescribed	< 0.1	< 0.1	< 0.1	< 0.1	< 0.1
Mean amount prescribed to those prescribed any	1.2	1.0	1.1	0.5	2.9
Percent Prescribed Quantity Issued (lb)					
4 or more	0.1%	0.2%	0.1%	< 0.1%	< 0.1%
Less than 4	2.1%	1.8%	1.3%	2.5%	< 0.1%
None	97.9%	98.0%	98.6%	97.5%	100.0%
N	835,675	246,599	364,507	587,580	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding (single and multiple infants) up to 1 year postpartum and partially (mostly) breastfeeding multiples.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum with a maximum substitution allowance of 6 pounds, partially (mostly) breastfeeding women up to 1 year postpartum with a maximum substitution allowance of 6 pounds, and partially (minimally) breastfeeding women more than 6 months postpartum with a maximum substitution allowance of zero.

[b] Tofu can be substituted for milk without medical documentation at the rate of 1 pound of tofu for 1 quart of milk up to the maximum substitution allowance shown. With medical documentation, women may substitute additional tofu up to the maximum allowance of fluid milk (see table II.3 for fluid milk MMA). For children, tofu may be substituted with appropriate medical documentation up to a maximum of 16 pounds.

[c] *Pregnant women* category includes women pregnant with one fetus with a maximum substitution allowance of 4 pounds and women pregnant with multiples with a maximum substitution allowance of 6 pounds.

C. JUICE

Under the Interim Rule, the MMA for juice is 96 ounces for non-breastfeeding and partially (minimally) breastfeeding postpartum women; 128 ounces for children; and 144 ounces for pregnant, partially breastfeeding, and fully breastfeeding women (table II.6). With the exception of partially breastfeeding women, who are discussed below, and women fully breastfeeding multiple infants who may receive 1.5 packages, all participants in a certification category are entitled to the same amount.[19] Table II.6 and figure II.6 show that 63 to 73 percent of participants in each category (except partially breastfeeding) were prescribed at least the MMA for their category. Only a handful of participants were prescribed none. Between a quarter and a third in each of these categories were prescribed some juice but not the full MMA.

[19] Women who are pregnant with multiples are issued Food Package VII, which contains additional juice. However, there are relatively few of these women and therefore they have little impact on the distribution of quantities issued.

The category of partially breastfeeding women represents three subgroups with different MMAs: partially (mostly) breastfeeding women (144 ounces), partially (minimally) breastfeeding women up to 6 months postpartum (96 ounces), and minimally breastfeeding women more than 6 months postpartum (no juice; these participants are not authorized to receive a food package). This composition is reflected in the distribution of the prescription amounts: 32 percent were prescribed 144 ounces or more, 43 percent were prescribed at least 96 ounces but less than 144; and 7 percent were prescribed less than 96 ounces; 18 percent were prescribed none (figure II.6). Recall that around 14 percent of partially breastfeeding women are considered partially (minimally) breastfeeding and are not prescribed any food, including juice.

Table II.6
Quantity of Juice Prescribed by Participant Category (2014)

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Quantity (oz)[b]	144	144–216[a]	0–144[a]	96	128
MMA	140.8	140.6	97.1	89.2	123.7
Mean amount prescribed	141.1	141.0	118.8	92.0	124.7
Mean amount prescribed to those prescribed any					
Percent Prescribed					
Quantity Issued (oz)	72.3%	63.4%	31.8%	2.5%	2.4%
144 or more	23.9%	32.8%	9.9%	0.5%	69.9%
At least 128 but less than 144	1.8%	2.8%	33.1%	69.6%	24.0%
At least 96 but less than 128	1.8%	0.8%	6.9%	24.4%	3.0%
Less than 96	0.2%	0.3%	18.3%	3.1%	0.8%
None					
N	835,675	246,599	364,507	587,580	4,537,186

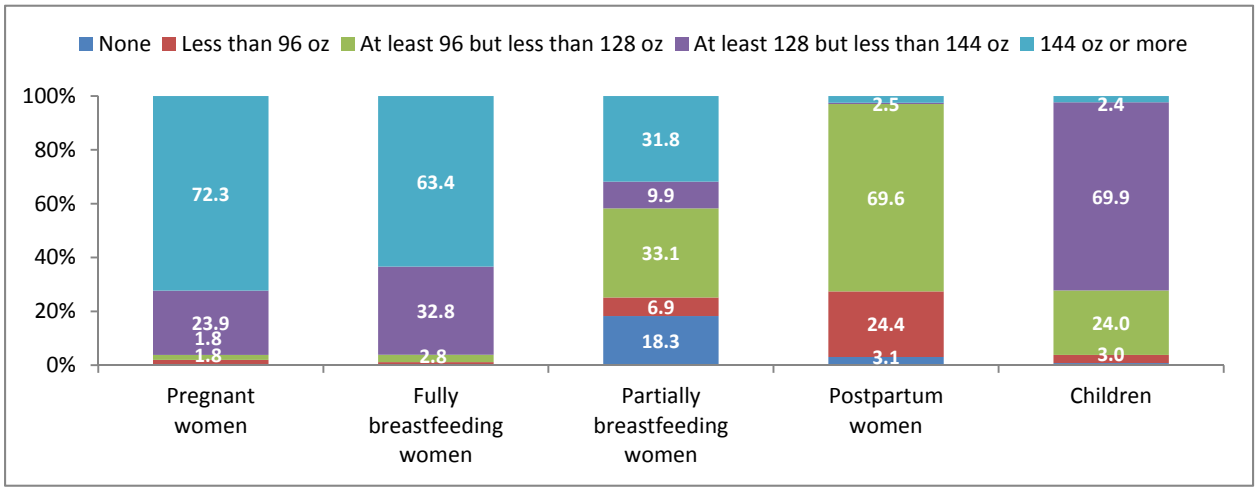
Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples with an MMA of 144 ounces. Women fully breastfeeding multiples are also included in this category with an MMA of 216 ounces.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of 96 ounces, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of 144 ounces, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of zero.

[b] Single-strength juice. Concentrated juice converted to single-strength equivalent.

Figure II.6
Ounces of Juice Prescribed by Participant Category



Values less than 1 percent are not shown.

D. CEREAL

Under the Interim Rule, the MMA for cereal is 24 ounces per month for infants aged 6 months and over and 36 ounces per month for all WIC categories of women and children. Nearly all participants who were prescribed cereal were prescribed at least that amount (table II.7). As was the case for other foods, no cereal was prescribed for around 16 percent of partially breastfeeding women. Recall that around 14 percent of partially breastfeeding women are considered partially (minimally) breastfeeding and are not prescribed any food, including cereal.

Table II.7
Quantity of Cereal Prescribed by Participant Category (2014)

	Participant Category					
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Infants Aged 6 Months or Older	Children
Quantity (oz)[b]						
MMA	36	36–54[a]	0–36[a]	36	24	36
Mean amount prescribed	35.7	35.1	30.3	35.8	22.8	35.8
Mean amount prescribed to those prescribed any	35.9	36.0	36.1	36.1	24.2	36.1
Percent Prescribed Quantity Issued (oz)						
36 or more	98.1%	96.5%	83.0%	98.1%	3.5%	98.0%
At least 24 but less than 36	0.2%	0.4%	0.2%	0.2%	87.5%	0.5%
Less than 24	1.1%	0.5%	0.6%	0.9%	3.3%	0.6%
None	0.6%	2.5%	16.2%	0.9%	5.7%	0.8%
N	835,675	246,599	364,507	587,580	952,696	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples with an MMA of 36 ounces. Women fully breastfeeding multiples are also included in this category with an MMA of 54 ounces.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of 36 ounces, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of 36 ounces, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of zero.

[b] Infants receive infant cereal. All others receive adult cereal.

E. EGGS

Under the Interim Rule, the MMA for eggs is 2 dozen per month for fully breastfeeding women and other recipients of Food Package VII, and 1 dozen eggs per month for other women and for children. Virtually all participants in all categories were prescribed at least the MMA (table II.8) except for partially breastfeeding women, 16 percent of whom were prescribed no eggs. Recall that around 14 percent of partially breastfeeding women are considered partially (minimally) breastfeeding and are not prescribed any food, including eggs.

Table II.8
Quantity of Eggs Prescribed by Participant Category (2014)

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Quantity (dozen)[b]					
MMA	1-2[c]	2–3[a]	0–1[a]	1	1
Mean amount prescribed	1.0	2.0	0.9	1.0	1.0
Mean amount prescribed to those prescribed any	1.0	2.0	1.0	1.0	1.0

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Percent Prescribed Quantity Issued (dozen)					
2 or more	2.2%	96.9%	3.4%	1.3%	0.7%
At least 1 but less than 2	96.9%	2.7%	80.3%	98.0%	98.2%
Less than 1	0.0%	0.0%	0.0%	0.0%	0.0%
None	0.9%	0.3%	16.3%	0.8%	1.1%
N	835,675	246,599	364,507	587,580	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples with an MMA of 2 dozen. Women fully breastfeeding multiples are also included in this category with an MMA of 3 dozen.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of 1 dozen, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of 1 dozen, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of zero.

[b] Fresh eggs. Dried egg mix converted to fresh equivalent.

[c] *Pregnant women* category includes women pregnant with one fetus with an MMA of 1 dozen and women pregnant with multiples with an MMA of 2 dozen.

F. LEGUMES

Women's and children's food packages contain legumes in the form of dry beans, peanut butter, and/or canned beans. Under the Interim Rule, the MMA for pregnant women, fully breastfeeding women, and partially (mostly) breastfeeding women up to 6 months postpartum is 1 pound of dry beans and 18 ounces of peanut butter. Canned beans may be substituted for dried beans at the rate of 64 ounces of canned beans for 1 pound of dried beans. Federal regulations allow participants in these categories to choose any combination of two of these three items. Children and non-breastfeeding and partially (minimally) breastfeeding women up to 6 months postpartum can receive 1 pound of dried beans or 18 ounces of peanut butter. These participants may also substitute canned beans for dried beans at the same rate as above. Recall that partially (minimally) breastfeeding women 6 or more months postpartum are not eligible to receive WIC supplemental foods.

The mean amount of legumes prescribed to pregnant and fully breastfeeding women was 33 ounces, and nearly 95 percent of those women received the MMA. Children were prescribed an average of 17 ounces of legumes, and postpartum (non-breastfeeding women) were prescribed an average of 18 ounces of legumes; 98 percent of participants in these categories were prescribed the MMA. Among partially breastfeeding women with food packages, approximately equal numbers were prescribed at least the higher and lower MMAs (table II.9).

It would be interesting to know exactly what types and combinations of legumes participants are prescribed, but data limitations do not allow us to show this. The majority of participant packages do not specify the type of legume, but instead allow, for example, peanut butter or dried beans, or dried or canned beans, or dried beans, canned beans, or peanut butter. What we can show is the type of legumes allowed in food packages and the type of legumes prescribed. A legume type is *allowable* in a food packages when it is an option in the food package. For example, a prescription that is described as containing 18 oz peanut butter or 16 ounces dried beans would be counted in both the type allowable dry beans category and the type allowable peanut butter category. A legume type is *prescribed* when the food package description specifies the type of legume in the prescription; we know the prescription contained that type of legume.

For example, a food package with dry beans and peanut butter would be counted under each of those types prescribed, whereas dried beans or peanut butter would be counted under not specified.

Packages typically offer a choice between the different forms of legumes, treating as equivalent 16 ounces of dry beans, 18 ounces of peanut butter, and 64 ounces of canned beans. Participants entitled to 32–36 ounces of legumes typically were able to choose any combination of foods (e.g., two 18-ounce jars of peanut butter, or 1 pound of beans and one 18-ounce jar of peanut butter). Peanut butter is prescribed in the most packages (19 to 54 percent), followed by dry beans (10 to 42 percent), and then canned beans (7 to 15 percent) for all participant categories. Many food packages allow more than one type of legume (i.e. peanut butter or dry beans): 53 to 63 percent of packages do not specify the type of legume (figure II.7).

Table II.9
Quantity of Legumes Prescribed by Participant Category (2014)

	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Quantity (oz)					
MMA	36/32	36/32–54/48[a]	0–36/32[a]	18/16	18/16
Mean amount prescribed	33.2	32.9	21.4	17.6	16.9
Mean amount prescribed to those prescribed any	33.3	33.2	25.6	17.8	17.1
Percent Prescribed					
Quantity Issued (oz)					
36/32 or more	94.3%	93.1%	41.2%	4.1%	2.0%
At least 18/16 but less than 36/32	5.3%	5.9%	42.0%	93.7%	95.5%
Less than 18/16	< 0.1%	< 0.1%	0.4%	0.8%	1.4%
None	0.4%	0.9%	16.4%	1.4%	1.2%
Type Allowable[b]					
Dry beans	75.4%	74.5%	77.7%	68.1%	74.6%
Peanut butter	63.5%	59.7%	66.7%	77.9%	70.2%
Canned beans	49.5%	44.4%	54.6%	48.0%	42.8%
Type Prescribed[b]					
Dry beans	35.0%	41.5%	22.0%	9.8%	13.2%
Peanut butter	53.6%	47.9%	29.3%	25.6%	19.3%
Canned beans	12.6%	14.7%	7.5%	9.4%	7.1%
Not specified	63.0%	63.2%	53.2%	58.2%	60.6%
N	835,675	246,599	364,507	587,580	4,537,186

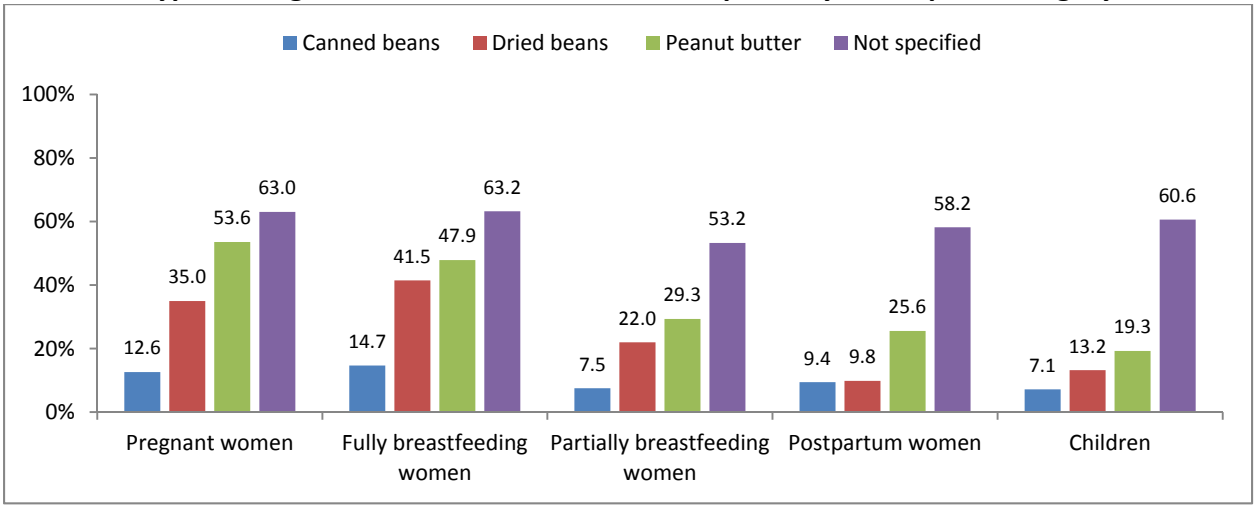
Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples with an MMA of 32 ounces dry beans or 36 ounces peanut butter. Women fully breastfeeding multiples are also included in this category with an MMA of 48 ounces dry beans or 54 ounces peanut butter.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of 16 ounces of beans or 18 ounces of peanut butter, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of 32 ounces beans or 36 ounces of peanut butter, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of zero. Canned beans may be substituted for dry beans at the rate of 64 ounces of canned beans for 16 ounces of dry beans.

[b] Food package contains peanut butter, beans, canned beans, or a combination of these types. Responses are not mutually exclusive, so percentages may add to more than 100 percent. *Type allowable* percentages include food packages where that type was included in the prescription, for example, a prescription that is described as containing 18 oz peanut butter or 16 ounces dried beans would be counted in both the type allowable dry beans category and the type allowable peanut butter category. *Type prescribed* counts packages where the food package description specifies which type of legume is in the prescription, for example a food package with dry beans and peanut butter would be counted under each of those types prescribed, whereas dried beans or peanut butter would be counted under not specified.

Figure II.7
Types of Legumes Prescribed for WIC Participants by Participant Category



G. CANNED FISH

Canned fish is prescribed to recipients of Food Package VII, which is for fully breastfeeding women and women who are partially breastfeeding multiple children or pregnant with multiples. The Interim Rule allows State agencies to prescribe tuna, salmon, sardines, and mackerel. Virtually all fully breastfeeding women were prescribed the MMA of 30 ounces (table II.10).

Tuna and salmon were both permitted in nearly all prescriptions (97.3 percent and 90.0 percent, respectively). Sardines were allowable in just under half (45.3 percent) and mackerel in none (figure II.8).

Table II.10
Quantity of Canned Fish Prescribed to Fully Breastfeeding Women (2014)

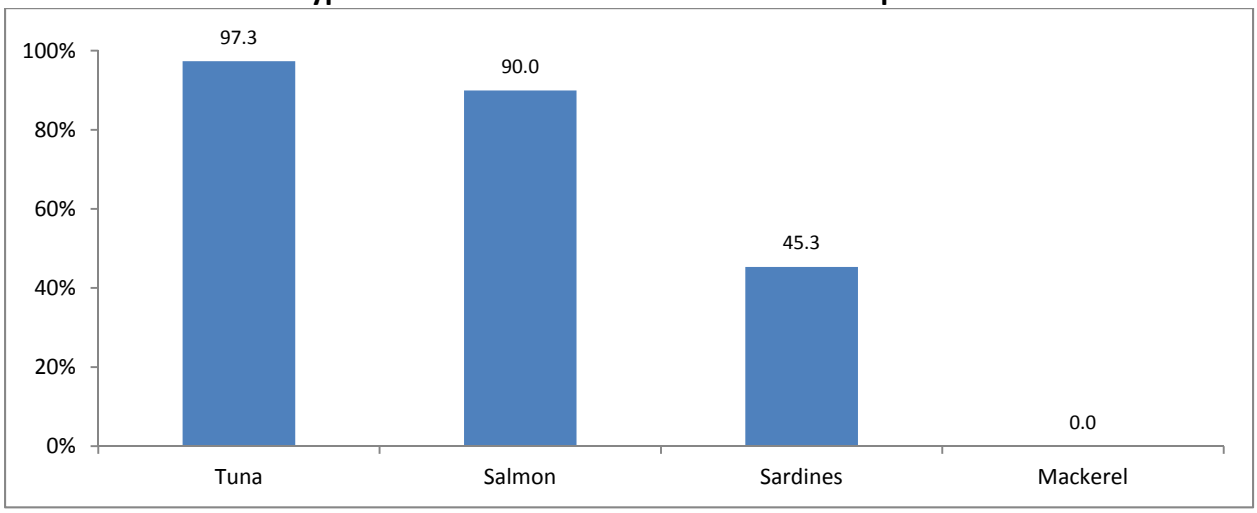
	Fully Breastfeeding Women[a]
Quantity (oz)	
MMA	30
Mean amount prescribed	29.2
Mean amount prescribed to those prescribed any	30.1
Percent Prescribed	
Quantity Issued (oz)	
30	96.4%
Less than 30	0.7%
None	2.8%
Type Allowable[b]	
Tuna	97.3%
Salmon	90.0%
Sardines	45.3%
Mackerel	0.0%
N	246,599

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding up to 1 year postpartum and partially (mostly) breastfeeding multiples.

