This Policy Alert REPLACES CACFP ADC Handbook Sections:

- 4113.2, Adults with Disabilities
- 4113.3, Adults with Special Dietary Needs

**Definitions**

**Disabled Adult Participant** – An adult participant who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment.

**Licensed Physician** – A person licensed to practice medicine in Texas. Licensed physicians include Doctors of Osteopathy.

**Major Life Activities** – Functions such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.

**Recognized Medical Authority** – Includes licensed physicians, physician assistants and nurse practitioners.

**Procedure 4113.2 Meals for Adult Participants with Disabilities**

You are required to provide meal component substitutions to disabled adult participants when supported by a medical statement signed by a licensed physician. The determination of whether or not an adult participant has a disability that restricts his or her diet is to be made on an individual basis by a licensed physician. The physician’s medical statement of the adult participant’s disability must be based on the regulatory criteria for “disabled adult participant” and contain a finding that the disability restricts the adult participant’s diet.

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The medical statement must identify:
• The adult participant’s disability and an explanation of why the disability restricts the adult participant’s diet;
• The major life activity affected by the disability;
• The food or foods to be omitted from the adult participant’s diet;
• The food or choice of foods to be used as substitutions.
• Any other restrictions and/or requirements specific to the adult participant’s disability (i.e. caloric modifications).

Note: If the adult participant’s disability requires only textural modification(s) to the regular program meal, as opposed to a meal pattern substitution, then the medical statement is recommended, but not required.

Adult participants with food allergies or intolerances, or obese adult participants do not meet the regulatory criteria for “disabled adult participant”. However, if the physician’s assessment finds that the food allergy may result in severe, life-threatening reactions (anaphylactic reactions) or the obesity is severe enough to substantially limit a major life activity, then the adult participant meets the definition of “disabled adult participant”, and you must make the substitutions prescribed by the licensed physician and supported by the physician’s medical statement.

You must:
• Keep on file a copy of the licensed physician’s medical statement;
• Provide the meal substitutions at no additional cost to the adult participant; and
• Document substitutions made to meals on separate meal production records (Form H1654).

SNP strongly encourages you to work closely with the adult participant for the health, well-being and education of adult participants with disabilities to ensure that reasonable accommodations are made to allow adult participants with disabilities to participate in the meal service. This is particularly important when accommodating adult participants whose disability(ies) requires significant modifications or personal assistance.

The reimbursement rate for meals served to adult participants with disabilities is the same standard rate as all other program meals; however; the added cost of providing meal substitutions is an allowable program cost in your food budget.

4113.3 Meals for Adult Participants with Medical or Special Dietary Needs

Adult participants who are not a “disabled adult participant” but who are unable to consume a food item because of medical or other special dietary needs may be served substitutions. This includes adult participants with food intolerance(s) (e.g., lactose intolerant or food allergy).
Procedure continued

An adult participant with a medical or special dietary need must be supported by a medical statement signed by a recognized medical authority. In these cases, recognized medical authority may include physicians, physician assistants or nurse practitioners. The medical statement must include the following:

- Identification of the medical or special dietary need that restricts the adult participant's diet;
- Food or foods to be omitted from the adult participant’s diet; and
- Food or choice of foods to be used as substitutions.

The decision as to whether or not a center will provide the substitutions is at the discretion of the adult day care center. An adult day care center is not required to satisfy the unique dietary needs of each adult participant. SNP urges adult day care centers to make every effort to satisfy the unique medical or special dietary needs of each adult participant; however, we recognize that this may not always be possible due to operational and financial constraints.

If a center chooses to provide substitutions for adult participants with medical or special dietary needs, then the center must:

- Provide substitutions on a case-by-case basis;
- Maintain the required medical statement in your files;
- Provide the meal at no additional cost to the adult participant; and
- Document substitutions made to meals on separate meal production records (Form H1654).

Example: "Lactose Intolerant" describes a difficulty digesting the sugar found in milk and milk foods. Symptoms associated with lactose intolerance may be reduced or eliminated if:

- Small, frequent portions of milk are consumed rather than large portions;
- Milk or milk foods are consumed with other foods or a meal; or
- Whole or chocolate milk, yogurt with active cultures, ice cream, and aged hard cheeses like cheddar and Swiss are consumed.

If an adult participant is lactose intolerant, you are encouraged to determine the availability of lactose-reduced or lactose-free milk with your milk supplier. You are also encouraged to provide lactose-reduced or lactose-free milk, as a fluid milk choice, as a creditable part of a reimbursable meal. If you substitute lactose-reduced or lactose-free milk for another milk type, you cannot assess additional charges to the adult participant.

If you serve an adult participant a meal without the required meal components (refer to Section 4113, Meal Pattern Chart, for additional guidance) or with a substitution, you cannot claim reimbursement unless supported by the required medical statement, which meets the above referenced criteria.
Additionally, adult participants with chewing and swallowing difficulties may require textural modifications that include softer foods, e.g., cooked carrots rather than raw carrots, or foods that are chopped, ground, or blended. Textural modifications can usually be made to the regular program meal; therefore, a physician's medical statement indicating the appropriate food texture is recommended, but not required.

SNP strongly encourages you to work closely with the adult participant for the health, well-being and education of adult participants with medical or special dietary needs to ensure that reasonable accommodations are made to allow adult participants with medical or special dietary needs to participate in the meal service. This is particularly important when accommodating adult participants whose medical or special dietary need requires significant modifications or personal assistance.

The reimbursement rate for meals served to adult participants with medical or special dietary needs is the same standard rate as all other program meals; however, the added cost of providing meal substitutions is an allowable program cost in your food budget.

**Procedure continued**

**Authority**

FNS Instruction 783-2 Rev. 2

**Contact**

If you have any questions please contact your Area Program Office.