

CACFP Medical Statement Sample Form

(To Provide Information for a Provider to Make an Appropriate Meal Accommodation)

This form may be (1) used by a licensed medical authority able to write prescriptions to provide a medical statement for a participant's medical disability or a special dietary need that warrants a meal accommodation or (2) used to assist a licensed medical authority in creating the medical statement necessary for a meal accommodation. If this form is used as a medical statement, the form must be completed by the medical authority and signed by both the parent/guardian and the medical authority. The reverse side of this form provides additional information on the regulations related to reasonable meal accommodations.

I. Provide the following information about the participant.

Participant's Name: Date:

Birthdate: Age:

Does the participant have a medical disability which affects one of the major life functions which necessitates a meal accommodation? Yes No

Does the participant have a special dietary need that will be helped by a meal accommodation? Yes No

II. How does this medical disability or special dietary need impact the participant's diet?

III. What meal accommodation(s) are needed to address the participant's medical disability or special dietary needs? Please check the box before applicable meal accommodations and provide a detailed explanation for each checked accommodation in the box beside the description.

- Food items or ingredients not to be served
- Suggested substitutions for food items not served
- Specific information on portion sizes for food items
- Specific description of texture modifications for specific food types or items
- Special utensils
- Other

IV. Provide the following signatures.

Parent/Guardian Signature _____ Date _____

Medical Authority Signature _____ Date _____

Medical Authority Office Phone: _____

Information about Accommodations to Meals for Participants with a Medical Disability

Contracting Entities (CEs) and sites are required to provide reasonable meal component substitutions to a participant with a disability when supported by a medical statement signed by a licensed physician or a State-recognized medical authority. A State-recognized medical authority is a State-licensed health care professional who is authorized to write medical prescriptions under State law. The CE or site should provide parent/guardian instructions about requesting substitutions.

The Code of Federal Regulations (7CFR, Part 15b) defines a person with a disability as (1) having a physical or mental impairment that substantially limits one or more major life activities and (2) having a record or is regarded as having a physical or mental impairment.

CEs and sites may, at their discretion, make substitutions for participants without disabilities but who are unable to consume a food item because of medical or other special dietary needs, such as participants with food intolerance(s) (e.g., lactose intolerant or religious restrictions). Reasonable substitutions must be made on a case-by-case basis, must be provided at no additional cost to the parent/guardian, and must be supported by a written statement signed by a recognized medical authority. In these cases, recognized medical authority may include physicians, physician assistants, or nurse practitioners.

When a CE or site believes the medical statement is unclear, or lacks sufficient detail, they must obtain appropriate clarification so that a proper and safe meal can be provided. However, CEs and sites may not request additional information with the intent of trying to figure out if the participant really has a disability. CEs and sites must put into place what is known while waiting for additional information or clarification.

CEs and sites must:

- Keep on file a copy of the State-recognized medical authority's medical statement in both the CE's and the site's files, if the CE and site are in different locations.
- Provide the meal substitutions at no additional cost to the participant or participant's parent/guardian.
- Document meal substitutions and provide all meal services in the most integrated setting appropriate to the needs of the participant with disability.

A parent or guardian may provide one or more of the components of the reimbursable meal as long as the CE or site provides at least one required component. CEs and sites may not require a parent/guardian to provide one or more components for a participant with a disability.

CEs and sites are not required to provide the exact substitution or other modification requested. However, they must work with the parent or guardian to offer a reasonable modification that effectively accommodates the participant's disability and provides equal opportunity to participate in or benefit from the Program. CEs and sites may also consider expense and efficiency when choosing the most appropriate approach to accommodate a participant's disability. CEs should contact their Education Service Center (ESC) or SquareMeals@TexasAgriculture.gov for assistance.