[b] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

Figure II.8
Types of Canned Fish Allowed in WIC Prescriptions



H. WHOLE-GRAIN ALTERNATIVES

Under the Interim Rule, children are entitled to 2 pounds of whole-grain alternatives, and women who are pregnant, fully breastfeeding, breastfeeding multiples, or partially (mostly) breastfeeding (Food Packages V and VII) are entitled to 1 pound. Non-breastfeeding postpartum women do not receive any whole-grain alternatives.

Except for partially breastfeeding women, all but 1–2 percent of participants in each certification category were prescribed at least the MMA (table II.11). While partially breastfeeding women who are mostly breastfeeding are prescribed a food package containing whole grains, partially (minimally) breastfeeding women (less than 6 months postpartum) are not prescribed whole grains. Recall that partially (minimally) breastfeeding women more than 6 months postpartum are not entitled to a food package.

Whole-wheat or other whole-grain bread was allowed on virtually all prescriptions, brown rice and soft-corn or whole-wheat tortillas on 85 to 89 percent, oatmeal on nearly half, and bulgur and whole-grain barley on 19 to 29 percent (figure II. 9).

Table II.11
Quantity of Whole-Grain Alternatives Prescribed by Participant Category (2014)

	Participant Category			
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Children
Quantity (lb)				
MMA	1	1–1.5[a]	0–1[a]	2
Mean amount prescribed	1.0	1.0	0.4	2.0
Mean amount prescribed to those prescribed any	1.0	1.0	1.0	2.0
Percent Prescribed				
Quantity Issued (lb)				
2 or more	0.3%	0.4%	0.4%	97.6%
At least 1 but less than 2	98.5%	98.8%	42.1%	1.6%
Less than 1	< 0.1%	< 0.1%	< 0.1%	< 0.1%
None	1.2%	0.8%	57.5%	0.8%

	Participant Category			
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Children
Type Allowable[b]				
Whole-wheat/whole-grain bread	95.9%	96.6%	96.0%	96.8%
Soft-corn or whole-wheat tortillas	87.1%	88.8%	87.8%	88.5%
Brown rice	85.1%	87.0%	86.1%	86.6%
Oatmeal	45.9%	48.4%	42.8%	47.4%
Bulgur	22.5%	29.4%	22.5%	23.8%
Whole-grain barley	18.8%	25.2%	19.9%	20.4%
N	835,675	246,599	364,507	4,537,186

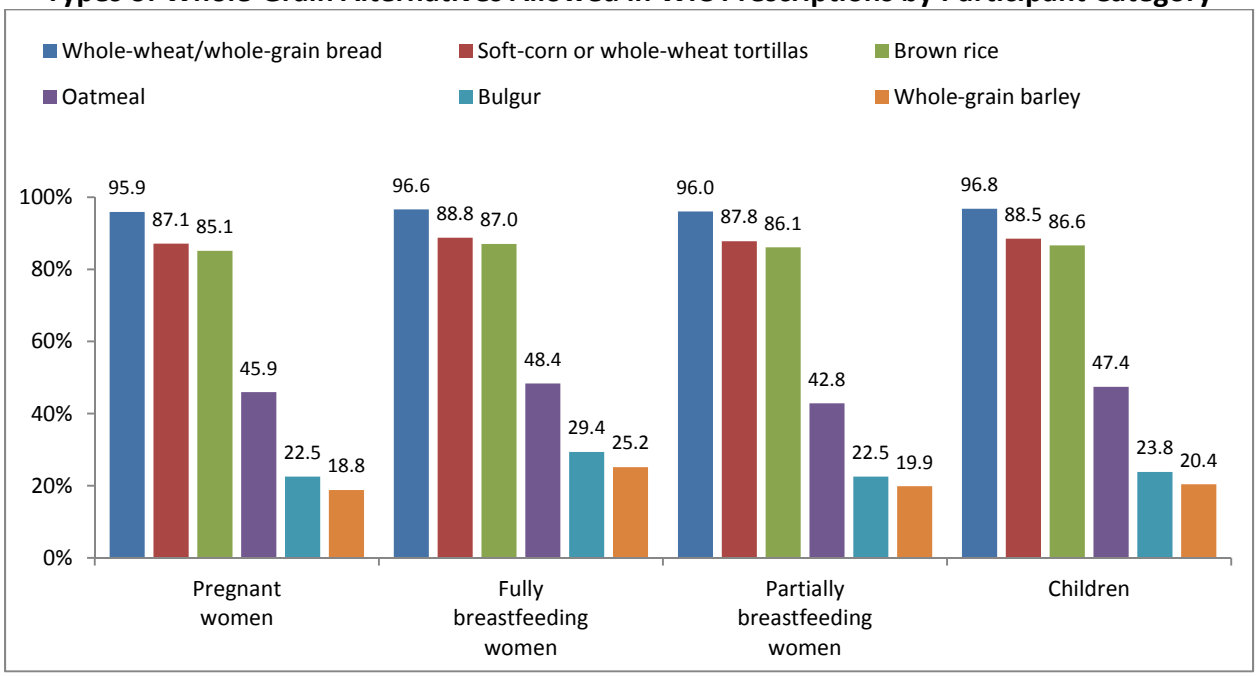
Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples with an MMA of 1 pound. Women fully breastfeeding multiples are also included in this category with an MMA of 1.5 pounds.

Partially breastfeeding women category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of 1 pound, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of 1 pound, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of zero.

[b] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

Figure II.9
Types of Whole-Grain Alternatives Allowed in WIC Prescriptions by Participant Category



I. INFANT FOODS

Under the Interim Rule, infants aged 6 months and older are issued an MMA of 256 ounces of infant fruits and vegetables and 77.5 ounces of infant meat if fully breastfed and 128 ounces of infant fruits and vegetables if not fully breastfed (table II.12).

Of all infants, 8.8 percent were prescribed at least 256 ounces of fruits and vegetables, and an additional 76 percent were prescribed at least 128 ounces but less than 256 ounces (table II.12). The mean amount across all infants was 129.4 ounces. Similarly, 9.6 percent of infants were prescribed at least 77.5 ounces of meat. Virtually all the remaining infants were prescribed no

meat. These infants are presumed to be infants who are not fully breastfed, and therefore not authorized to receive infant meat.

Table II.12
Quantity of Infant Foods Prescribed for Infants Aged 6 Months and Older (2014)

	Infants 6+ Months
Fruits and Vegetables	
Quantity (oz)	
MMA	128–256[a]
Mean amount prescribed	129.4
Mean amount prescribed to those prescribed any	137.1
Percent Prescribed	
Quantity Issued (oz)	
256 or more	8.8%
At least 128 but less than 256	76.3%
Less than 128	9.4%
None	5.6%
N	952,696
Meat	
Quantity (oz)	
MMA	0–77.5[a]
Mean amount prescribed	7.8
Mean amount prescribed to those prescribed any	76.4
Percent Prescribed	
Quantity Issued (oz)	
77.5 or more	9.6%
Less than 77.5	0.5%
None	89.8%
N	952,696

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] The MMA for infant fruits and vegetables is 128 ounces for fully formula-fed and partially breastfed infants aged 6 months and older and 256 ounces for fully breastfed infants aged 6 months and older.

The MMA for infant meat is 77.5 ounces of baby food meat for fully breastfed infants aged 6 months and older and 0 ounces for fully formula-fed and partially breastfed infants aged 6 months and older.

J. FRUIT AND VEGETABLE CASH VALUE VOUCHERS

Under the Interim Rule, cash value vouchers for purchasing fruits and vegetables were included in WIC prescriptions in the amount of $6 for children and $10 for women. More than 94 percent of participants by category received at least the MMA (table II.13), with the exception of partially breastfeeding women. Recall that around 14 percent of partially breastfeeding women are considered partially (minimally) breastfeeding and are not prescribed any food.

Most vouchers allowed for canned or frozen produce as well as fresh fruits and vegetables. Some women's vouchers also allowed for dried products (figure II.10).

Table II.13
Amount of Fruit and Vegetable Voucher Prescribed by Participant Category (2014)

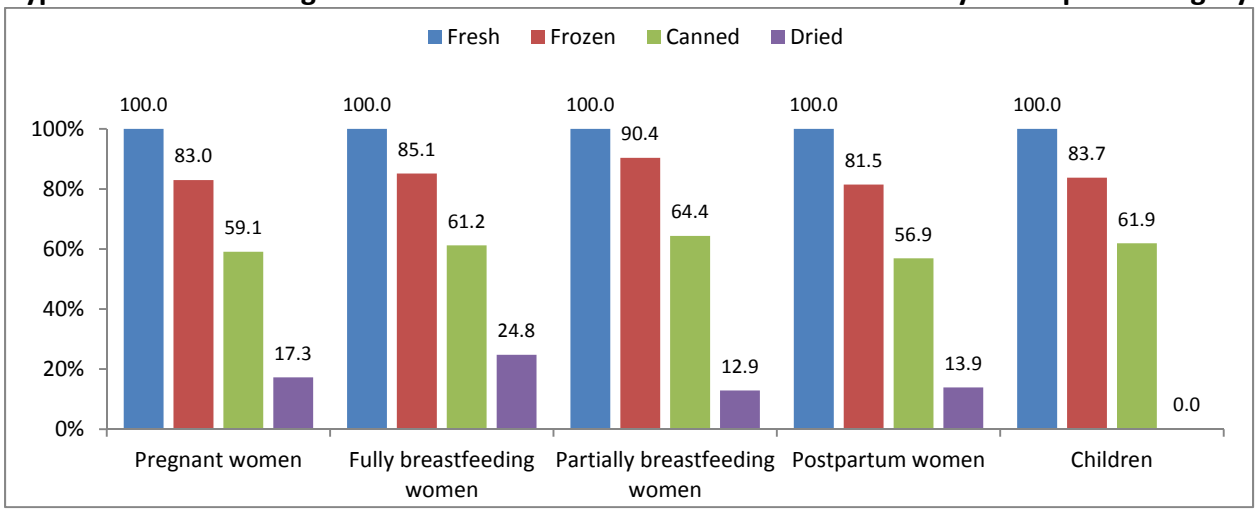
	Participant Category				
	Pregnant Women	Fully Breastfeeding Women[a]	Partially Breastfeeding Women[a]	Postpartum Women	Children
Amount ($)					
MMA	10	10–15[a]	0–10[a]	10	6
Mean amount prescribed	9.65	9.49	8.16	9.62	5.84
Mean amount prescribed to those prescribed any	10.04	10.05	10.07	10.10	6.07
Percent Prescribed					
Quantity Issued ($)					
10 or more	96.2%	94.5%	80.7%	95.3%	0.7%
At least 6 but less than 10	< 0.1%	< 0.1%	0.3%	0.1%	95.4%
Less than 6	< 0.1%	< 0.1%	< 0.1%	< 0.1%	< 0.1%
None	3.8%	5.5%	18.9%	4.7%	3.9%
Type Allowable[b]					
Fresh	100.0%	100.0%	100.0%	100.0%	100.0%
Frozen	83.0%	85.1%	90.4%	81.5%	83.7%
Canned	59.1%	61.2%	64.4%	56.9%	61.9%
Dried	17.3%	24.8%	12.9%	13.9%	0.0%
N	835,675	246,599	364,507	587,580	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, District of Columbia, Puerto Rico.

[a] *Fully breastfeeding women* category includes women fully breastfeeding one infant up to 1 year postpartum and partially (mostly) breastfeeding multiples with an MMA of $10. Women fully breastfeeding multiples are also included in this category with an MMA of $15. *Partially breastfeeding women* category includes partially (minimally) breastfeeding women up to 6 months postpartum with an MMA of $10, partially (mostly) breastfeeding women up to 1 year postpartum with an MMA of $10, and partially (minimally) breastfeeding women more than 6 months postpartum with an MMA of $0.

[b] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

Figure II.10
Types of Fruits and Vegetables Allowable for Purchase With Vouchers by Participant Category



III. CHANGES IN WIC FOOD PRESCRIPTIONS SINCE 2008

FNS made major changes to the WIC food packages that were published as an Interim Rule in the *Federal Register* in December 2007, with a final implementation date of October 2009. The Interim Rule aligned the food packages more closely with updated nutrition science, sought to promote long-term breastfeeding, and added optional substitutions to some food categories to better meet the needs of WIC's diverse population.

An overarching change of the Interim Rule that affected all WIC foods is that it ended the State agency practice of categorical nutrition tailoring.[20] Although individual tailoring based on participants' needs is still permitted, full monthly allowances of all foods must be made available to all participants if medically or nutritionally warranted.

The Interim Rule added new foods to the packages, including whole-grain cereals and bread; infant food fruit, vegetables, and meat; and a cash value voucher for fruits and vegetables in fresh or processed forms to food packages for children and women.

In addition to the inclusion of new foods, modifications to other food categories included the following:[21]

Infant formula

- The FNB and MMAs, previously the same regardless of age of infant, were ***increased*** for infants aged 4–5 months and ***decreased*** for infants 6 months and older.
- The FNB and MMAs were reduced for partially breastfed infants.
- The FNB and MMAs now vary by the form of formula received (powdered, liquid concentrate, ready-to-feed).

Milk and milk substitutes

- MMAs were reduced for children and for categories of women.
- Only 1 pound of cheese (2 for Food Package VII) can be substituted for milk, instead of up to 4 pounds.
- Women and children aged 2 and older should no longer receive whole milk.
- Soy-based beverage and tofu are now allowed as substitutes.
- An additional pound of cheese is prescribed for fully breastfeeding women.

Juice

- MMAs were reduced for all categories.

[20] An example of categorical tailoring: In 1992, California received USDA's approval to decrease milk and juice in the 1- to 3-year-old child's package to take account of the most current dietary recommendations and to address the problem of obesity (see http://www.cdph.ca.gov/programs/wicworks/WIC%20Foods/WIC-InterimRule-Revision-Letter-1-29-2010.pdf).

[21] With medical documentation, some of the modifications may be relaxed.

- Juice for infants was dropped.

Cereal

- Cereal for infants aged 4–5 months was dropped.

Eggs

- MMAs were reduced.

Legumes

- Canned beans are now authorized.
- MMAs for combinations of peanut butter and beans were increased for pregnant and breastfeeding women.
- Peanut butter or beans was added for postpartum women.

Canned fish

- The MMA was increased.
- Three other types of fish besides tuna are permitted.

WIC Formula

- For women and children receiving medical packages (Food Package III), the MMA was increased from 403 ounces of concentrated formula to 455 ounces of concentrated formula.

In this chapter we show how the Interim Rule[22] changes were reflected in the prescriptions issued, by comparing tabulations from April 2008 with those from April 2012 and April 2014.[23] The earlier 2008 tabulations were presented in a memorandum to FNS, which is included here as appendix B. The 2012 tabulations can be found in the *WIC Participant and Program Characteristics 2012: Food Package Report.*

A. FORMULA

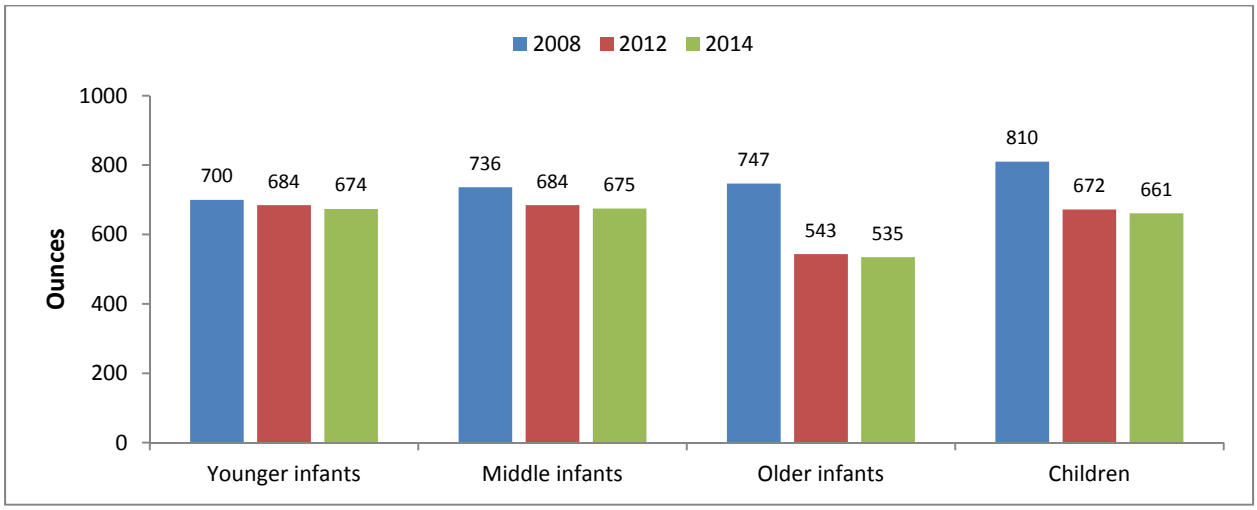
Comparisons of mean prescribed amounts of formula from 2008 through 2014 are complicated by the changes in age categories that were part of the Interim Rule. Although the groups are not exactly the same, comparisons are shown below for "younger infants" (aged 0 to 3.9 months in 2008 and aged 1 to 3.9 months in 2012 and 2014); "middle infants" (aged 4 to 6.9 months in 2008 and aged 4 to 5.9 months in 2012 and 2014); "older infants" (aged 7 to 11. 9 months in 2008 and aged 6 to 11.9 months in 2012 and 2014); and children with medical conditions prescribed formula. Between 2008 and 2012, the mean amounts of formula fell in all categories:

[22] The final rule revising the WIC food packages was published on March 4, 2014, but did not go into effect until after the report's reference period of April 2014.

[23] The first food package report was written in 2012, with Chapter III comparing 2012 food packages (post-Interim Rule) with 2008 food package (pre-Interim Rule). Chapter III of the 2014 FP Report is updated to include descriptions of the changes between 2012 and 2014.

by 2 percent for younger infants, by 7 percent for middle infants, by 27 percent for older infants, and by 17 percent for children. From 2012 to 2014, mean amounts of formula prescribed had small decreases for all categories: by 2 percent for younger and older infants and children, and by 1 percent for middle infants.

