Date: August 28, 2015

To: Iowa Child and Adult Care Food Program (CACFP) Home Sponsors

From: Suzanne Secor Parker, Consultant, Bureau of Nutrition and Health Services

Subject: CACFP Diet Modification Request Form

Effective: Immediately

Replaces: CACFP Allergy/Food Exception Statement

In conjunction with new United State Department of Agriculture (USDA) guidance, the State agency has updated the "Allergy/Food Exception Statement" form used to document medical food substitutions. The new "Diet Modification Request Form" will be used by all Iowa Child Nutrition Programs including Centers participating in CACFP, the National School Lunch Program and the Summer Food Service Program. The new form, attached to this memo, will be posted in IowaCNP Download Forms.

The Diet Modification Request Form defines the licensed medical professionals who may determine if a participant has a disability, indicate foods to be omitted and foods to substitute, and sign the form. An optional checklist is included on the back of the new form to assist medical professionals in describing foods to omit and foods to substitute.

Medical professionals who sign the form must have the authority to prescribe medication in the State of Iowa. In Iowa these medical professionals include Medical Doctors (MD), Doctors of Osteopathic Medicine (DO), Physician’s Assistants (PA), and Advanced Registered Nurse Practitioners (ARNP). Chiropractors, Registered Dietitians, and Nurses are not authorized to make determinations or sign the form.

Providers are required to offer to provide food substitutions for medical needs that are defined as disabilities unless there is a documented financial hardship.

Providers have the discretion to provide substitutions for medical needs that do not rise to the level of disability, and for non-medical dietary requests. Parents/guardians may provide food substitutions if they wish and if the provider allows them to provide the food substitutions from home. The form includes a box for parents/guardians to indicate their preference to provide the food substitutions. Meals may be claimed for reimbursement when the parent/guardian provides foods for documented medical reasons as long as the provider serves at least one required meal component for the meal. Menu substitutions must be recorded on menus.
The revised form also includes a place at the bottom for providers to indicate if they will provide a soy milk substitute that is nutritionally equal to cow’s milk and to identify the brand name of the substitute. However, providers are not required to offer a milk substitute unless it is due to a documented disability. Parents/guardians may check a box to accept the soy milk offered and must list the reason for requesting the milk substitute.

Almond milk, coconut milk, and rice milk are not nutritionally equal to cow’s milk and may not be served unless the medical professional indicates the participant has a disability and lists one of these milks to be substituted in place of cow’s milk.

Call (515-281-3744) or email (suzanne.secorparker@iowa.gov) if there are questions.

Attachment