

New York State WIC Program Formulary with Images

Effective August 2026

Contract Formulas

Approved for: Infant = I, Child = C

Enfamil Infant

12.5 oz power, 13 oz concentrate



I/C



I/C

Enfamil NeuroPro Infant

32 oz ready-to-use



I/C

Enfamil A.R.

12.9 oz powder



I/C

Enfamil Reguline

12.4 oz powder



I/C

Enfamil Gentlease

12.4 oz powder



I/C

Enfamil NeuroPro Gentlease

32 oz ready-to-use



I/C

Similac Soy Isomil

12.4 oz powder, 13 oz concentrate & 32 oz ready-to-use



I/C



I/C



I/C

Kosher Formula

Medical Documentation is **not** required

Cholov Yisroel Formula – For Religious Exemptions Only

Approved for: Infant = I, Child = C

Baby's Only Mehadrin

21 oz powder



I/C

Exempt Formulas/Formulas for Medical Needs

Medical Documentation is required

Hypoallergenic Formulas

Approved for: Infant = I, Child = C

Alfamino Infant

14.1 oz powder



I/C

Alfamino Junior

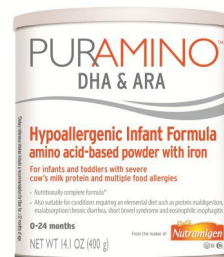
14.1 oz powder



C Only

PurAmino Infant

14.1 oz powder



I/C

Extensive HA

14.1 oz powder



I/C

Similac Alimentum

12.1 oz powder
& 32 oz ready-to-use



I/C



PurAmino Junior

14.1 oz powder



C Only

EleCare for Infants

14.1 oz powder



I/C

EleCare Junior

14.1 oz powder



C Only

Exempt Formulas/Formulas for Medical Needs

Medical Documentation is required

Hypoallergenic Formulas

Approved for: Infant = I, Child = C

Nutramigen

13 oz concentrate & 32 oz ready-to-use



I/C

Nutramigen with Probiotic LGG

12.6 oz powder



I/C

Neocate Infant

14.1 oz powder



I/C

Neocate Syneo Infant

14.1 oz powder



I/C

Neocate Splash Junior

27 pack (8 oz) ready-to-use



C Only

Neocate Junior

14.1 oz powder



C Only

Formulas for Premature Infants

Approved for: Infant = I, Child = C

Enfamil NeuroPro EnfaCare

13.6 oz powder



I Only

Similac Neosure

13.1 oz powder & 32 oz ready-to-use



I Only

Exempt Formulas/Formulas for Medical Needs

Medical Documentation is required

Specialized Formulas – available in pharmacies

Approved for: Infant = I, Child = C

Enfaport

6 pack (6 oz) ready-to-use



I Only

Similac PM 60/40

14.1 oz powder



I/C

Pregestimil

16 oz powder &
6 pack (2 oz) ready-to-use



I/C

Pregestimil 24 Cal

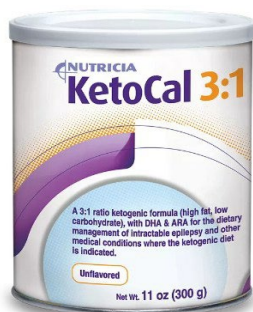
6 pack (2 oz) ready-to-use



I/C

KetoCal 3:1

11 oz powder



C Only

KetoCal 4:1

11 oz powder



C Only

Fortini

12 pack (4 oz)
ready-to-use



I/C up to 18 months

WIC-Eligible Nutritionals

Medical Documentation is required

Calorie and Nutrient Dense Products

Approved for: Child = C, Woman = W

Boost and Boost High Protein

6 pack (8 oz) ready-to-use



W Only

Boost Kid Essentials

8 oz ready-to-use



C Only

Ensure & Ensure Plus

6 pack (8 oz) ready-to-use



W Only

Kate Farms Pediatric Standard 1.2

8.45 oz ready-to-use



C Only

PediaSure & PediaSure with Fiber

6 pack (8 oz) ready-to-use



C Only

PediaSure Enteral & Enteral Fiber

8 oz ready-to-use



C Only

WIC-Eligible Nutritionals

Medical Documentation is required

Calorie and Nutrient Dense Products – available in pharmacies
Approved for: Child = C, Woman = W

Kate Farms Pediatric Peptide 1.0

8.45 oz ready-to-use



C Only

Kate Farms Pediatric Peptide 1.5

8.45 oz ready-to-use



C Only

PediaSure Peptide 1.0

8 oz ready-to-use



C Only

Peptamen Jr.

8.45 oz ready-to-use



C Only

Peptamen Jr. 1.5

8.45 oz ready-to-use



C Only

PediaSure Peptide 1.5

8 oz ready-to-use



C Only

Modular Products – Available in pharmacies
Approved for: Infant = I, Child = C, Woman = W

Phenex-1

14.1 oz powder
I/C



Phenex 2

14.1 oz powder
C/W



Medical Documentation Requirements

Medical documentation is required for:

- Infants 6 months or older with greater amounts of contract formula in lieu of infant foods
- Infants and children with exempt formula
- Children with contract formula
- Children and women with infant foods
- Children and women with WIC-eligible nutritionals

Medical documentation includes an appropriate qualifying medical condition for the formula, quantity (ounces/day), length of use and food restrictions.

The Medical Documentation Form is available at:

<https://www.health.ny.gov/forms/doh-4456.pdf>

Premature formulas may be provided to premature infants up to their corrected age of 12 months. All flavors are approved for NYS WIC eligible formula products.

The need for Ready-To-Use formula will be addressed by the WIC Program.