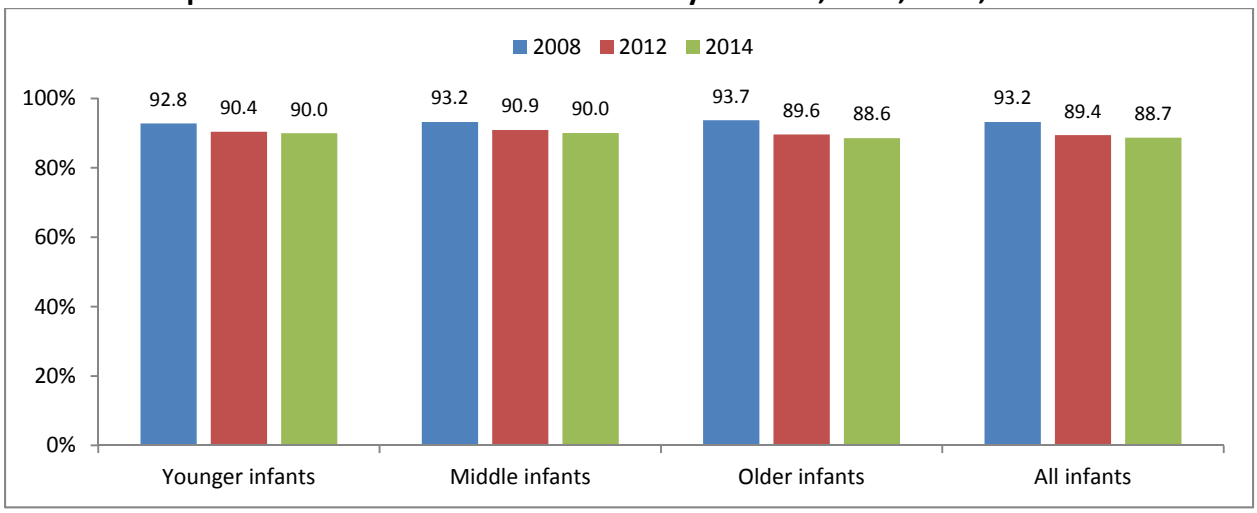
Figure III.1
Mean Ounces of Infant Formula Prescribed for Selected Participant Groups, 2008, 2012, and 2014



Source: Memorandum of December 10, 2010, exhibit FP1 (Appendix B); table II.2, WIC PC 2012: Food Package Report; table II.2 above "Younger infants" aged 0 to 3.9 months in 2008 and aged 1 to 3.9 months in 2012 add 2014; "middle infants" aged 4 to 6.9 months in 2008 and aged 4 to 5.9 months in 2012 and 2014; "older infants" (aged 7 to 11. 9 months in 2009 and aged 6 to 11.9 months in 2012 and 2014. Includes infants receiving no formula.

Given the Interim Rule intent of promoting breastfeeding, examining the proportion of WIC infants prescribed any formula is also of interest. Between 2008 and 2012, these proportions dropped by 2.3 to 2.4 percentage points for younger and middle infants, and by 4.1 percentage points for older infants (figure III.2). Proportions fell only slightly between 2012 and 2014: by 0.4 percentage points for younger infants and by about 1 percentage point for middle and older infants. As discussed in chapter 1, 29 State agencies did not report a food package for fully breastfed infants and these participants were excluded from these tabulations.

Figure III.2
Proportions of WIC Infants Prescribed Any Formula, 2008, 2012, and 2014



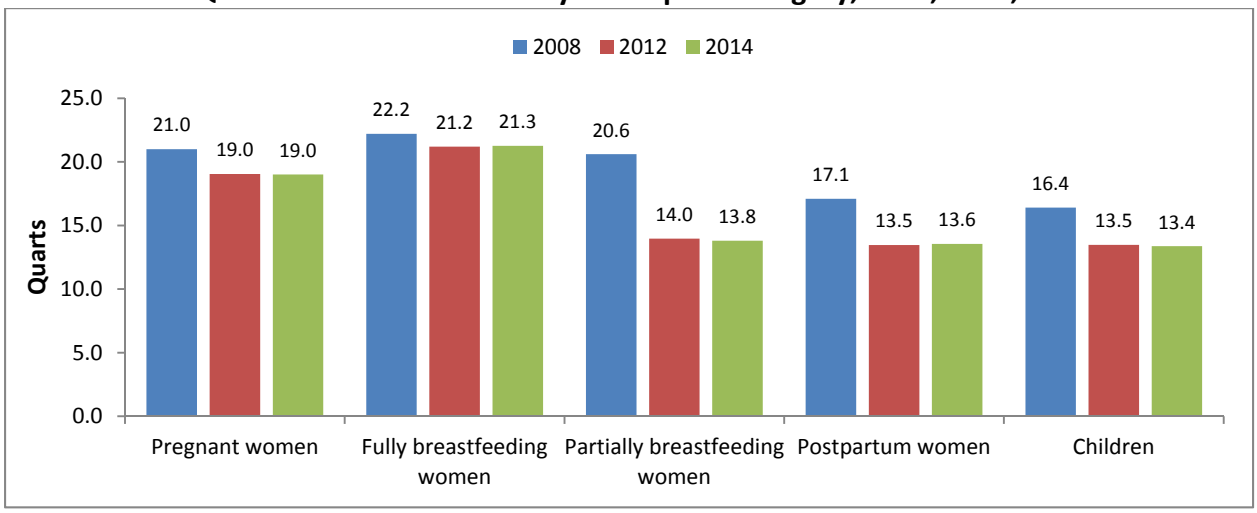
Source: Memorandum of December 10, 2010, exhibit FP1 (Appendix B); table II.2, WIC PC 2012: Food Package Report; table II.2 above "Younger infants" aged 0 to 3.9 months in 2008 and aged 1 to 3.9 months in 2012; "middle infants" aged 4 to 6.9 months in 2008 and aged 4 to 5.9 months in 2012; "older infants" aged 7 to 11. 9 months in 2009 and aged 6 to 11.9 months in 2012

B. MILK AND MILK SUBSTITUTES

Between 2008 and 2012, the mean quantity of milk prescribed declined substantially in all groups. The quantity of milk declined by between 5 and 9 percent for pregnant and fully breastfeeding women, by 18 to 21 percent for children and postpartum non-breastfeeding women, and by 32 percent for partially breastfeeding women (figure III.3). The mean quantities of milk prescribed were similar for all categories in 2012 and 2014.

The changes between 2008 and 2012 reflect the net effects of three forces in the revised food packages under the Interim Rule. First, the MMAs for fluid milk in the revised food packages were reduced in all categories (from 28 quarts to 22 quarts for pregnant women, more than a 20 percent drop; and from 24 quarts to 16 quarts for children, a one-third drop). Second, partially (minimally) breastfeeding women 6 or more months postpartum are now prescribed no milk or other food. Third, the amount of milk that could be substituted with cheese was markedly reduced. The first two forces decreased the amount of milk prescribed, while the third force has the potential to increase the amount of milk prescribed.

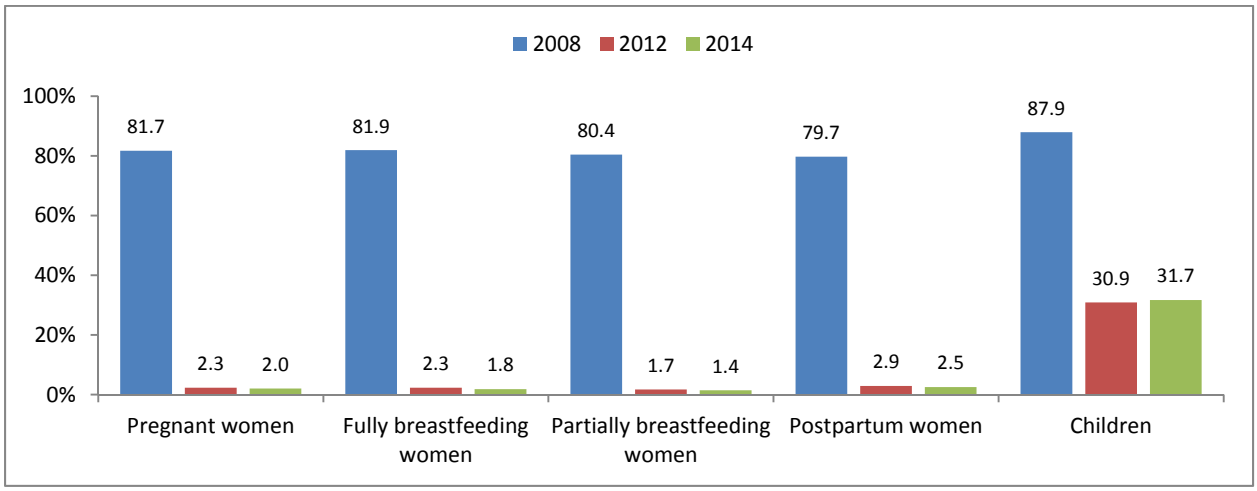
Figure III.3
Mean Quarts of Milk Prescribed by Participant Category, 2008, 2012, and 2014



Source: Memo of December 10, 2010, exhibit FP2 (Appendix B); table II.3, WIC PC 2012: Food Package Report; table II.3 above

Another major change under the Interim Rule with regard to milk is that whole milk is no longer permitted in general for women and for children over age 2. As a consequence, the fraction of prescriptions that allowed whole milk dropped substantially between 2008 and 2012—by between 77 and 80 percentage points for the various categories of participating women, and by 57 percentage points for children (figure III. 4).The proportion of participants allowed whole milk was approximately the same for all categories in both 2012 and 2014.

Figure III.4
Percentage of Participants Allowed Whole Milk, by Participant Category, 2008, 2012, and 2014



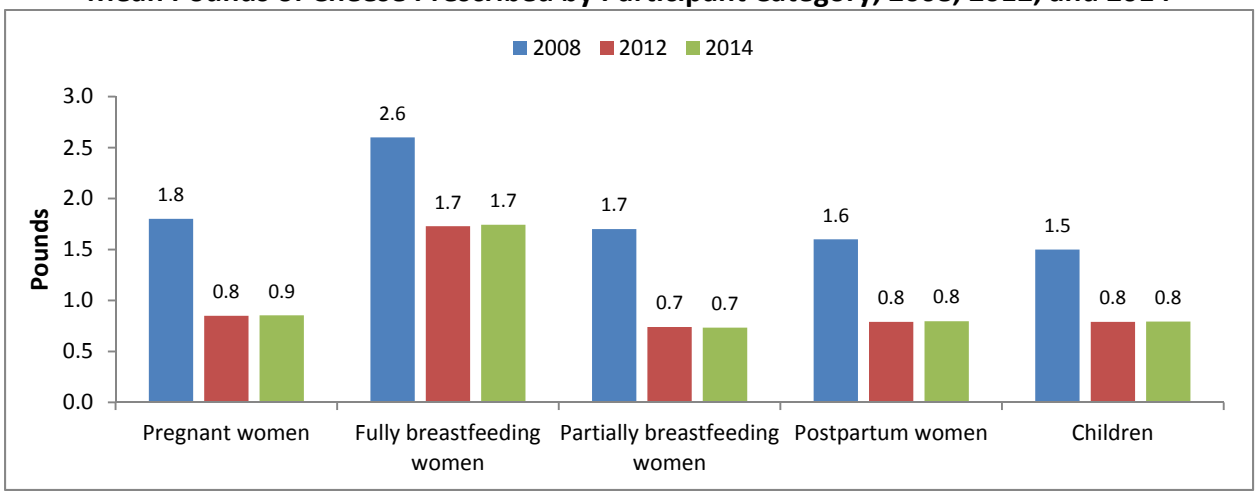
Source: Memo of December 10, 2010, exhibit FP2 (Appendix B); table II.3, WIC PC 2012: Food Package Report; table II.3 above
Includes only participants receiving milk

Cheese prescriptions were expected to decline markedly after the Interim Rule because only 1 pound of cheese could be obtained as a substitute for milk in most participant categories, rather than 4 pounds. However, very few participants in 2008 were prescribed the maximum substitution allowance of cheese. Fewer than 5 percent of participants in any participant category were prescribed as much as 75 percent of the maximum substitution allowance. Hence, mean

cheese prescriptions in 2008 were 2.6 pounds for fully breastfeeding women (who were entitled to an additional pound) and between 1.5 and 1.8 for the other participant categories.

By 2012 these mean quantities had dropped 34 to 57 percent across participant categories, to just under 1 pound for all groups except fully breastfeeding women who were prescribed just under 2 pounds (figure III.5). The mean amount of cheese prescribed remained the same from 2012 to 2014 for all categories.

Figure III.5
Mean Pounds of Cheese Prescribed by Participant Category, 2008, 2012, and 2014



Source: Memo of December 10, 2010, exhibit FP3 (Appendix B); table II.4, WIC PC 2012: Food Package Report; table II.4 above

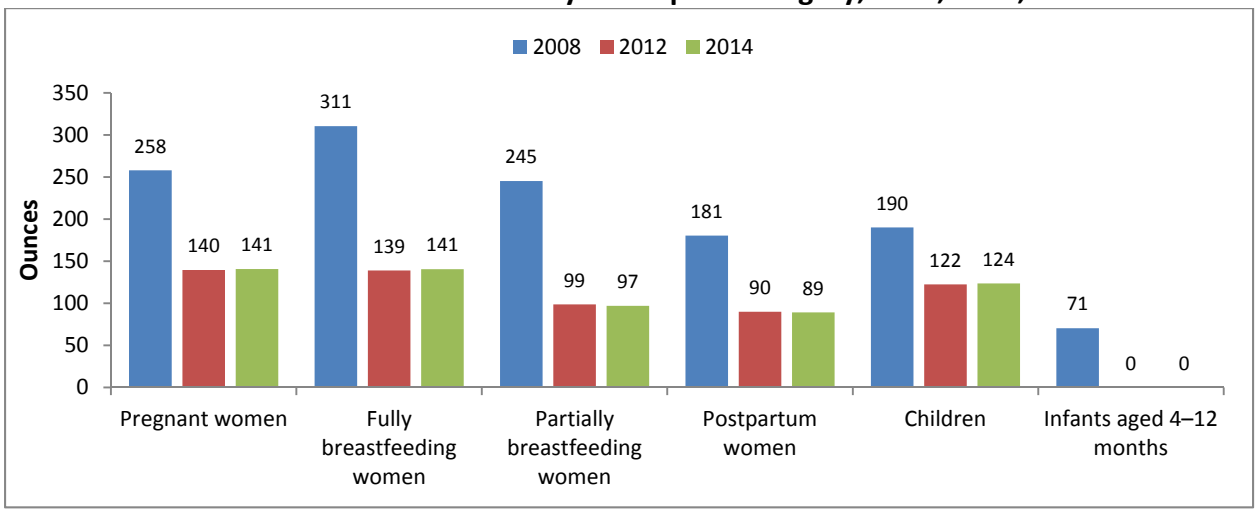
C. JUICE

The decrease in the maximum amounts of juice that could be prescribed after implementation of the Interim Rule led to substantial declines in the mean amounts prescribed in all certification categories (figure III.6). For infants, who were no longer authorized to receive juice, juice prescriptions dropped to zero. For children, the mean amount declined by 36 percent, from 190 to 122 ounces. This reflects a large decrease in the MMA. Thus, in 2008, most WIC children (76.0 percent) were prescribed less than 75 percent of the MMA of 276 ounces. By 2012, the MMA had fallen to 128 ounces, and 69 percent of children were prescribed at least this amount (table II.6, 2012 Food Package Report).

For the four categories of women, the mean amounts of juice prescribed fell by proportions ranging from 46 to 60 percent between 2008 and 2012, reflecting the decline in MMAs.

The mean amount of juice prescribed remained the same from 2012 to 2014 for all categories.

Figure III.6
Mean Ounces of Juice Prescribed by Participant Category, 2008, 2012, and 2014



Source: Memo of December 10, 2010, exhibit FP4 (Appendix B); table II.6, WIC PC 2012: Food Package Report; table II.6 above

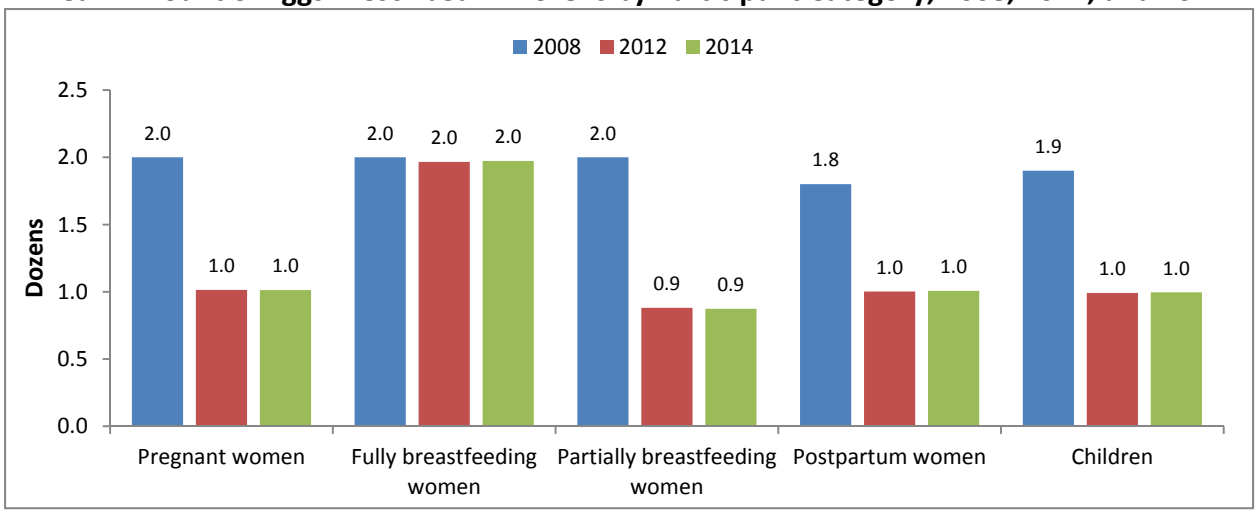
D. EGGS

For pregnant women, partially breastfeeding women, postpartum women, and children, the numbers of eggs prescribed dropped substantially, from mean values of 1.8 to 2 dozen in 2008 down to 0.9 to 1.0 dozen for all groups in 2012 (figure III.7). This reflects the decrease in the MMA under the Interim Rule, from 2 dozen to 1 dozen, for these four groups.

For fully breastfeeding women, the mean quantity prescribed remained at 2.0 dozen, despite the drop in the MMA from 2.5 to 2.0 dozen. Few fully breastfeeding women (only 5.1 percent) were prescribed the full 2.5 dozen in 2008.

The mean amount of eggs prescribed remained the same from 2012 to 2014 for all certification categories.

