REIMBURSEMENT OF INFANT MEALS IN THE CHILD NUTRITION PROGRAMS

This policy establishes the guidelines for programs to use in claiming reimbursement for meals and snacks served to infants.

Section 226.20 specifies that when infants from birth through 11 months participate in the program, an “infant meal shall be offered.” Child Care Centers and Family Day Care Homes participating in CACFP must offer program meals to all eligible children who are enrolled for care in their facilities. Under the infant meal pattern, infant formula is a required component. In order for a child care facility or home to obtain reimbursement under the CACFP, the facility must purchase and offer infant formula, unless breast milk is provided by the infant’s mother and is served in its place.

When an infant reaches the development stage that requires more than one component for a CACFP reimbursable meal, the child care facility may only claim meals containing breast milk or parent-provided formula, “which meets program requirements,” when at least one other meal component is supplied by the child care facility.

We recommend that the day center, or day care home offer the type of formula that the infant’s health care provider has suggested to the infant’s parent (or guardian). If the child care facility offers a different type of formula, the infant’s parent may choose to decline the offered formula, and supply another type. You may refer to the list of Iron-fortified Infant Formulas That Do Not Require Medical Statements at the website listed below. This list is updated as new information becomes available.

http://www.fns.usda.gov/cnd/Care/Regs-Policy/InfantMeals/FormulaList.htm#top

Required Documentation
To ensure that parents are aware of your agency’s obligation to offer meals to infants and to meet program compliance, parents of infants must complete the enclosed notification. This form will be used by parents to indicate whether they will continue supplying the breast milk or infant formula and other infant meal components or if they will accept the items provided by the center. A completed form must be on file for each infant enrolled for childcare regardless of whether the childcare facility will claim the meals for reimbursement or not. This notification must be prepared on your agency letterhead, distributed for completion by the infant’s parent, and maintained on file.

As situations change, such as a medical authority changing the infant’s formula, a new form should be completed. This form must be kept current and accurate for each infant enrolled for childcare until the infant reaches one year of age or is no longer on infant formula. For definitions and more information regarding the required guidelines for the CACFP Infant meal pattern, refer to the back of this sheet.

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Required Guidelines for CACFP Infant Meal Pattern

**Definition of Infant.** Any child less than 12 months of age; any child up to their first birthday.

**Definition of Infant Formula.** Infant formula defined by USDA is “any iron-fortified infant formula intended for dietary use as a sole source of food for normal healthy infants served in liquid state at manufacturer’s recommended dilution.” A medical statement is required in order for a Sponsor to serve/claim an infant formula that does not meet this definition.

**Definition of Enrolled Child.** A child whose parent or guardian has submitted to an institution a signed document which indicates that the child is enrolled for child care. All infants and children who are considered enrolled in a child care center or home must be included in the total number of enrolled participants, whether or not their meals are being claimed for reimbursement.

**Obligation to Provide Infant Meals.** All Sponsors participating in the Child and Adult Care Food Program, and licensed to care for infants, must provide all infant foods required by the Infant Meal Pattern including at least one infant formula that meets the definition of infant formula. Sponsors are strongly encouraged to select an infant formula that satisfies the needs of all or most infants in their care.

**Breast-fed Infants.** Infant meals or snacks, including human breast milk as the milk source, are reimbursable in the CACFP if the Sponsor bottle-feeds the infant his/her mother's breast milk. This is to provide the incentive for day care centers to encourage breast-feeding, as the center is still providing a "service" by preparing the bottle and feeding the infant, and the breast-fed infant receives improved nutritional benefits during their first year of life.

**Parent Providing Infant Formula/Breast Milk.** The decision regarding which infant formula to feed an infant is one for the infant’s physician and parents/guardian to make together. Therefore, parents/guardians may elect to decline the infant formula provided by the center and supply their own formula or breast milk.

**Formula Notification Letter – Parent Decline Form.** Sponsors must inform parents that an iron-fortified infant formula, including the specific name of the formula, iron-fortified infant cereal, and other semi-solid foods listed under the CACFP Infant Meal Pattern are provided by their Sponsorship. Parents/Guardians who choose to provide their own formula and/or other foods must complete the Infant Meal Notification Letter – Parent Decline Form. This documentation must be kept on file.

**Reimbursement for Infant Meals.**

(A) An infant meal, containing only breast milk or infant formula that meets CACFP Program requirements may be claimed for reimbursement, regardless of whom supplies the formula, if proper documentation is maintained on file.

(B) When the infant is developmentally ready for solid food items, reimbursement can be claimed for the infant’s meal only when:
   1. the agency maintains proper documentation;
   2. another food component(s) is provided by the agency according to the CACFP meal pattern; and
   3. the required meal components, when the infant is developmentally ready, are provided in accordance with the age-specific CACFP Infant Meal Pattern requirements.