Figure III.7
Mean Amount of Eggs Prescribed in Dozens by Participant Category, 2008, 2012, and 2014



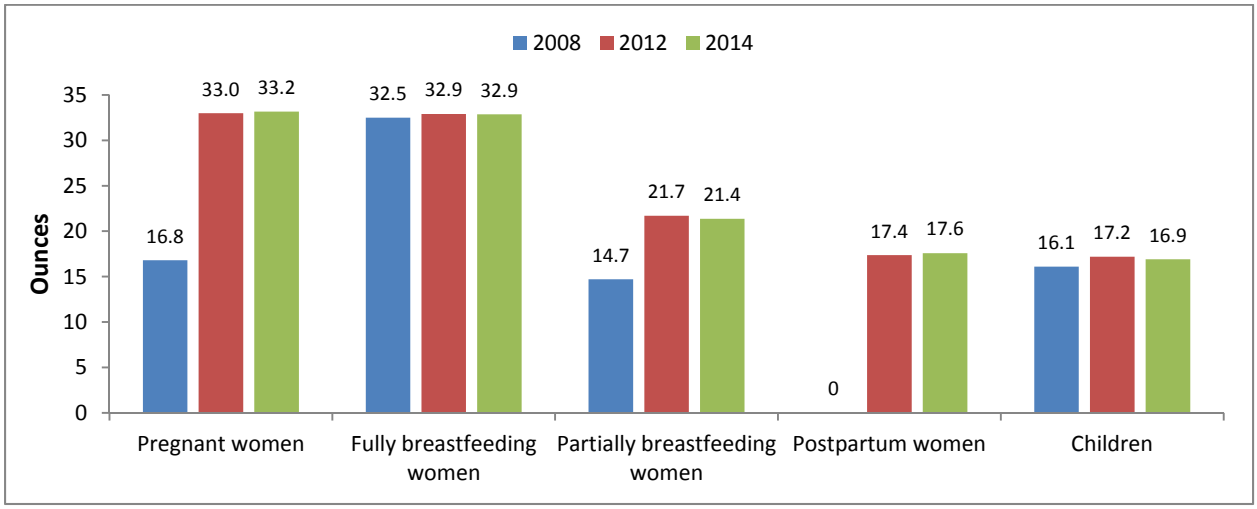
Source: Memo dated December 10, 2010, exhibit FP6 (Appendix B); table II.8, WIC PC 2012: Food Package Report; table II.8 above

E. LEGUMES

The Interim Rule doubled the maximum allowance of legumes for pregnant and partially breastfeeding women and added legumes to the prescriptions of postpartum women. This resulted in a substantial increase in the amounts of legumes prescribed to these women (figure III.8). For pregnant women, the mean amount prescribed practically doubled from 2008 to 2012, from 16.8 to 33.0 ounces; for partially breastfeeding women, it increased by nearly 50 percent, from 14.7 to 21.7 ounces.

Between 2008 and 2012, slight increases in the amount of legumes prescribed were seen for two groups for whom the MMA remained unchanged. For children, the mean amount prescribed increased from 16.1 to 17.2 ounces. For fully breastfeeding women, the mean amount prescribed increased from 32.5 to 32.9 ounces. The mean amount of legumes prescribed stayed approximately the same from 2012 to 2014 for all certification categories.

Figure III.8
Mean Amount of Legumes Prescribed in Ounces by Participant Category, 2008, 2012, and 2014

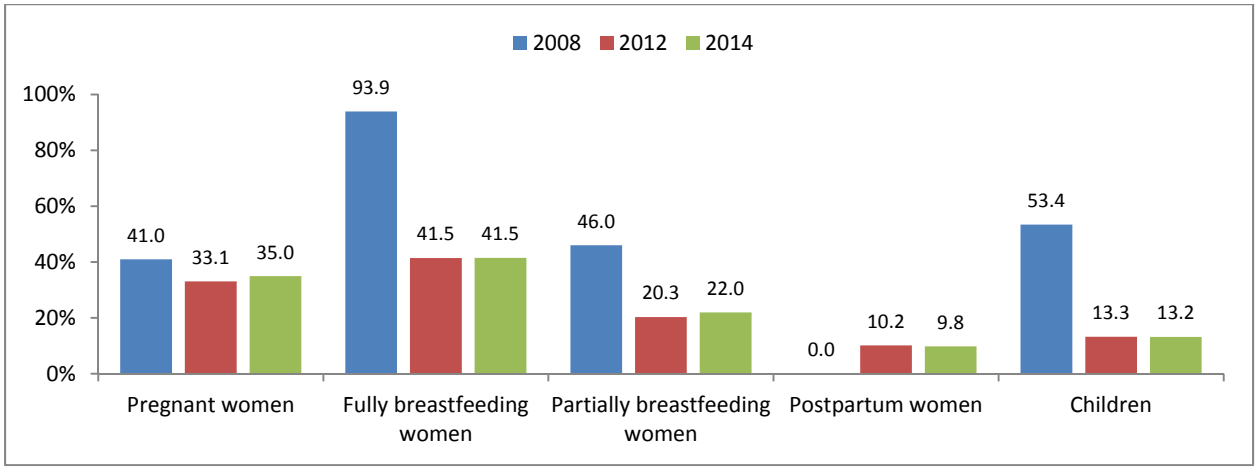


Source: Memo dated December 10, 2010, exhibit FP7 (Appendix B); table II.9, WIC PC 2012: Food Package Report; table II.9 above

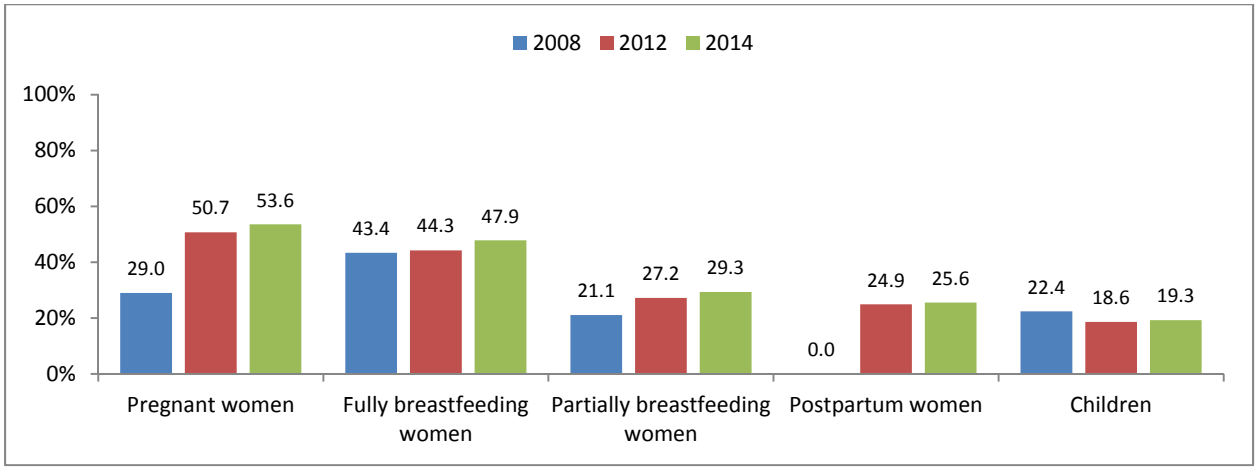
The Interim Rule also allowed the substitution of canned legumes for dried legumes. In 2012, 7.5 to 14.3 percent of packages included canned legumes, depending on the participant category (figure III.9). The type of legumes prescribed in food packages changed considerably between 2008 and 2012 (postpartum women are not included in this discussion, as they were not authorized to receive legumes in 2008). There was a decrease across all participant groups in the proportion of packages that included dry beans, most pronounced for children and partially and fully breastfeeding women. There was an increase in the proportion of packages that included peanut butter for pregnant, partially breastfeeding, and fully breastfeeding women. Additionally, the proportion of packages that did not specify the type of legumes received more than doubled in all participant categories. The types of legumes prescribed remained approximately the same between 2012 and 2014 for all participant categories, including postpartum women.

Figure III.9
Types of Legumes Prescribed by Participant Category, 2008, 2012, and 2014

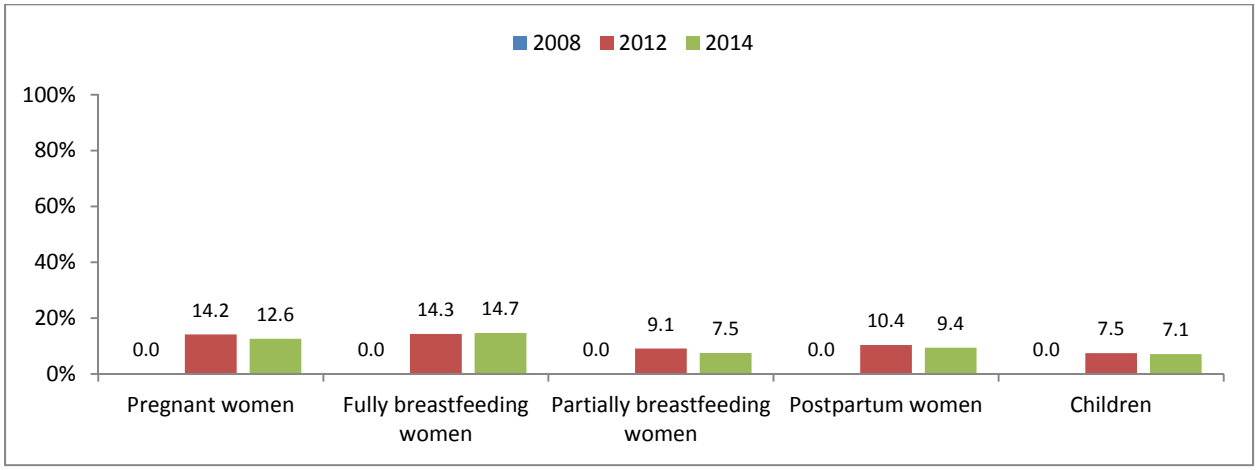
Dried Beans

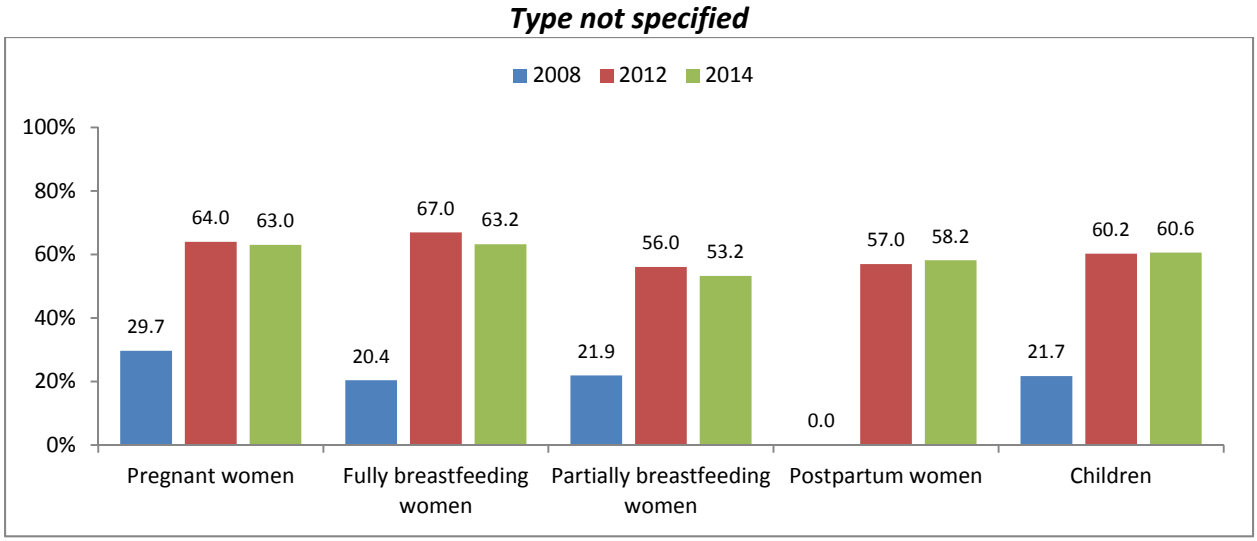


Peanut Butter



Canned Beans

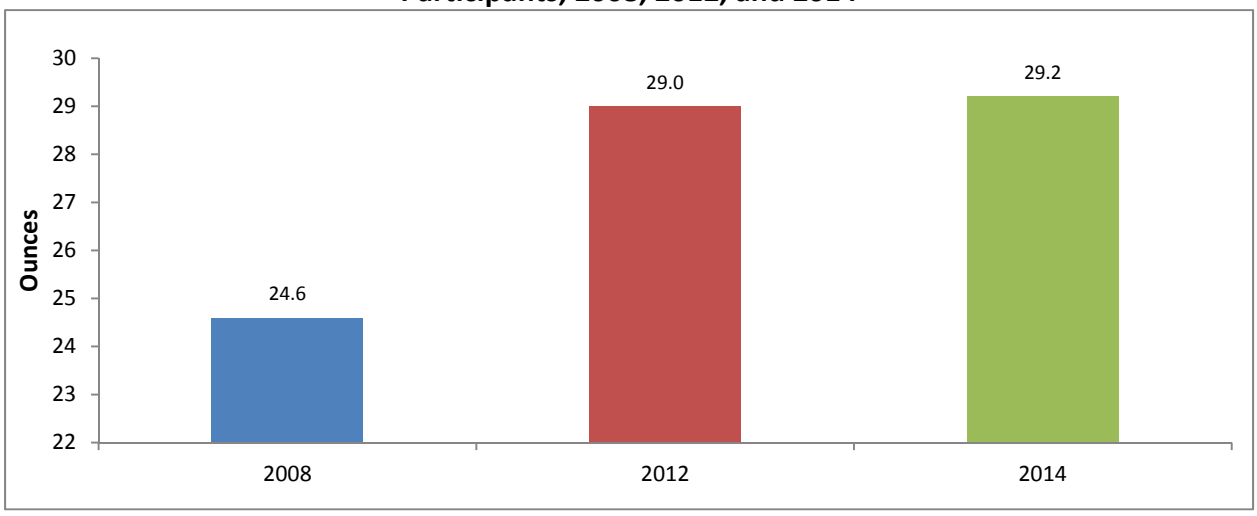




F. CANNED FISH

Among exclusively breastfeeding women, the mean amount of canned fish prescribed increased by 18 percent, from 24.6 to 29.0 ounces (figure III.10) between 2008 and 2012. This reflects increases in both the maximum allowance from 26 to 30 ounces under the Interim Rule and in the proportion of women prescribed the full MMA. The mean amount of canned fish prescribed remained approximately the same from 2012 to 2014.

Figure III.10
Mean Amount of Canned Fish Prescribed in Ounces for Fully Breastfeeding Women WIC Participants, 2008, 2012, and 2014



Source: Memo of December 10, 2010, exhibit FP8 (Appendix B); table II.10, WIC PC 2012: Food Package Report; table II.10 above

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APPENDIX A: OVERVIEW OF WIC FOOD PACKAGES
APRIL 2014

APPENDIX A: OVERVIEW OF WIC FOOD PACKAGES APRIL 2014

Table A.1
Snapshot of the WIC Food Packages[1]: Maximum Monthly Allowances of Supplemental Foods for Children and Women

Foods	Children	Women		
	Food Package IV: 1 through 4 years	Food Package V: Pregnant and Partially Breastfeeding (up to 1 year postpartum)	Food Package VI: Postpartum (up to 6 months postpartum)	Food Package VII: Fully Breastfeeding (up to 1 year postpartum)
Juice, single strength	128 fl oz	144 fl oz	96 fl oz	144 fl oz
Milk[2]	16 qt	22 qt	16 qt	24 qt
Breakfast cereal[3]	36 oz	36 oz	36 oz	36 oz
Cheese				1 lb
Eggs	1 dozen	1 dozen	1 dozen	2 dozen
Fruits and vegetables	$6 in cash value vouchers	$10 in cash value vouchers	$10 in cash value vouchers	$10 in cash value vouchers
Whole-wheat bread[4]	2 lb	1 lb		1 lb
Fish (canned)[5]				30 oz
Legumes, dry or canned, and/or peanut butter	1 lb (64 oz, canned) or 18 oz	1 lb (64 oz, canned) and 18 oz	1 lb (64 oz, canned) or 18 oz	1 lb (64 ounce, canned) and 18 oz

Source: http://www.fns.usda.gov/sites/default/files/Snapshot-WIC-Children-WomenFoodPkgs.pdf

[1] Refer to the regulatory requirements in 7 CFR Ch. II (1–1–14 Edition) for the complete provisions and requirements for WIC foods.

[2] Allowable options for milk alternatives are cheese, soy beverage, and tofu.

[3] At least one-half of the total number of breakfast cereals on State agency food list must be whole grain.

[4] Allowable options for whole-wheat bread are whole-grain bread, brown rice, bulgur, oatmeal, whole-grain barley, soft-corn or whole-wheat tortillas.

[5] Allowable options for canned fish are light tuna, salmon, sardines, and mackerel.

Table A.2
Snapshot of the WIC Food Packages[1]: Maximum Monthly Allowances of Supplemental Foods for Infants in Food Packages I, II, and III

	Fully Formula Fed		Partially Breastfed		Fully Breastfed	
Foods	Food Packages I and III A: 0–3 months B: 4–5 months	Food Packages II and III 6–11 months	Food Packages I and III A: 0 to 1 month B: 1–3 months C: 4–5 months	Food Packages II and III 6–11 months	Food Package I 0–5 months	Food Package II 6–11 months
WIC Formula[2]	A: 806 fl oz reconstituted liquid concentrate or 832 fl. oz. RTF or 870 fl oz reconstituted powder B: 884 fl oz reconstituted liquid concentrate or 896 fl. oz. RTF or 960 fl oz reconstituted powder.	624 fl. oz. reconstituted liquid concentrate or 640 fl. oz. RTF or 696 fl oz reconstituted powder.	A: 104 fl oz reconstituted powder. B: 364 fl oz reconstituted liquid concentrate or 384 fl oz RTF or 435 fl oz reconstituted powder. C: 442 fl. oz. reconstituted liquid concentrate or 448 fl. oz. RTF or 522 fl oz reconstituted powder.	312 fl. oz. reconstituted liquid concentrate or 320 fl. oz. RTF or 384 fl oz reconstituted powder.		
Infant Cereal		24 oz		24 oz		24 oz
Baby Food Fruits and Vegetables		128 oz		128 oz		256 oz
Baby Food Meat						77.5 oz

Source: http://www.fns.usda.gov/sites/default/files/Snapshot-WIC-InfantFoodPkgs.pdf

[1] Refer to the regulatory requirements in 7 CFR Ch. II (1–1–14) for the complete provisions and requirements for infant formula and infant foods in the WIC food packages

[2] The full nutritional benefit (FNB) is equal to the maximum monthly allowance of reconstituted fluid ounces of liquid concentrate.

APPENDIX B: FOOD PACKAGE TABLES: PC2008

APPENDIX B: FOOD PACKAGE TABLES: PC2008

memorandum

To Fred Lesnett

From Patty Connor

Subject PC2008 Food Package Tabulations

Abt Associates Inc.

Enclosed are the tables presenting the PC2008 food package analysis. The tables follow a similar format as the tables prepared for prior years. The analysis covers the 50 States, including Puerto Rico and Washington DC. There are two exclusions: Wyoming was unable to provide sufficient data and is not included in the analysis; and a large proportion of infants in Puerto Rico reportedly received packages containing milk and thus we excluded all infants. As with the previous food package analyses, we coded all food packages received by 95 percent of the participants within each certification category. In addition, all special formula packages were coded.

When looking at the tables, please keep in mind that the certification category is the one under which the participant was certified (at the beginning of the most recent certification period) and the food package reflects the prescription issued in April 2008. Some State agencies report that they reclassify participants without recertifying them. This implies that, in some cases, the prescription and certification category may not be consistent. This should only affect a small percentage of cases, and should not present any problems for national-level analyses. In addition, some State agencies report that they begin to give child food packages to infants at the age of eleven months.

Please feel free to call me with any questions you may have as you review the information.

Exhibit FP1
Quantity and Types of Formula Prescribed for WIC Infants and Children

	Age of Infant					Children receiving formula[b]
	0–3 months	4–6 months	7 months and older	Age not reported	Total infants[a]	
Quantity						
Federal maximum (oz)[c]	806	806	806	806	806	806
Mean (oz), all[c]	699.6	736.1	746.9	715.1	727.5	809.7
Mean (oz), receiving formula[c]	754.2	790.1	796.8	798.1	780.2	809.7
Percent receiving Federal maximum	74.5%	81.5%	82.6%	79.2%	79.5%	76.2%
Percent receiving 95–99 percent of Federal maximum	0.8%	0.8%	0.9%	0.8%	0.9%	12.6%
Percent receiving 75–94 percent of Federal maximum	3.4%	2.7%	3.2%	1.6%	3.1%	4.1%
Percent receiving 50–74 percent of Federal maximum	4.4%	2.3%	2.0%	0.0%	2.9%	4.7%
Percent receiving less than 50 percent of Federal maximum	9.5%	5.8%	5.0%	8.0%	6.8%	2.4%
Percent receiving none	7.2%	6.8%	6.3%	10.4%	6.8%	0.0%
Form Allowable[d]						
Concentrate	26.0%	25.6%	24.7%	14.3%	25.4%	15.9%
Powdered	87.6%	87.7%	88.0%	86.6%	87.8%	54.1%
Ready-to-feed	14.4%	14.1%	13.4%	0.9%	13.9%	33.7%
Type Allowable[d]						
With iron	100.0%	100.0%	99.8%	100.0%	99.9%	99.8%
Low iron	2.2%	2.1%	2.0%	0.9%	2.1%	0.1%
Milk based	88.2%	85.9%	86.4%	81.3%	86.9%	69.2%
Soy based	24.5%	26.2%	25.6%	16.1%	25.4%	13.9%
Lactose-free	14.8%	16.4%	15.4%	14.3%	15.5%	53.4%
Hydrolysate	6.0%	6.4%	5.7%	5.4%	6.0%	15.6%
Metabolic	3.5%	3.3%	3.1%	1.8%	3.3%	0.7%
Special	6.1%	5.9%	5.3%	2.7%	5.7%	11.0%
Hydrolysate or Special	9.6%	9.9%	8.8%	7.2%	9.4%	25.3%
Formula Type						
Nonexempt	80.2%	80.1%	81.7%	93.8%	80.8%	51.4%
Exempt	5.4%	5.7%	4.9%	5.4%	5.3%	14.2%
Medical food	0.4%	0.4%	0.4%	0.0%	0.4%	34.3%
Not specified	14.1%	13.7%	13.1%	0.9%	13.6%	0.1%
N	752,696	567,127	835,396	125	2,155,343	63,848

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants).

[a]Excludes infants receiving milk packages

[b]1.4 percent of participants classified as children received food packages containing formula

[c]Ready-to-feed formula. Concentrate and powdered formula converted to ready-to-feed equivalent based on reconstitution rates

[d]Responses are not mutually exclusive, so percentages may add to more than 100 percent

Exhibit FP1a
Quantity and Types of Formula Prescribed for WIC Infants

	All Infants
Quantity	
Federal maximum (oz)[a]	806
Mean (oz), all[a]	716.7
Mean (oz), receiving formula[a]	780.2
Percent receiving Federal maximum	78.3%
Percent receiving 95–99 percent of Federal maximum	0.8%
Percent receiving 75–94 percent of Federal maximum	3.1%
Percent receiving 50–74 percent of Federal maximum	2.9%
Percent receiving less than 50 percent of Federal maximum	6.7%
Percent receiving none	8.1%
N	2,187,916

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants)

[a]Ready-to-feed formula. Concentrate and powdered formula converted to ready-to-feed equivalent based on reconstitution rates

Exhibit FP2
Quantity and Types of Milk Products Prescribed for WIC Participants by Participant Category

Participant Category	Quantity							
	Federal Maximum (qt)[a]	Mean (qt)[a]	Percent Receiving Federal Maximum	Percent Receiving 75–99 Percent of Federal Maximum	Percent Receiving 50–74 Percent of Federal Maximum	Percent Receiving Less Than 50 Percent of Federal Maximum	Percent Receiving None	N
Pregnant women	28	21.0	2.2%	61.0%	34.8%	1.7%	0.3%	966,628
Non-exclusively breastfeeding women	28	20.6	1.5	57.3	38.7	2.1	0.4	458,734
Exclusively breastfeeding women	28	22.2	9.9	71.4	17.5	0.8	0.4	154,245
Postpartum women	24	17.1	2.9	55.6	39.1	2.0	0.4	671,020
Children	24	16.4	2.0	42.1	54.4	1.3	0.1	4,413,981
Infants[c]	24	15.5	0.8	29.6	66.9	2.7	0.0	32,454

Participant Category	Form Allowable[b]			Type Allowable[b]								
	Fluid	Dry	Evaporated	Whole	Reduced fat (2%)	Low fat (1 or 1½%)	Nonfat (0.5% or less)	Acidophilus	Lactose Reduced	UHT	Buttermilk	Kosher
Pregnant women	99.6%	20.6%	28.8%	81.7%	90.8%	94.4%	94.8%	14.8%	7.0%	1.7%	14.0%	2.8%
Non-exclusively breastfeeding women	99.0	22.6	29.7	80.4	86.8	95.9	96.3	12.3	4.7	1.1	16.3	3.4
Exclusively breastfeeding women	99.9	31.9	35.8	81.9	93.5	97.1	96.8	15.5	9.7	0.5	10.1	5.7
Breastfeeding women	99.8	19.5	26.3	79.7	91.9	95.5	94.8	14.5	5.0	1.6	13.4	1.7
Children	99.0	23.1	27.6	87.9	82.4	85.3	86.0	12.8	6.7	1.8	11.3	2.6
Infants[c]	99.9	12.4	12.9	99.3	75.3	75.1	75.1	11.3	8.6	0.1	6.7	1.0

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants)

[a] Fluid milk. Evaporated or dry milk converted to fluid equivalent

[b] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

[c] These participants were classified as infants at their most recent certification. Many State agencies reported providing food packages containing milk to infants who were 11 months or older in April 2008. They represent 1.5 percent of all those certified as infants.

Exhibit FP3
Quantity of Cheese Prescribed for WIC Participants by Participant Category

	Quantity								
	Federal Maximum (lb)[a]	Mean All (lb)	Mean Receiving Cheese (lb)	Percent Receiving Federal Maximum	Percent Receiving 75–99 Percent of Federal Maximum	Percent Receiving 50–74 Percent of Federal Maximum	Percent Receiving Less Than 50 Percent of Federal Maximum	Percent Receiving None	N
Pregnant women	4	1.8	1.8	1.4%	3.3%	67.7%	24.2%	3.3%	966,628
Non-exclusively breastfeeding women	4	1.7	1.8	0.9	1.7	69.4	24.4	3.6	458,734
Exclusively breastfeeding women	5	2.6	2.6	1.0	2.3	64.2	32.1	0.5	154,245
Postpartum women	4	1.6	1.6	0.4	0.7	58.4	35.4	5.1	671,020
Children	4	1.5	1.6	0.3	0.3	56.0	37.1	6.3	4,477,829
Infants[b]	4	1.5	1.5	0.1	0.2	44.6	49.6	1.6	32,454

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants)

[a] Additional cheese may be issued on an individual basis.

[b] These participants were classified as infants at their most recent certification. Many State agencies reported providing food packages containing milk to infants who were 11 months or older in April 2008. They represent 1.5 percent of all those certified as infants.

Exhibit FP4
Quantity of Juice Prescribed for WIC Participants by Participant Category

	Quantity								
	Federal Maximum (oz)[a]	Mean All (oz)[a]	Mean Receiving Juice (oz)[a]	Percent Receiving Federal Maximum	Percent Receiving 75–99 Percent of Federal Maximum	Percent Receiving 50–74 Percent of Federal Maximum	Percent Receiving Less Than 50 Percent of Federal Maximum	Percent Receiving None	N
Pregnant women	276	258.1	258.6	79.4%	8.2%	11.2%	1.0%	0.2%	966,628
Non-exclusively breastfeeding women	276	245.3	246.2	72.6	2.4	22.8	1.7	0.4	458,734
Exclusively breastfeeding women	322	310.6	310.7	88.3	4.5	2.8	4.5	0.0	154,245
Postpartum women	184	180.5	181.1	86.2	11.0	2.0	0.6	0.3	671,020
Infants aged 4–12 months	92	70.5	90.9	49.4	0.4	19.3	1.7	29.1	1,435,022
Children	276	190.1	190.5	20.3	3.7	73.0	2.8	0.2	4,477,829

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants).

[a] Single-strength juice. Concentrated juice converted to single-strength equivalent. Federal maximum for concentrated juice is slightly higher: pregnant and non-exclusively breastfeeding (288 oz.), exclusively breastfeeding (366 oz.), postpartum (192 oz.), infants (96 oz.); children (288 oz.)

Exhibit FP5
Quantity of Cereal Prescribed for WIC Participants by Participant Category[a]

	Quantity								
	Federal Maximum (oz)	Mean All (oz)	Mean Receiving Cereal (oz)	Percent Receiving Federal Maximum	Percent Receiving 75–99 Percent of Federal Maximum	Percent Receiving 50–74 Percent of Federal Maximum	Percent Receiving Less Than 50 Percent of Federal Maximum	Percent Receiving None	N
Pregnant women	36	35.1	35.3	93.8%	1.1%	4.6%	0.0%	0.5%	966,628
Non-exclusively breastfeeding women	36	35.2	35.4	93.5	2.3	3.7	0.0	0.6	458,734
Exclusively breastfeeding women	36	35.7	35.9	98.5	0.4	0.6	0.0	0.4	154,245
Postpartum women	36	34.7	34.9	87.9	5.7	5.8	0.0	0.6	671,020
Infants aged 4–12 months	24	18.8	21.3	57.1	0.0	27.0	2.2	13.7	1,435,022
Children	36	34.7	34.9	88.5	6.0	4.4	0.5	0.5	4,477,829

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants).

[a] Infants receive infant cereal. All others receive adult cereal.

Exhibit FP6
Quantity of Eggs Prescribed for WIC Participants by Participant Category

	Quantity								
	Federal Maximum (dozen)[a]	Mean All (dozen)[a]	Mean Receiving Eggs (dozen)[a]	Percent Receiving Federal Maximum	Percent Receiving 75–99 Percent of Federal Maximum	Percent Receiving 50–74 Percent of Federal Maximum	Percent Receiving Less Than 50 Percent of Federal Maximum[b]	Percent Receiving None	N
Pregnant women	2.5	2.0	2.0	6.1%	89.7%	0.1%	3.7%	0.3%	966,628
Non-exclusively breastfeeding women	2.5	2.0	2.0	10.4	82.9	0.4	5.9	0.4	458,734
Exclusively breastfeeding women	2.5	2.0	2.0	5.1	93.1	0.2	1.3	0.3	154,245
Postpartum women	2.5	1.8	1.9	2.3	78.8	2.1	11.5	5.3	671,020
Children	2.5	1.9	1.9	2.7	84.4	0.2	11.1	1.7	4,477,829

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants).

[a] Fresh eggs. Dried egg mix converted to fresh equivalent

Exhibit FP7
Quantity and Type of Legumes Prescribed for WIC Participants by Participant Category

	Type Allowable[a]		Quantity								
	Peanut Butter	Dry Beans/ Peas	Federal Maximum (oz)[b]	Mean All (oz)[b]	Mean Receiving (oz)[b]	Percent Receiving Federal Maximum	Percent Receiving 75–99 Percent of Federal Maximum	Percent Receiving 50–74 Percent of Federal Maximum	Percent Receiving Less Than 50 Percent of Federal Maximum	Percent Receiving None	N
Pregnant women	58.7	70.4	16/18	16.8	17.1	98.0%	0.0%	0.4%	0.0%	1.7%	966,628
Non-exclusively breastfeeding women	43.0	68.0	16/18	14.7	16.8	87.4	0.0	0.3	0.0	12.4	458,734
Exclusively breastfeeding women	63.7	97.1	32/34	32.5	32.6	96.6	0.2	2.9	0.0	0.3	154,245
Children	43.5	75.1	16/18	16.1	16.6	96.3	0.0	0.3	0.0	3.4	4,477,829

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants)

[a] Food package contains either peanut butter, beans, or both.

[b] Maximum for pregnant, non-exclusively breastfeeding women, and children is 16 ounces dry beans/peas or 18 ounces peanut butter. Maximum for exclusively breastfeeding women is 16 ounces dry beans/peas and 18 ounces peanut butter or 32 ounces dry beans/peas. If participant can choose either beans or peanut butter, quantity is coded as 17 ounces.

Exhibit FP7a
Quantity and Type of Legumes Prescribed for WIC Participants by Participant Category

	Certification Category			
	Pregnant Women	Non-Exclusively Breastfeeding women	Exclusively Breastfeeding Women	Children
Type Received[a]				
Peanut butter	29.0%	21.1%	43.4%	22.4%
Dry beans/peas	41.0%	46.0%	93.9%	53.4%
Indeterminant[b]	29.7%	21.9%	20.4%	21.7%
Quantity				
Federal maximum	16/18	16/18	32/34	16/18
Mean all (oz)[c]	16.8	14.7	32.5	16.1
Mean receiving (oz)[c]	17.1	16.8	32.6	16.6
Peanut butter	18.0	18.0	24.4	17.9
Beans	16.1	16.0	24.1	16.0
Indeterminant[b]	17.0	17.0	19.7	17.0
Percent receiving Federal maximum	98.0%	87.4%	96.6%	96.3%
Percent receiving 75–99 percent of Federal maximum	0.0%	0.0%	0.2%	0.0%
Percent receiving 50–74 percent of Federal maximum	0.4%	0.3%	2.9%	0.3%
Percent receiving less than 50 percent of Federal maximum	0.0%	0.0%	0.0%	0.0%
Percent receiving none	1.7%	12.4%	0.3%	3.4%
N	966,628	458,734	154,245	4,477,829

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants)

[a] Pregnant, non-exclusively breastfeeding women and children: does not add to 100 percent as some participants did not receive any peanut butter or beans

Exclusively breastfeeding women: counted in both peanut butter and beans if received both

[b] Food package contains either peanut butter or beans

[c] Maximum for pregnant, non-exclusively breastfeeding women, and children is 16 ounces dry beans/peas or 18 ounces peanut butter. Maximum for exclusively breastfeeding women is 16 ounces dry beans/peas and 18 ounces peanut butter or 32 ounces dry beans/peas. If participant can choose either beans or peanut butter, quantity is coded as 17 ounces

Exhibit FP8
Quantities of Carrots and Tuna Prescribed for Exclusively Breastfeeding Women

	Percent of Exclusively Breastfeeding Women
Carrots: Federal maximum of 2 pounds	
Percent receiving Federal maximum	97.6%
Percent receiving 75–99 percent of Federal maximum	0.0%
Percent receiving 50–74 percent of Federal maximum	2.3%
Percent receiving less than 50 percent of Federal maximum	0.0%
Percent receiving none	0.0%
Mean all (pounds)	2.0
Mean receiving carrots (pounds)	2.0
Tuna: Federal maximum of 26 ounces	
Percent receiving Federal maximum	33.6%
Percent receiving 75–99 percent of Federal maximum	64.9%
Percent receiving 50–74 percent of Federal maximum	0.2%
Percent receiving less than 50 percent of Federal maximum	0.4%
Percent receiving none	0.9%
Mean all (ounces)	24.6
Mean receiving tuna (ounces)	24.8
N	154,245

Source: PC2008 participant characteristics data. Analysis includes the 50 States (except Wyoming), Washington, DC, and Puerto Rico (except infants)

APPENDIX C: CONTENTS OF WIC FOOD PACKAGES IN 2014 BY FOOD PACKAGE TYPE

APPENDIX C: CONTENTS OF WIC FOOD PACKAGES IN 2014 BY FOOD PACKAGE TYPE

This appendix presents tabulations of the reported amounts, types, and forms of prescriptions for each of the components of WIC food packages by food package type.

Note: Food package type is a new variable first reported by State agencies for the 2010 WIC PC data collection. It is a constructed variable based on certification category, age (for infants and children), and breastfeeding status (for women and infants). It is still in the testing phase and at this time findings should be treated as suggestive rather than definitive.

As described in chapter II, the Interim Rule created 27 prescriptions that are assigned to participants based on infant age and breastfeeding status, child age, the pregnancy or breastfeeding status of the mother, and whether the participant has a qualifying medical condition, plus a null package used in some State agencies for fully breastfed infants up to age 6 months and partially breastfeeding women between 6 and 12 months postpartum. For this analysis, food package types were identified for between 93 and 99 percent of participants in each participant category with valid food package data (table C.1).[24] Virtually all the specific food packages assigned were appropriate for the participant category, with two minor exceptions. First, 2.0 percent of infants received child food packages III IV-A or IV-A. This is likely the result of some State agencies reclassifying infants as children without recertifying them, or giving child food packages to infants aged 11 months. Second, 1.6 percent of postpartum women received food packages V or VII, which are appropriate for mostly or fully breastfeeding women. All other anomalies affected 1 percent or fewer participants in a category.

As will be shown below, however, food prescriptions issued were not always consistent with food package types reported. State agencies do not all collect electronic data on the detailed FNS food package category when prescribing foods for a participant. Parameters for allowable foods and quantities may be programmed in a way that does not allow for clear reporting of the FNS food package type, or it may occur offline. In either case, the State agency must then create the FNS food package variable based on the participant's characteristics including age, certification category, and breastfeeding status, often in combination with information on whether the food package was medical or non-medical. Some State agencies have difficulty providing accurate snapshots of historical data. For these State agencies, certain PC data items become more difficult to report during the review, resubmission, and finalization of their datasets. Considering how quickly infant age in months and breastfeeding status can change, even within the reference month of April 2014, there was much opportunity for discrepancy between the characteristics used to create the FNS food package variable and the food package prescription reported for the same participant in April 2014. (Please see discussion in chapter I on age calculations.)

Non-medical packages account for 94 percent of all WIC food packages, so they are discussed first in each section of this appendix. (Medical packages appear first in the tables because of the numbering system for food packages.)

[24] Two State agencies (Louisiana and New Mexico) did not report food package type for their WIC participants. These two State agencies are excluded from the tabulations in this appendix.