*The decision to offer an infant other meal component(s) should be made by the infant’s physician and parents/guardians.*
Dear Parent,

Our center participates in the Child and Adult Care Food Program (CACFP), which is a federally funded program. Child care centers who participate in this program are reimbursed by USDA to help with the cost of serving nutritious meals that meet CACFP guidelines to all enrolled children. To fully meet CACFP requirements, this center is required to provide formula and other required infant foods* to enrolled infants until they turn one year of age. The center will claim reimbursement for your infant’s meals when a meal contains only breast milk or iron-fortified infant formula regardless of who supplies it. **The iron-fortified infant formula this center offers is/are:**

__________________________________
__________________________________

Please note that the center will also introduce semi-solid foods to your infant according to the decisions made by you and your infant’s physician. *Other infant foods provided by this center include: iron-fortified infant cereal, enriched snack crackers, fruit and vegetables, meat/meat alternates and 100% full strength juice. An infant menu is also developed jointly between parents and center, based on each individual infant’s needs. A copy of the CACFP Infant Meal Pattern is printed on the back of this letter for your information. Please complete, sign and return the form to help our center meet compliance and receive maximum reimbursement.

_______________________________________________
___________________________

(Name of Day Care Center)  
(Signature of Day Care Center Representative)

**PARENT, PLEASE CHECK YOUR PREFERENCES:**

**Formula or Breast Milk** (check one)

_____ I want the center to provide formula for my infant.

_____ I will provide formula for my infant.

*Note: I understand that I will need to submit a Special Diet Statement if I provide a low-iron infant formula or other special formula for my infant.

_____ I will provide breast milk for my infant.

**Solid Food:** (check one)

_____ I want the center to provide solid food for my infant when he/she is developmentally ready.

_____ I will provide my own choice of infant cereal and/or other foods instead of accepting the iron-fortified infant cereal and/or other foods provided by this center. If my child is not developmentally ready to transition to the children’s menu at the age of 12 months I will provide documentation from my infant’s physician.

Please complete, sign and return the form to help our center meet compliance and receive maximum reimbursement.

Infant’s Name_________________________________________ Birthdate___________

Parent’s/Guardian’s Signature___________________________ Date_______________
The infant meal pattern must contain, at a minimum, each of the following components in the amounts indicated for the specific age group. The minimum quantity of food must be provided to the infant in order to qualify for reimbursement, but may be served during a span of time consistent with the infant's eating habits.

<table>
<thead>
<tr>
<th></th>
<th>Birth Through 3 Months</th>
<th>4 Through 7 Months</th>
<th>8 Months through 11 Months</th>
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<tbody>
<tr>
<td><strong>BREAKFAST</strong></td>
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<tr>
<td>4 - 6 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td>4 - 8 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td>6 - 8 fl. oz. formula(^1) or breast milk (^{5,6})</td>
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<tr>
<td></td>
<td>0 - 3 T. infant cereal(^2,7)</td>
<td>2 - 4 T. infant cereal(^2)</td>
<td>1 - 4 T. fruit and/or vegetable</td>
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<td><strong>LUNCH OR SUPPER</strong></td>
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<tr>
<td>4 - 6 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td>4 - 8 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td>6 - 8 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 - 3 T. infant cereal(^2,7)</td>
<td>2 - 4 T. infant cereal(^2)</td>
<td>and/or 1 - 4 T. meat, fish, poultry, egg yolk, or cooked dry beans or peas, or 1/2-2 oz. cheese or 1-4 oz. cottage cheese, cheese food, or cheese spread</td>
</tr>
<tr>
<td></td>
<td>0 - 3 T. fruit and/or vegetable(^7)</td>
<td>1 - 4 T. fruit and/or vegetable</td>
<td></td>
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<tr>
<td><strong>SUPPLEMENT</strong></td>
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<tr>
<td>4 - 6 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td>4 - 6 fl. oz. formula(^1) or breast milk (^{5,6})</td>
<td>2 - 4 fl. oz. formula(^1), breast milk (^{5,6}), or fruit juice(^3)</td>
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<tr>
<td></td>
<td>0 - 1/2 bread(^4,7) or 0 - 2 crackers(^4,7)</td>
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1 Must be iron-fortified infant formula.
2 Must be iron-fortified dry infant cereal.
3 Must be full strength fruit juice.
4 Must be from whole-grain or enriched meal or flour.
5 It is recommended that breast milk be served in place of formula from birth to 1\(^{st}\) birthday.
6 For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.
7 A serving of this component is required when the infant is developmentally ready to accept it.