Table C.1
Food Packages Assigned by Participant Category (2014)

Food Package Type[a]	Participant Category (%)					
	Pregnant Women	Fully Breastfeeding Women[b]	Partially Breastfeeding Women[c]	Postpartum Women	Infants	Children
Missing	6.4%	1.5%	7.4%	6.8%	3.4%	2.2%
Infants						
I-FF-A	N/A	N/A	N/A	N/A	17.0%	< 0.1%
I-FF-B	N/A	N/A	N/A	N/A	10.4%	< 0.1%
I-BF/FF-A	N/A	N/A	N/A	N/A	0.9%	< 0.1%
I-BF/FF-B	N/A	N/A	N/A	N/A	3.4%	< 0.1%
I-BF/FF-C	N/A	N/A	N/A	N/A	2.4%	< 0.1%
I-BF-A	N/A	N/A	N/A	N/A	3.3%	< 0.1%
I-BF-B	N/A	N/A	N/A	N/A	1.6%	< 0.1%
II-FF	N/A	N/A	N/A	N/A	35.2%	0.1%
II-BF/FF	N/A	N/A	N/A	N/A	5.4%	< 0.1%
II-BF	N/A	N/A	N/A	N/A	5.7%	< 0.1%
Medical						
Infants						
III I-FF-A	N/A	N/A	N/A	N/A	2.3%	< 0.1%
III I-FF-B	N/A	N/A	N/A	N/A	1.7%	< 0.1%
III I-BF/FF-A	N/A	N/A	N/A	N/A	0.1%	0.0%
III I-BF/FF-B	N/A	N/A	N/A	N/A	0.4%	0.0%
III I-BF/FF-C	N/A	N/A	N/A	N/A	0.4%	0.0%
III II-FF	N/A	N/A	N/A	N/A	4.2%	< 0.1%
III II-BF/FF	N/A	N/A	N/A	N/A	0.3%	< 0.1%
Children						
III IV-A	N/A	N/A	N/A	N/A	0.2%	0.5%
III IV-B	N/A	N/A	N/A	N/A	< 0.1%	0.9%
Women						
III V	0.1%	0.0%	< 0.1%	< 0.1%	N/A	N/A
III VI	< 0.1%	0.0%	< 0.1%	< 0.1%	N/A	N/A
III VII	< 0.1%	0.0%	< 0.1%	0.0%	N/A	N/A
Children						
IV-A	N/A	N/A	N/A	N/A	1.8%	28.7%
IV-B	N/A	N/A	N/A	N/A	< 0.1%	67.6%
Women						
V	91.3%	0.0%	35.4%	1.4%	N/A	N/A
VI	0.7%	0.0%	39.5%	91.5%	N/A	N/A
VII	1.5%	98.5%	0.0%	0.2%	N/A	N/A
N/A[d]	< 0.1%	0.0%	17.7%	< 0.1%	N/A	N/A
N	835,675	246,599	364,507	587,580	1,933,150	4,537,186

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Food package type descriptions

I-FF-A: Fully formula-fed (FF) infants aged 0–3.9 months
I-FF-B: FF infants aged 4–5.9 months
I-BF/FF-A: Partially breastfed (BF/FF) infants aged 0–0.9 months
I-BF/FF-B: BF/FF infants aged 1–3.9 months
I-BF/FF-C: BF/FF infants aged 4–5.9 months
I-BF-A: Fully breastfed (BF) infants aged 0–3.9 months
I-BF-B: BF infants aged 4–5.9 months
II-FF: FF infants aged 6–11.9 months
II-BF/FF: BF/FF infants aged 6–11.9 months
II-BF: BF infants aged 6–11.9 months
III I-FF-A: FF infants aged 0–3.9 months (medical)
III I-FF-B: FF infants aged 4–5.9 months (medical)
III I-BF/FF-A: Partially breastfed (BF/FF) infants aged 0–0.9 months (medical)
III I-BF/FF-B: BF/FF infants aged 1–3.9 months (medical)
III I-BF/FF-C: Partially breastfed infants aged 4–5.9 months (medical)
III II-FF: FF infants aged 6–11.9 months (medical)
III II-BF/FF: BF/FF infants aged 6–11.9 months (medical)
III IV-A: Children aged 1–1.9 years (medical)
III IV-B: Children aged 2–4.9 years (medical)
III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)
III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)
III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)
IV-A: Children aged 1–1.9 years
IV-B: Children aged 2–4.9 years
V: Women, pregnant, and partially (mostly) breastfeeding up to 1 year postpartum
VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum
VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples
N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

[b] *Fully breastfeeding women* category includes women fully breastfeeding up to 1 year postpartum and partially (mostly) breastfeeding multiples

[c] *Partially breastfeeding women* category includes partially (minimally) breastfeeding women up to 6 months postpartum, partially (mostly) breastfeeding women up to 1 year postpartum, and partially (minimally) breastfeeding women more than 6 months postpartum

[d] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

A. FORMULA FOR INFANTS RECEIVING NON-MEDICAL PACKAGES

The Interim Rule created 10 different non-medical food packages for infants, depending on age and breastfeeding status (fully breastfed, partially breastfed, or fully formula fed). The rule created 12 medical packages for infants, children, and women. All these packages, except for the two non-medical packages for fully breastfed infants, allowed participants to obtain formula (see table II.1).

As designed, the MMA of formula for infants who are issued non-medical prescriptions varies by detailed food package category (table C.2, first line). Fully-formula fed packages include more formula than partial breastfeeding package, and fully breastfed infants receive no formula. Generally, within each breastfeeding category, the amount of formula allowed is greatest for infants aged 4 to 5.9 months, and infants more than 6 months old are allowed the least. The maximum monthly allowances vary by formula form (powder, concentrate, or ready-to-feed), with powder receiving the most, followed by ready-to-feed, and then concentrate.

Among infants assigned a fully breastfed package (I-BF-A, I-BF-B, or II-BF), 87 to 100 percent received no formula. Among infants assigned a fully formula-fed package (I-FF-A, I-FF-B, or I-FF-C), 84 to 95 percent were prescribed approximately the MMA.

Prescriptions allowed for different forms of formula, with powder being the most frequently allowed, in 97 to 100 percent of all prescriptions. Concentrate and ready-to-feed formula were allowed in fewer prescriptions, ranging from approximately 0 to 42 percent by food package type.

Nearly all prescriptions allowed formula with iron, and at least 91 percent in each food package type allowed milk-based formula. Soy-based and lactose-free formulas were generally allowed in 31 to 43 percent of prescriptions; but among partially breastfed infants aged at least 4 months, 56 to 58 percent were allowed soy-based or lactose-free formulas. Approximately 10 percent of partially breastfed infants less than 1 month old were allowed soy-based or lactose-free formulas.

Within Food Packages I and II, more than 99 percent of partially or fully formula-fed infants received nonexempt formula. Almost none received medical food, allowed only in Food Package III.

Table C.2
Quantity and Types of Formula Prescribed for WIC Infants by Food Package Type (2014)

	I-FF-A	I-FF-B	I-BF/FF-A	I-BF/FF-B	I-BF/FF-C	I-BF-A	I-BF-B	II-FF	II-BF/FF	II-BF
FNB - MMA (oz)[a]	806–870	884–960	104	364–435	442–522	0	0	624–696	312–384	0
Quantity										
Mean (oz), all[b]	794.6	873.2	365.6	423.0	501.0	5.3	105.4	626.8	395.6	1.7
Mean (oz), receiving formula[b]	795.4	874.1	393.8	424.5	501.9	512.3	786.8	631.3	400.8	485.6
Percent Prescribed										
Quantity Issued (oz)										
At least 800 oz	83.8%	92.5%	22.3%	12.9%	13.9%	0.3%	10.6%	2.3%	0.6%	< 0.1%
At least 600 but less than 800 oz	12.5%	6.0%	6.6%	4.1%	1.9%	0.2%	0.1%	95.1%	14.4%	0.2%
At least 400 but less than 600 oz	1.9%	1.0%	11.6%	7.8%	72.3%	0.1%	2.0%	0.9%	2.5%	< 0.1%
At least 200 but less than 400 oz	1.4%	0.3%	12.7%	67.8%	9.0%	0.3%	0.3%	0.8%	78.9%	0.1%
Less than 200 oz	0.4%	0.1%	39.6%	7.0%	2.7%	0.2%	0.2%	0.2%	2.3%	< 0.1%
None	0.1%	0.1%	7.1%	0.4%	0.2%	99.0%	86.6%	0.7%	1.3%	99.6%
Form Allowable[c]										
Powdered	97.2%	97.6%	98.8%	99.2%	99.4%	98.9%	99.9%	97.8%	99.3%	98.2%
Concentrate	15.8%	13.2%	6.6%	22.1%	41.8%	0.9%	0.1%	10.6%	40.4%	1.8%
Ready-to-feed	13.1%	10.9%	5.5%	21.3%	41.2%	0.2%	0.0%	8.4%	39.7%	0.0%
Type Allowable[d]										
With iron	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.7%
Low iron	< 0.1%	< 0.1%	0.0%	< 0.1%	< 0.1%	0.0%	0.0%	< 0.1%	< 0.1%	0.0%
Milk based	93.8%	92.6%	96.3%	96.4%	96.6%	90.7%	95.3%	92.9%	96.8%	92.6%
Soy based	30.7%	31.5%	9.2%	41.8%	56.0%	5.2%	4.4%	32.9%	56.8%	5.1%
Hydrolysate	0.3%	0.4%	0.1%	0.2%	0.2%	2.1%	0.3%	0.4%	0.2%	1.5%
Special	1.5%	1.9%	1.6%	0.5%	0.4%	4.1%	5.6%	1.6%	0.2%	2.6%
Metabolic	< 0.1%	< 0.1%	0.0%	< 0.1%	< 0.1%	0.0%	0.0%	< 0.1%	< 0.1%	0.3%
Formula Type[e]										
Nonexempt	99.7%	99.7%	98.7%	99.8%	99.9%	94.4%	99.5%	99.8%	99.9%	96.4%
Exempt	0.3%	0.3%	1.3%	0.2%	0.1%	5.6%	0.5%	0.2%	0.1%	3.3%
Medical food	< 0.1%	< 0.1%	0.0%	< 0.1%	< 0.1%	0.0%	0.0%	< 0.1%	0.0%	< 0.1%
Not specified	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
N	329,922	201,549	17,130	66,458	47,047	63,841	30,252	683,489	104,371	110,713

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico.

[a] The full nutritional benefit (FNB) is the lower number in this range, and represents the minimum monthly amount each participant should receive (in the absence of individual tailoring). The higher end of the range is the maximum monthly allowance (MMA) for infant formula, and differs depending on the form of formula: powder, concentrate, or ready-to-feed. The range shown includes the three standards; powder formula has the highest standard and concentrate has the lowest.

[b] In ready-to-feed reconstituted ounces. Concentrate and powdered formula converted to ready-to-feed equivalent based on reconstitution rates.

[c] Responses are not mutually exclusive, so percentages may add to more than 100 percent

[d] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

A *hydrolysate* formula contains proteins that are partially broken down or hydrolyzed- partially hydrolyzed or extensively hydrolyzed formulas- in order to prevent allergic reactions. Formulas are identified as hydrolysate if they are exempt formula or WIC-eligible medical foods, and based on the manufacturer's description, along with any additional information in the WIC Formula Database (http://wicworks.nal.usda.gov/wic-formula).

A formula is identified as *special* if it contains characteristics not captured by the other categories, such as increased-calorie formulas, sucrose-free formulas, starch-thickened formulas, MCT-fat formulas, tube-fed formulas, PKU-diet formulas, and any other highly specialized formulas used to treat specific diseases. It does not include hydrolysate formulas.

[e] *Nonexempt* in this report means *infant formula* as described in WIC regulations. *Infant formula* means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107

Exempt infant formula means an infant formula that meets the requirements for an exempt infant formula under section 412(h) of the Federal

Food, Drug, and Cosmetic Act (21 U.S.C. 350a(h)) and the regulations at 21 CFR parts 106 and 107

An *exempt infant formula* is an infant formula intended for commercial or charitable distribution that is represented and labeled for use by infants who have inborn errors of metabolism or low birthweight or who otherwise have unusual medical or dietary problems (21 CFR 107.3)

WIC-eligible medical foods means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible medical foods must serve the purpose of a food, meal, or diet (may be nutritionally complete or incomplete), and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible medical foods include many but not all products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C.

360ee(b)(3))

Food package types for infants include—

I-FF-A: Fully formula fed (FF) infants aged 0–3.9 months
I-FF-B: FF infants aged 4–5.9 months
I-BF/FF-A: Partially breastfed (BF/FF) infants aged 0–0.9 months
I-BF/FF-B: BF/FF infants aged 1–3.9 months
I-BF/FF-C: BF/FF infants aged 4–5.9 months
I-BF-A: Fully breastfed (BF) infants aged 0–3.9 months
I-BF-B: BF infants aged 4–5.9 months
II-FF: FF infants aged 6–11.9 months
II BF/FF: BF/FF infants aged 6–11.9 months
II BF: BF infants aged 6–11.9 months

B. FORMULA FOR RECIPIENTS OF MEDICAL PACKAGES

Under Food Package III, all participants with certain documented medical conditions may receive WIC formula, defined in WIC regulations to include infant formula, exempt formula, and WIC-eligible medical foods.[25] Formula is prescribed for few women—only 1,371 women were prescribed medical packages, and of these about 63 percent included formula (table C.3). In contrast, approximately 86 percent of medical prescriptions for children included formula. The type of formula prescribed for both older children and women was predominantly WIC-eligible medical food. Most 1-year-olds who received medical packages with formula were prescribed exempt formula (23 percent) or WIC eligible medical food formula (55 percent). Exempt formula was also common for infants receiving medical packages, representing 25 to 60 percent of each infant food package category. A low-iron type was permitted for substantial proportions of women and children who received formula—approximately 9 percent for women receiving food package III-VII and children.

[25] *Infant formula* means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107

Exempt infant formula means an infant formula that meets the requirements for an exempt infant formula under section 412(h) of the Federal

Food, Drug, and Cosmetic Act (21 U.S.C. 350a(h)) and the regulations at 21 CFR parts 106 and 107

An *exempt infant formula* is an infant formula intended for commercial or charitable distribution that is represented and labeled for use by infants who have inborn errors of metabolism or low birthweight or who otherwise have unusual medical or dietary problems (21 CFR 107.3)

WIC-eligible medical foods means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible medical foods must serve the purpose of a food, meal, or diet (may be nutritionally complete or incomplete), and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible medical foods include many but not all products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C.

360ee(b)(3))

Table C.3
Quantity and Types of Formula Prescribed for Recipients of Medical Packages (2014)

	Infants							Children		Women		
	III I-FF-A	III I-FF-B	III I-BF/ FF-A	IIII I-BF/ FF-B	III I-BF/ FF-C	III II-FF	III II-BF/FF	III IV-A	III IV-B	III V	III VI	IIIVII
FNB - MMA (oz)[a]	806–870	884–960	104	364–435	442–522	624–696[b]	312–384[b]	910	910	910	910	910
Quantity												
Mean (oz), all[c]	793.8	877.9	310.3	442.6	503.9	636.8	406.7	606.2	554.0	421.9	262.9	239.3
Mean (oz), receiving formula[c]	797.7	882.9	320.6	442.8	504.1	655.3	423.9	701.4	647.5	579.4	636.5	633.8
Percent Prescribed Quantity Issued (oz)												
At least 800 oz	72.4%	89.7%	18.5%	13.9%	11.1%	6.3%	3.7%	42.2%	39.1%	18.4%	13.4%	10.5%
At least 600 but less than 800 oz	21.4%	6.3%	3.0%	3.7%	1.7%	82.6%	15.1%	23.1%	13.1%	13.9%	8.7%	12.3%
At least 400 but less than 600 oz	3.3%	2.8%	10.7%	20.2%	81.8%	4.7%	5.6%	10.9%	14.8%	22.8%	11.3%	7.6%
At least 200 but less than 400 oz	1.9%	0.5%	9.2%	57.7%	4.2%	3.3%	69.4%	6.9%	11.5%	12.5%	5.9%	4.0%
Less than 200 oz	0.5%	0.1%	55.4%	4.5%	1.2%	0.3%	2.2%	3.4%	7.1%	5.2%	2.0%	3.4%
None	0.5%	0.6%	3.2%	0.0%	<0.1%	2.8%	4.1%	13.6%	14.4%	27.2%	58.7%	62.2%
Form Allowable[d]												
Powdered	95.7%	96.5%	97.7%	98.1%	98.9%	96.2%	97.7%	59.4%	23.2%	2.0%	8.6%	4.6%
Concentrate	12.5%	20.4%	0.1%	24.3%	60.6%	1.5%	1.7%	12.2%	13.2%	1.5%	8.6%	1.5%
Ready-to-feed	13.7%	22.0%	2.4%	25.2%	61.3%	2.7%	2.6%	50.6%	88.7%	99.4%	100.0%	98.5%
Type Allowable[e]												
With iron	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%	99.8%	99.7%	99.7%	99.6%	100.0%	100.0%
Low iron	0.1%	0.1%	0.1%	0.2%	0.1%	0.3%	1.2%	8.9%	9.4%	1.9%	8.6%	1.5%
Milk based	64.3%	61.2%	82.5%	79.6%	85.5%	53.4%	70.9%	66.7%	86.3%	99.9%	100.0%	97.1%
Soy based	13.9%	22.3%	2.9%	27.3%	62.4%	4.3%	6.5%	17.4%	10.9%	1.5%	8.6%	1.5%
Hydrolysate	34.3%	37.1%	16.1%	20.8%	13.5%	43.2%	25.6%	32.1%	22.3%	1.5%	8.6%	1.5%
Special	30.0%	24.7%	30.6%	25.3%	13.3%	24.6%	24.5%	36.4%	39.7%	47.1%	50.5%	52.6%
Metabolic	1.0%	1.1%	0.1%	0.5%	0.4%	1.5%	1.8%	10.8%	10.5%	1.5%	8.6%	1.5%
Formula Type[f]												
Nonexempt	41.1%	44.0%	54.3%	55.6%	74.7%	40.1%	55.7%	21.8%	1.1%	0.1%	0.0%	1.5%
Exempt	58.9%	55.9%	45.5%	44.3%	25.2%	59.6%	43.9%	23.1%	6.0%	0.0%	0.0%	0.0%
Medical food	0.1%	0.1%	0.1%	<010%	0.1%	0.2%	0.4%	55.1%	92.9%	99.9%	100.0%	98.5%
Not specified	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
N	43,870	32,175	1,402	7,053	7,390	82,014	5,635	26,606	39,680	946	253	171

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] The full nutritional benefit (FNB) is the lower number in this range, and represents the minimum monthly amount each participant should receive (in the absence of individual tailoring). The higher end of the range is the maximum monthly allowance (MMA) for infant formula, and differs depending on the form of formula: powder, concentrate, or ready-to-feed. The range shown includes the three standards; powder formula has the highest standard and concentrate has the lowest.

[b] Federal standard allows larger amounts of formula for infants who do not receive foods

[c] Ready-to-feed formula. Concentrate and powdered formula converted to ready-to-feed equivalent based on reconstitution rates

[d] Responses are not mutually exclusive, so percentages may add to more than 100 percent

[e] Responses are not mutually exclusive, so percentages may add to more than 100 percent.

A *hydrolysate* formula contains proteins that are partially broken down or hydrolyzed- partially hydrolyzed or extensively hydrolyzed formulas- in order to prevent allergic reactions. Formulas are identified as hydrolysate if they are exempt formula or WIC-eligible medical foods, and based on the manufacturer's description, along with any additional information in the WIC Formula Database (http://wicworks.nal.usda.gov/wic-formula).

A formula is identified as *special* if it contains characteristics not captured by the other categories, such as increased-calorie formulas, sucrose-free formulas, starch-thickened formulas, MCT-fat formulas, tube-fed formulas, PKU-diet formulas, and any other highly specialized formulas used to treat specific diseases. It does not include hydrolysate formulas.

[f] *Nonexempt* in this report means *infant formula* as described in WIC regulations. *Infant formula* means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107

Exempt infant formula means an infant formula that meets the requirements for an exempt infant formula under section 412(h) of the Federal

Food, Drug, and Cosmetic Act (21 U.S.C. 350a(h)) and the regulations at 21 CFR parts 106 and 107

An *exempt infant formula* is an infant formula intended for commercial or charitable distribution that is represented and labeled for use by infants who have inborn errors of metabolism or low birthweight or who otherwise have unusual medical or dietary problems (21 CFR 107.3)

WIC-eligible medical foods means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible medical foods must serve the purpose of a food, meal, or diet (may be nutritionally complete or incomplete), and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible medical foods include many but not all products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C.

360ee(b)(3))

Food package types include—

III I-FF-A: FF infants aged 0–3.9 months (medical)

III I-FF-B: FF infants aged 4–5.9 months (medical)

III I-BF/FF-A: Partially breastfed (BF/FF) infants aged 0–0.9 months (medical)

III I-BF/FF-B: BF/FF infants aged 1–3.9 months (medical)

III I-BF/FF-C: Partially breastfed infants aged 4–5.9 months (medical)

III II-FF: FF infants aged 6–11.9 months (medical)

III II BF/FF: BF/FF infants aged 6–11.9 months (medical)

III IV-A: Children aged 1–1.9 years (medical)

III IV-B: Children aged 2–4.9 years (medical)

III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)

III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)

III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)

C. MILK PRODUCTS

Virtually all WIC women and children assigned the non-medical food packages IV through VII were prescribed milk (table C.4). Among 1-year olds, 1.3 percent did not receive milk.

Most women assigned medical packages also were prescribed milk (89 to 93 percent). Among children assigned medical packages, however, only 51 percent of 1-year-old children and 77 percent of children aged 2 and older were prescribed milk.

For all Food Package Types, the mean amount of milk prescribed to those receiving any milk was 1.5 to 3.5 quarts less than the MMA for fluid milk. Women assigned Food Packages III-VI, III-VII, and VII were prescribed at least the MMA more often, 29 to 41 percent of the time.

The restrictions on fat content stated in the Interim Rules appear to be generally applied for those receiving non-medical packages (figure C.1). Among 1-year-olds (Package IV-A), 96 percent of prescriptions allowed whole milk. Among older children and women (packages IV-B, V, VI, and VII), only 2 to 4 percent of prescriptions allowed whole milk.

WIC regulations allow women and older children receiving a medical package to receive whole milk with medical documentation. Two to five-year-old children receiving medical packages were prescribed whole milk 31 percent of the time, much more often than their non-medical counterparts (4.4 percent). This is also true for women, where those receiving medical packages are prescribed whole milk 16 to 21 percent of the time, and their non-medical counterparts only about 2 percent of the time.

Table C.4
Quantity and Types of Milk Products Prescribed by Food Package Type (2014)

	Medical					Children					
	Children		Women						Women		
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Quantity (qt)[b]											
MMA	16	16	22	16	24 – 36[c]	16	16	22	16	24 – 36[c]	0
Mean amount prescribed	6.9	10.5	16.5	13.0	19.5	13.3	13.4	18.9	13.6	21.3	3.2
Mean amount prescribed to those prescribed any	13.7	13.6	18.6	14.3	21.0	13.5	13.5	19.0	13.6	21.3	17.1
Percent Prescribed											
Quantity Issued (qt)											
24 or more	0.4%	0.8%	2.4%	2.4%	38.0%	0.2%	0.5%	0.8%	0.5%	29.3%	1.1%
At least 22 but less than 24	< 0.1%	0.1%	22.1%	2.8%	0.0%	< 0.1%	< 0.1%	11.8%	0.7%	0.6%	1.4%
At least 16 but less than 22	16.7%	23.3%	53.1%	35.9%	45.7%	20.6%	16.8%	83.2%	20.7%	67.2%	9.1%
Less than 16	33.2%	53.1%	11.2%	49.9%	9.4%	77.9%	82.5%	3.8%	77.8%	2.7%	6.9%
None	49.6%	22.7%	11.2%	9.0%	7.0%	1.3%	0.1%	0.4%	0.3%	0.2%	81.5%
Form Allowable[d]											
Fluid	99.8%	99.7%	99.8%	100.0%	100.0%	99.9%	99.7%	99.6%	99.6%	99.7%	98.6%
Evaporated	2.9%	4.4%	3.6%	6.1%	3.1%	20.4%	24.2%	21.1%	3.7%	25.7%	6.6%
Dry	6.5%	6.4%	1.8%	4.3%	3.8%	< 0.1%	21.6%	25.6%	18.5%	28.6%	16.5%
Type Allowable[d]											
Skim or nonfat (0.5% or less)	11.3%	64.6%	74.9%	77.1%	76.4%	9.0%	98.4%	98.7%	99.4%	98.8%	99.4%
Low fat	22.5%	70.6%	77.4%	81.0%	85.2%	10.4%	98.5%	98.6%	99.4%	99.6%	98.8%
Reduced fat (2%)	16.5%	57.8%	56.4%	55.4%	43.1%	8.8%	74.9%	74.8%	71.9%	75.5%	51.7%
Whole	82.7%	30.7%	21.1%	19.0%	16.0%	96.4%	4.4%	2.3%	2.1%	1.9%	< 0.1%
Buttermilk	9.2%	7.9%	10.1%	4.8%	8.8%	7.1%	18.0%	20.6%	21.0%	14.8%	2.6%
Acidophilus	10.5%	9.4%	10.6%	5.2%	8.2%	11.1%	12.0%	12.8%	13.1%	12.0%	19.6%
Lactose-free or reduced	7.8%	7.1%	7.5%	10.4%	11.9%	5.3%	5.5%	6.3%	5.4%	5.5%	8.9%
Flavored	1.8%	1.3%	0.8%	3.9%	2.5%	1.7%	2.5%	3.3%	2.9%	2.0%	7.6%
UHT	0.4%	0.3%	0.7%	3.5%	2.5%	1.5%	1.5%	1.5%	1.4%	0.7%	6.4%
Soy	10.0%	6.6%	3.5%	7.4%	15.7%	1.2%	1.0%	1.5%	1.4%	1.4%	6.9%
Kosher	0.1%	< 0.1%	0.0%	0.0%	0.0%	0.2%	0.2%	0.2%	< 0.1%	0.4%	< 0.1%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] Fluid milk. Evaporated or dry milk converted to fluid equivalent. MMA is for fluid milk. The MMA can be met by combining fluid, dry, and evaporated milk, as well as substituting cheese or tofu for part of the fluid milk allowance. Cheese and tofu are not included in this table.

[c] Women fully breastfeeding multiples are allowed 36 quarts; other women receiving Food Package VII are allowed 24 quarts

[d] Responses are not mutually exclusive, so percentages may add to more than 100 percent

Food packages types include—

III IV-A: Children aged 1–1.9 years (medical)

III IV-B: Children aged 2–4.9 years (medical)

III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)

III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)

III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)

IV-A: Children aged 1–1.9 years

IV-B: Children aged 2–4.9 years

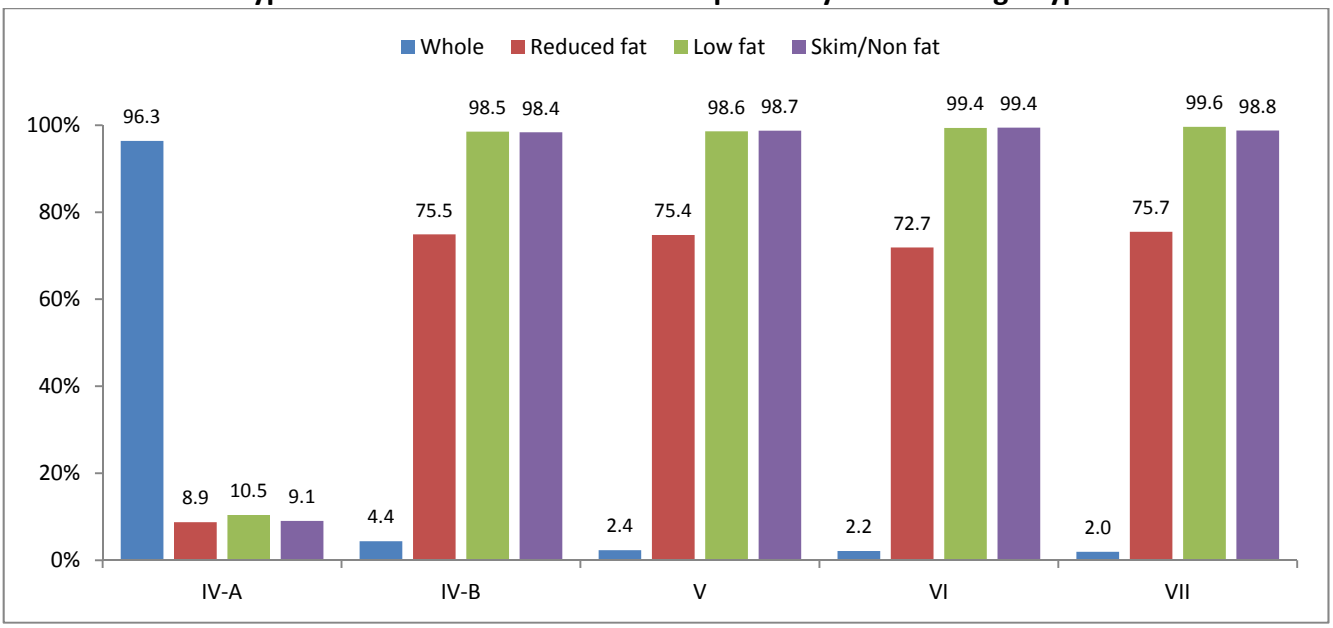
V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum

VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum

VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples

N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

Figure C.1
Types of Milk Allowable to WIC Recipients by Food Package Type



Results for cheese and tofu prescribed for women and children receiving (nonmedical) food packages IV-VII are similar to those described in chapter II by certification category. Between 16 and 26 percent of recipients of packages IV-A, IV-B, V, and VI were prescribed no cheese (tables C.5 and C.6).

Among participants receiving medical packages, 42 to 63 percent of participants received no cheese, with one exception. Only 12 percent of women with Food Package III-VII did not receive cheese. Very few participants who received medical packages substituted tofu for milk.

Table C.5
Quantity of Cheese Prescribed by Food Package Type (2014)

	Medical					Children					Women
	Children			Women							
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Quantity (lb)											
MMA	N/A	N/A	N/A	N/A	1-1.5[b]	N/A	N/A	N/A	N/A	1-1.5[b]	0
Maximum substitution allowance[c]	1	1	1	1	2	1	1	1	1	2	0
Mean amount prescribed	0.4	0.5	0.6	0.5	1.5	0.7	0.8	0.8	0.8	1.7	0.2
Mean amount prescribed to those prescribed any	1.0	1.0	1.1	1.0	1.7	1.0	1.0	1.0	1.0	1.8	1.1
Percent Prescribed											
Quantity Issued (lb)											
3 or more	0.1%	0.2%	1.1%	0.4%	8.8%	0.0%	0.0%	0.1%	0.1%	8.1%	0.0%
At least 2 but less than 3	0.3%	0.6%	4.4%	1.2%	40.4%	0.3%	0.6%	0.5%	0.5%	58.9%	1.2%
At least 1 but less than 2	35.1%	51.5%	51.5%	47.1%	39.2%	72.8%	80.5%	82.7%	77.5%	31.7%	13.9%
Less than 1	1.2%	1.7%	1.5%	1.6%	0.0%	1.2%	1.1%	1.1%	1.6%	0.2%	0.0%
None	63.3%	46.0%	41.5%	49.7%	11.7%	25.7%	17.8%	15.5%	20.3%	1.1%	84.9%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] Women fully breastfeeding multiples are allowed 1.5 pounds; other women receiving Food Package VII are allowed 1 pounds

[c] With medical documentation, additional cheese may be issued on an individual basis

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)

III IV-B: Children aged 2–4.9 years (medical)

III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)

III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)

III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)

IV-A: Children aged 1–1.9 years

IV-B: Children aged 2–4.9 years

V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum

VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum

VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples

N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

Table C.6
Quantity of Tofu Prescribed by Food Package Type (2014)

	Medical					Children		Women			
	Children		Women								
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Quantity (lb)											
MMA	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Maximum Substitution Allowance[b]	0	0	4	4	6	0	0	4	4	6	0
Mean amount prescribed	<0.1	<0.1	0.1	0.0	0.2	<0.1	<0.1	<0.1	<0.1	<0.1	<0.1
Mean amount prescribed to those prescribed any	2.3	3.2	4.4	N/A	3.4	2.8	2.9	1.2	0.5	1.0	2.8
Percent Prescribed											
Quantity Issued (lb)											
4 or more	0.1%	0.1%	0.6%	0.0%	4.1%	<0.1%	<0.1%	0.1%	0.1%	0.2%	<0.1%
Less than 4	0.2%	0.2%	0.7%	0.0%	2.9%	<0.1%	<0.1%	2.4%	2.2%	1.9%	0.1%
None	99.7%	99.6%	98.6%	100.0%	93.0%	100.0%	100.0%	97.5%	97.8%	97.9%	99.9%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] Tofu can be substituted for milk without medical documentation at the rate of 1 pound of tofu for 1 quart of milk up to the maximum substitution allowance shown. With medical documentation, women may substitute additional tofu up to the maximum allowance of fluid milk (see table C.4 for fluid milk MMA). For children, tofu may be substituted with appropriate medical documentation up to a maximum of 16 pounds

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)

III IV-B: Children aged 2–4.9 years (medical)

III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)

III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)

III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)

IV-A: Children aged 1–1.9 years

IV-B: Children aged 2–4.9 years

V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum

VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum

VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples

N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

D. JUICE

Within nearly all food package types, the mean amount of juice prescribed to those prescribed any was a few ounces less than the MMA (table C.7) and substantial proportions of participants were issued less than the MMA (figure C.2).

Table C.7
Quantity of Juice Prescribed by Food Package Type (2014)

	Medical					Children		Women			
	Children				Women						
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Quantity (oz)[b]											
MMA	128	128	144	96	144–216[c]	128	128	144	96	144–216[c]	0
Mean amount prescribed	94.1	115.8	128.5	85.3	160.3	121.2	124.8	139.3	89.8	140.4	25.2
Mean amount prescribed to those prescribed any	123.9	125.1	142.1	93.8	163.2	122.9	125.2	140.9	92.6	140.8	141.9
Percent Prescribed											
Quantity Issued (oz)											
144 or more	1.5%	2.0%	67.3%	5.5%	72.5%	2.0%	2.5%	69.6%	4.1%	62.1%	9.5%
At least 128 but less than 144	63.6%	79.1%	16.3%	3.2%	16.9%	68.4%	69.6%	25.4%	0.4%	34.0%	0.6%
At least 96 but less than 128	6.5%	8.3%	3.5%	61.3%	4.1%	22.8%	25.6%	2.1%	68.4%	2.8%	6.6%
Less than 96	4.3%	3.2%	3.3%	20.9%	4.7%	5.4%	2.1%	1.8%	24.1%	0.9%	1.1%
None	24.1%	7.4%	9.6%	9.1%	1.8%	1.3%	0.3%	1.1%	3.0%	0.3%	82.2%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits.

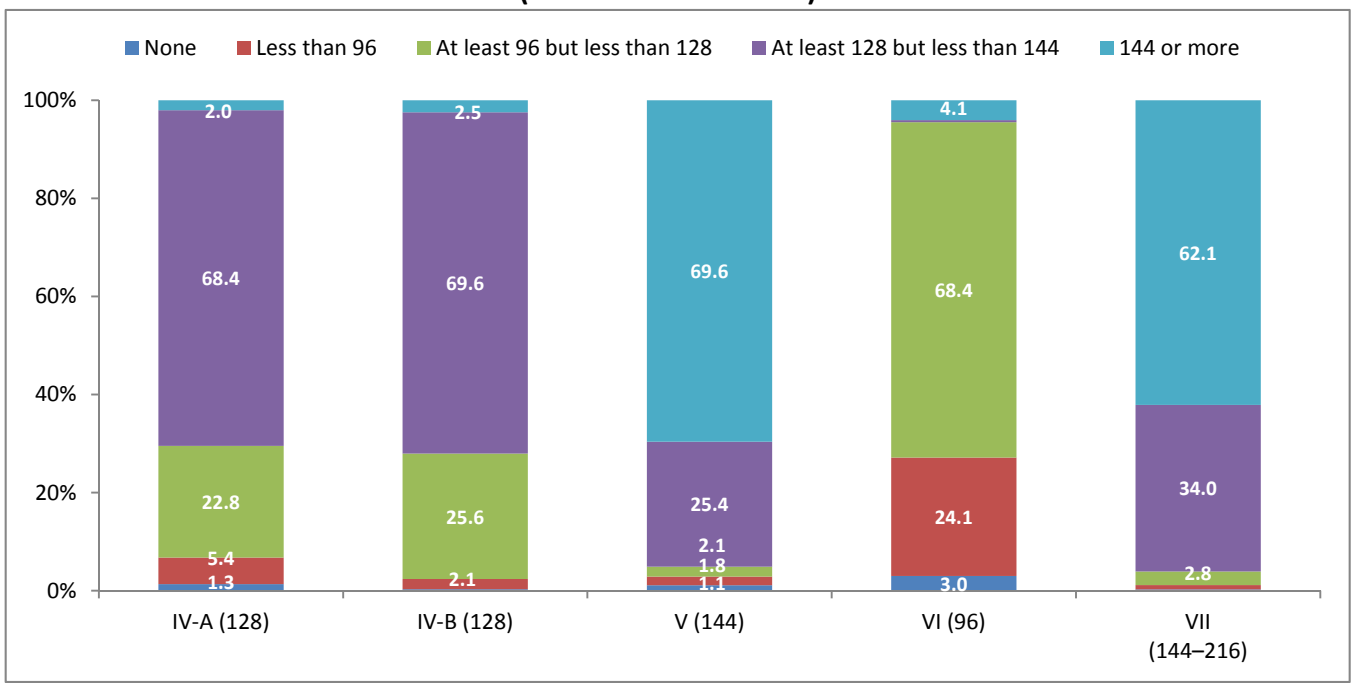
[b] Single-strength juice. Concentrated juice converted to single-strength equivalent

[c] Women fully breastfeeding multiples are allowed 216 ounces; other women receiving Food Package VII are allowed 144 ounces

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)
III IV-B: Children aged 2–4.9 years (medical)
III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)
III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)
III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)
IV-A: Children aged 1–1.9 years
IV-B: Children aged 2–4.9 years
V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum
VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum
VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples
N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

Figure C.2
Quantities of Juice Prescribed By Non-medical Food Package Type
(MMA in Parentheses)



Values less than 1 percent are not shown.

E. CEREAL

Nearly all women and child participants with nonmedical packages were prescribed at least the MMA of cereal (97 to 99 percent by food package type; table C.8). Some infants with non-medical packages were prescribed somewhat lesser amounts or no cereal. Among older infants and children who were assigned medical packages, 7 to 14 percent were prescribed no cereal.

Table C.8
Quantity of Cereal Prescribed by Food Package Type (2014)

	Infants[a]			Medical							Children		Women			
				Infants		Children		Women								
	II-FF	II-BF/ FF	II-BF	III II-FF	III II-BF /FF	III IV-A	III IV-B	III V	III VI	IIIVII	IV-A	IV-B	V	VI	VII	N/A[b]
Quantity (oz)																
MMA	24	24	24	24	24	36	36	36	36	36–54[c]	36	36	36	36	36–54[c]	0
Mean amount prescribed	22.3	22.3	22.9	21.1	20.4	30.4	33.5	32.6	33.5	34.9	35.5	36.0	35.7	35.7	35.1	6.7
Mean amount prescribed to those prescribed any	23.7	23.9	23.9	23.8	23.8	34.0	36.1	36.2	36.1	36.2	35.9	36.1	36.0	36.0	36.0	36.0
Percent Prescribed																
Quantity Issued (oz)																
36 or more	0.4%	0.6%	0.4%	0.4%	0.4%	73.2%	91.4%	88.4%	89.7%	94.7%	97.1%	98.7%	97.9%	97.8%	96.5%	18.5%
At least 24 but less than 36	89.7%	90.4%	93.6%	85.2%	82.7%	15.1%	0.7%	1.0%	1.2%	1.8%	1.1%	0.3%	0.2%	0.2%	0.4%	0.0%
Less than 24	4.1%	2.7%	1.7%	3.1%	2.8%	1.2%	0.7%	0.7%	2.0%	0.0%	0.7%	0.6%	1.0%	1.0%	0.5%	0.0%
None	5.7%	6.3%	4.2%	11.3%	14.1%	10.5%	7.3%	9.9%	7.1%	3.5%	1.1%	0.5%	0.9%	0.9%	2.5%	81.5%
N	683,489	104,371	110,713	82,014	5,635	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Infants receive infant cereal. All others receive adult cereal

[b] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[c] Women fully breastfeeding multiples are allowed 54 ounces; other women receiving Food Package VII are allowed 36 ounces

Food package types include—

II FF: FF infants aged 6–11.9 months

II BF/FF: BF/FF infants aged 6–11.9 months

II BF: BF infants aged 6–11.9 months

III II-FF: FF infants aged 6–11.9 months (medical)

III II BF/FF: BF/FF infants aged 6–11.9 months (medical)

III IV-A: Children aged 1–1.9 years (medical)

III IV-B: Children aged 2–4.9 years (medical)

III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)

III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)

III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)

IV-A: Children aged 1–1.9 years

IV-B: Children aged 2–4.9 years

V: Women, pregnant, and partially (mostly) breastfeeding up to 1 year postpartum

VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum

VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples

N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

F. EGGS

Nearly all women, and nearly all child participants with nonmedical packages, were prescribed at least the MMA of eggs (97 to 99 percent by food package type; table C.9). Those who were not prescribed eggs were concentrated among children assigned a medical package.

Table C.9
Quantity of Eggs Prescribed by Food Package Type (2014)

	Medical					Children		Women			
	Children		Women								
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Quantity (dozen)[b]											
MMA	1	1	1	1	2–3[c]	1	1	1	1	2–3[c]	0
Mean amount prescribed	0.7	0.9	0.9	0.9	1.9	1.0	1.0	1.0	1.0	2.0	0.2
Mean amount prescribed to those prescribed any	1.0	1.0	1.0	1.0	2.0	1.0	1.0	1.0	1.0	2.0	1.1
Percent Prescribed											
Quantity Issued (dozen)											
2 or more	0.4%	0.6%	3.4%	2.0%	93.0%	0.4%	0.8%	1.0%	0.9%	96.9%	2.2%
At least 1 but less than 2	72.5%	89.8%	86.9%	90.9%	2.9%	97.8%	98.7%	97.9%	98.2%	2.8%	16.3%
Less than 2	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
None	27.1%	9.6%	9.7%	7.1%	4.1%	1.8%	0.5%	1.2%	0.8%	0.3%	81.5%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] Fresh eggs. Dried egg mix converted to fresh equivalent

[c] Women fully breastfeeding multiples are allowed 3 dozen; other women receiving Food Package VII are allowed 2 dozen

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)
III IV-B: Children aged 2–4.9 years (medical)
III V: Women, pregnant, and partially (mostly) breastfeeding up to 1 year postpartum (medical)
III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)
III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)
IV-A: Children aged 1–1.9 years
IV-B: Children aged 2–4.9 years
V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum
VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum
VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples
N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

G. LEGUMES

Substantial fractions of participants assigned certain medical packages were prescribed no legumes: 25 percent of 1-year-olds with medical packages and 7 to 9 percent of older children, pregnant/partially (mostly) breastfeeding women, and non-breastfeeding/minimally breastfeeding women up to 6 months postpartum (table C.10). For non-medical food package types, at least 92 percent of participants were prescribed at least the MMA.

Table C.10
Quantity of and Type of Legumes Prescribed by Food Package Type (2014)

	Medical					Children		Women			
	Children		Women								
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Quantity (oz)											
MMA[b]	18/16	18/16	36/32	18/16	36/32–54/48[c]	18/16	18/16	36/32	18/16	36/32–54/48[c]	0
Mean amount prescribed	12.5	15.9	29.8	17.8	32.3	16.4	17.2	32.9	17.9	32.9	4.9
Mean amount prescribed to those prescribed any	16.7	17.2	32.7	19.2	32.9	16.7	17.3	33.2	18.0	33.2	26.8
Percent Prescribed											
Quantity Issued (oz)											
36/32 or more	1.4%	1.8%	78.5%	9.9%	77.1%	1.7%	2.0%	93.0%	5.6%	93.2%	9.0%
At least 18/16 but less than 36/32	70.8%	88.8%	12.5%	82.3%	21.1%	94.1%	96.3%	6.3%	92.4%	5.9%	9.5%
Less than 18/16	2.4%	1.7%	0.0%	0.7%	0.0%	2.0%	1.1%	<0.1%	0.9%	<0.1%	<0.1%
None	25.4%	7.7%	9.0%	7.1%	1.8%	2.1%	0.6%	0.7%	1.1%	0.9%	81.5%
Type Allowable[d]											
Dried beans	69.6%	64.3%	53.3%	62.9%	57.1%	77.8%	73.0%	74.3%	68.1%	74.7%	66.1%
Peanut butter	45.2%	75.8%	88.4%	80.1%	81.0%	50.2%	80.4%	60.4%	78.2%	58.6%	74.5%
Canned beans	50.3%	46.9%	54.6%	50.0%	56.6%	44.6%	42.4%	48.8%	48.2%	43.0%	64.2%
Type Prescribed[d]											
Dried beans	17.6%	9.8%	26.0%	10.7%	27.5%	20.4%	8.4%	35.2%	10.2%	42.1%	2.5%
Peanut butter	12.8%	27.6%	68.3%	32.6%	64.9%	11.4%	22.9%	48.7%	27.2%	46.2%	11.1%
Canned beans	10.6%	6.4%	25.3%	11.3%	28.7%	11.4%	5.3%	13.0%	9.5%	14.5%	3.3%
Not specified	34.3%	49.6%	32.1%	47.8%	38.0%	55.8%	64.3%	63.6%	57.3%	64.0%	9.7%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] MMAs are 16 ounces dry or 64 ounces canned or 18 ounces peanut butter for children and for non-breastfeeding and partially (minimally) breastfeeding women up to 6 months postpartum; and 16 ounces dry or 64 ounces canned plus 18 ounces of peanut butter for pregnant women and other breastfeeding women up to 1 year postpartum (additional combinations allowed are 16 ounces dry beans and 64 ounces canned beans (and no peanut butter); or 32 ounces dry beans; or 128 ounces canned beans (and no peanut butter); or 36 ounces peanut butter (and no beans).

[c] Women fully breastfeeding multiples are allowed 54 ounces of peanut butter or 48 ounces of beans; other women receiving Food Package VII are allowed 36 ounces of peanut butter or 32 ounces of beans

[d] Food package contains peanut butter, beans, canned beans, or a combination of these types. Responses are not mutually exclusive, so percentages may add to more than 100 percent. *Type allowable* percentages include food packages where that type was included in the prescription, for example, a prescription that is described as containing 18 oz peanut butter or 16 ounces dried beans would be counted in both the type allowable dry beans category and the type allowable peanut butter category. *Type prescribed* counts packages where the food package description specifies which type of legume is in the prescription, for example a food package with dry beans and peanut butter would be counted under each of those types prescribed, whereas dried beans or peanut butter would be counted under not specified.

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)
III IV-B: Children aged 2–4.9 years (medical)
III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)
III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)
III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)
IV-A: Children aged 1–1.9 years
IV-B: Children aged 2–4.9 years
V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum
VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum
VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples
N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

H. FISH

The sample used for tabulation of canned fish for Food Package VII (table C.11) differs slightly from that for fully breastfeeding women which appears in chapter II because it includes pregnant women with multiples and excludes participants in the two State agencies for which food package type was not reported. The numerical results are, however, virtually identical: about 96 percent of the sample were prescribed at least the MMA of 30 ounces of canned fish.

Table C.11
Quantity of Canned Fish Prescribed in Food Package Type VII (2014)

	Food Package Type VII[a]
Quantity (oz)	
MMA	30–45[b]
Mean amount prescribed	29.2
Mean amount prescribed to those prescribed any	30.1
Percent Prescribed	
Quantity Issued (oz)	
30 or more	96.3%
Less than 30	0.7%
None	2.9%
Type Allowable[c]	
Tuna	98.1%
Salmon	90.0%
Sardine	45.9%
Mackerel	0.0%
N	256,624

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Food Package VII is assigned to women who are fully breastfeeding; partially (mostly) breastfeeding multiples, or pregnant with multiples

[b] Women fully breastfeeding multiples are allowed 45 ounces; other women receiving Food Package VII are allowed 30 ounces

[c] Responses are not mutually exclusive, so percentages may add to more than 100 percent

I. WHOLE GRAINS

Most participants were prescribed at least the MMA of whole grains. Children prescribed medical packages, especially 1-year-olds (table C.12), were most likely to be prescribed no whole grains (25 percent of these 1-year-old children). Pregnant or partially (mostly) breastfeeding women receiving medical packages were also more likely to be prescribed no whole grains (12 percent).

Table C.12
Quantity and Types of Whole-Grain Alternatives Prescribed by Food Package Type (2014)

	Medical								
	Children		Women		Children			Women	
	III IV-A	III IV-B	III V	III VII	IV-A	IV-B	V	VII	N/A[a]
Quantity (lb)									
MMA	2	2	1	1–1.5[b]	2	2	1	1–1.5[b]	0
Mean amount prescribed	1.5	1.8	0.9	1.0	2.0	2.0	1.0	1.0	0.1
Mean amount prescribed to those prescribed any	2.0	2.0	1.0	1.0	2.0	2.0	1.0	1.0	1.0
Percent Prescribed									
Quantity Issued (lb)									
2 or more	73.5%	90.6%	0.8%	1.2%	96.7%	98.2%	0.4%	0.4%	0.0%
At least 1 but less than 2	2.0%	2.5%	87.2%	95.3%	1.9%	1.6%	97.0%	98.8%	10.2%
Less than 1	0.0%	0.0%	0.0%	0.0%	0.0%	< 0.1%	< 0.1%	< 0.1%	0.0%
None	24.5%	7.0%	11.9%	3.5%	1.4%	0.3%	2.6%	0.8%	89.7%
Type Allowable[c]									
Whole-wheat/ whole-grain bread	96.7%	97.1%	96.5%	93.9%	96.8%	96.7%	96.0%	96.6%	95.8%
Soft-corn or whole-wheat tortillas	83.7%	83.7%	83.0%	84.3%	89.4%	89.8%	89.0%	89.3%	95.6%
Brown rice	81.4%	80.7%	72.9%	62.5%	88.0%	87.7%	87.0%	87.7%	75.3%
Oatmeal	33.5%	34.8%	27.8%	20.0%	45.9%	48.8%	48.9%	49.5%	27.8%
Bulgur	6.9%	7.5%	1.9%	3.6%	22.9%	25.3%	24.6%	31.6%	< 0.1%
Whole-grain barley	4.2%	3.8%	1.8%	3.6%	19.5%	21.7%	20.8%	26.5%	0.0%
N	26,606	39,680	946	171	1,334,699	3,067,702	900,042	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] Women fully breastfeeding multiples are allowed 1.5 pounds; other women receiving Food Package VII are allowed 1 pound

[c] Responses are not mutually exclusive, so percentages may add to more than 100 percent

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)
III IV-B: Children aged 2–4.9 years (medical)
III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)
III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)
III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)
IV-A: Children aged 1–1.9 years
IV-B: Children aged 2–4.9 years
V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum
VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum
VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples
N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)

J. INFANT FOODS

Within each non-medical food package category, 97 percent of older infants were prescribed some fruits and vegetables, and 82 to 87 percent were prescribed the maximum amount (table C.13). Among infants with medical packages, 7 to 8 percent were prescribed no fruits and vegetables.

Among fully breastfed infants, 82 percent were prescribed the maximum amount of infant meat and infant fruits and vegetables.

Table C.13
Quantities of Infant Foods Prescribed for Infants by Food Package Type (2014)

	II-FF	II-BF/FF	II-BF	III II-FF	III II-BF/FF
Fruits and Vegetables					
Quantity (oz)					
MMA	128	128	256	128	128
Mean amount prescribed	120.3	121.5	238.1	115.0	113.8
Mean amount prescribed to those prescribed any	123.9	124.7	243.0	124.0	123.2
Percent Prescribed					
Quantity Issued (oz)					
256 or more	0.1%	0.6%	81.9%	0.1%	0.1%
At least 128 but less than 256	86.6%	86.8%	11.3%	84.1%	82.5%
Less than 128	10.5%	10.0%	4.8%	8.7%	9.7%
None	2.9%	2.6%	2.0%	7.2%	7.6%
N	683,489	104,371	110,713	82,014	5,635
Meats					
Quantity (oz)					
Federal standard			77.5		
Mean amount issued			73.2		
Mean amount issued to those receiving any			76.3		
Percent Prescribed					
Quantity Issued (oz)					
77.5 or more			81.9%		
Less than 77.5			5.6%		
None			4.1%		
N			110,713		

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

Food package types for infants include—

II FF: FF infants aged 6–11.9 months
II BF/FF: BF/FF infants aged 6–11.9 months
II BF: BF infants aged 6–11.9 months
III II-FF: FF infants aged 6–11.9 months (medical)
III II BF/FF: BF/FF infants aged 6–11.9 months

K. FRUIT AND VEGETABLE CASH VALUE VOUCHERS

The majority of participants were prescribed a voucher for at least the MMA. Those who were prescribed no fruit and vegetable voucher were concentrated among participants receiving medical packages, 11 to 28 percent of these participants (table C.14).

Table C.14
Amount of Fruit and Vegetable Voucher Prescribed by Food Package Type (2014)

	Children		Women			Children		Women			
	III IV-A	III IV-B	III V	III VI	III VII	IV-A	IV-B	V	VI	VII	N/A[a]
Amount ($)											
MMA	6	6	10	10	10–15[b]	6	6	10	10	10–15[b]	0
Mean amount prescribed	4.51	5.43	8.33	7.34	8.48	5.77	5.87	9.64	9.54	9.50	1.84
Mean amount prescribed to those prescribed any	6.05	6.08	10.09	10.08	10.14	6.05	6.08	10.05	10.08	10.05	10.01
Percent Prescribed											
Quantity Issued ($)											
10 or more	0.4%	0.6%	82.2%	70.4%	83.6%	0.4%	0.8%	95.8%	94.5%	94.6%	18.4%
At least 6 but less than 10	74.1%	88.6%	0.3%	2.0%	0.0%	94.8%	95.8%	0.1%	0.1%	< 0.1%	0.0%
Less than 6	0.1%	0.1%	0.0%	0.4%	0.0%	< 0.1%	< 0.1%	< 0.1%	< 0.1%	< 0.1%	0.0%
None	25.5%	10.7%	17.4%	27.2%	16.4%	4.7%	3.4%	4.1%	5.3%	5.4%	81.6%
Type Allowable[c]											
Fresh	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Frozen	78.2%	76.9%	89.0%	87.0%	86.0%	85.2%	84.7%	84.0%	85.9%	85.1%	89.3%
Canned	54.9%	54.6%	67.6%	68.5%	63.7%	63.1%	62.4%	57.8%	58.9%	61.5%	59.7%
Dried	0.0%	0.0%	1.5%	5.4%	2.1%	0.0%	0.0%	18.8%	13.4%	26.1%	0.0%
N	26,606	39,680	946	253	171	1,334,699	3,067,702	900,042	687,163	256,624	64,745

Source: PC2014 participant characteristics data. Analysis includes the 50 States, except Louisiana and New Mexico, and includes the District of Columbia and Puerto Rico

[a] Partially (minimally) breastfeeding women more than 6 months postpartum. These participants are not authorized to receive food benefits

[b] Women fully breastfeeding multiples are allowed $15; other women receiving Food Package VII are allowed $10

[c] Responses are not mutually exclusive, so percentages may add to more than 100 percent

Food package types include—

III IV-A: Children aged 1–1.9 years (medical)
III IV-B: Children aged 2–4.9 years (medical)
III V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum (medical)
III VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum (medical)
III VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding multiples; pregnant with multiples (medical)
IV-A: Children aged 1–1.9 years
IV-B: Children aged 2–4.9 years
V: Women, pregnant and partially (mostly) breastfeeding up to 1 year postpartum
VI: Women, non-breastfeeding postpartum and partially (minimally) breastfeeding up to 6 months postpartum
VII: Women, fully breastfeeding up to 1 year postpartum; partially (mostly) breastfeeding with multiples; pregnant with multiples
N/A: Women, partially (minimally) breastfeeding over 6 months postpartum (no food package)