CACFP Online Claim Manual
At-Risk Afterschool & Emergency Shelter Programs

Wisconsin Department of Public Instruction (DPI) Community Nutrition Team

Revised February 2024

Click on the links in the Table of Contents to go to each section.
When on each page click on the heading to return to the Table of Contents.

Submitting CACFP Claims, Claim Deadlines, Late Claims

Submitting CACFP Claims
- All claims must be submitted electronically by following the steps in this Claim Manual.
- Print a hard copy of all submitted claims for your records. Retain for three years plus the current year.
- A separate claim must be submitted for every month, even if the month consists of only one day of meal service to participants.
- Processing of submitted claims occurs each Tuesday morning, unless that day is a holiday, in which case the processing is the following day. Payment processing does not occur the last two weeks of June and the last two weeks of December.
- You may only submit one claim for each Child Nutrition Program (i.e. CACFP, NSLP, SFSP, SMP) per processing period.
- All agencies will receive reimbursement payments via electronic deposit through AIDS Banking.

Claim Deadlines
Claims for reimbursement must be submitted online within 60 calendar days after the last day of the claiming month. The following chart gives the deadline date for each monthly claim period. Click on our Claim Submission Deadlines webpage for additional information.

Claiming Month	Last Day for Online Submission
January	April 1 (March 31 on leap years)
February	April 29
March	May 30
April	June 29
May	July 30
June	August 29
July	September 29
August	October 30
September	November 29
October	December 30
November	January 29
December	March 1 (February 29 on leap years)

If the 60th day falls on a Saturday, Sunday, or Federal holiday, the claim is due on the next business day. If you are submitting a claim under this situation, you will not be able to submit your claim online. Instead, you need to complete a paper copy of the claim. Plan ahead to avoid paper claim submissions. If you are unable to submit your claim online, please make sure to scan and email it to cntfiscal@dpi.wi.gov to meet these deadlines.

Late Claims

A late claim is any original claim or amended claim with an upward adjustment (increase in dollar amount from the original claim) submitted after 60 calendar days from the end of the claiming month. **Late claims cannot be submitted online**. DPI must grant a "one-time exception" to pay a late claim. This "one-time exception" is at DPI's discretion. DPI may grant a "one-time exception" for only one claim per program (i.e. child care, adult care, at-risk afterschool program, emergency shelter) every 36 months. To receive a one-time exception for a late claim or amended claim refer to Guidance Memo 3.

Navigating the Claim System

Time Limitations

A timer starts from the moment the site is entered. **If there is no activity for 30 minutes**, the user will get an error message and will have to return to the main *Login* screen. **Any data on the page you were working will not be saved.** Any movement on a page will reset the 30-minute timer.
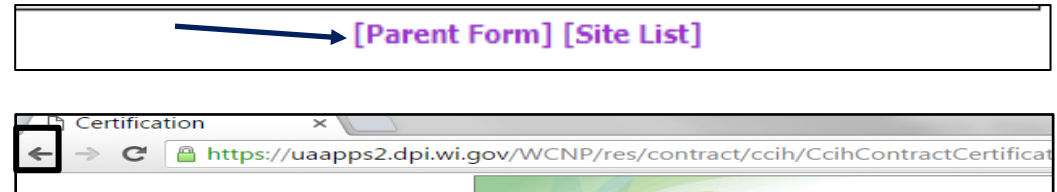
Saving Entered Claim Data
- Clicking 'Continue' at the bottom of each page saves information/data entered.
- If exiting the system before completing the claim, click '**Continue**' to save current data.

Click 'Continue' to save data → CONTINUE

Returning to Previous Pages
- Click a link at the bottom of the page. The name of the link is the page you will go to.
- If you click on the 'Back' icon at the top of the screen, your data will not be saved from the screen you are currently on.

[Parent Form] [Site List]

Certification ×
← → C 🔒 https://uaapps2.dpi.wi.gov/WCNP/res/contract/ccih/CcihContractCertificat

Exiting the Claim
Click '**Logout**' in the upper right corner of the blue boxes.
- If exiting the system before completing the claim, click '**Continue**' to save current data.

CONTINUE

WISCONSIN DEPARTMENT OF **Public Instruction**

Click 'Logout' to exit claim

| Select Agency | Home-Day Care Program | School Nutrition Program | Community Nutrition Program | Summer Food Program | Special Milk Program | Review | Admin | Logout |

Logging into the Claim System

Google Chrome is highly recommended.

1. Go to the Wisconsin Child Nutrition Programs webpage. Click on the 'Online Services' link.

    This will take you to the Wisconsin Child Nutrition Programs Online Services website. **Bookmark this page as a favorite**.

2. Click on the '**Online Services Log-in**' button.
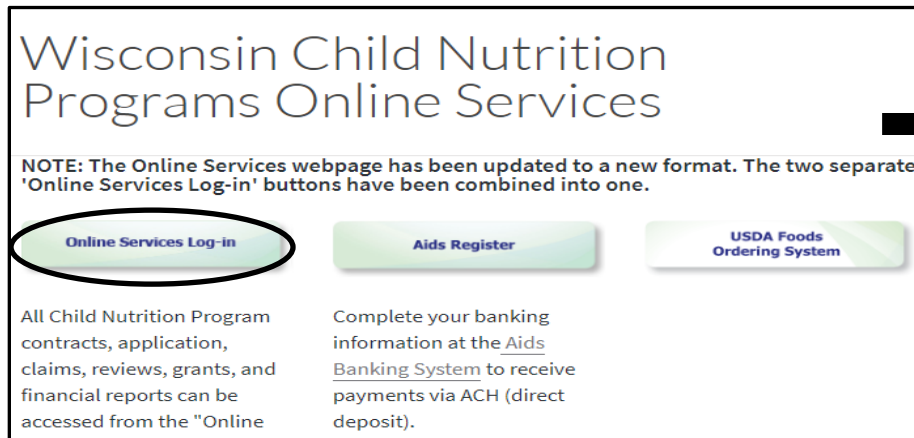
Bookmark this page for future easy access to Online Services and to access important information regarding claims.

3. Enter Agency Code (without dashes) and Password. Click **'Submit'**

Do not bookmark this webpage. If you wish to bookmark, go to step 1.

If you do not know your password or need to request a new one, contact:

1. Primary Contact: Jacqueline Darrow at 608-267-9134; Jacqueline.darrow@dpi.wi.gov
2. Secondary Contact: Deborah Mann at 608-266-6856; Deborah.mann@dpi.wi.gov.

Note: Passwords should be changed when the Authorized Representative or person authorized to submit a claim has left the agency.
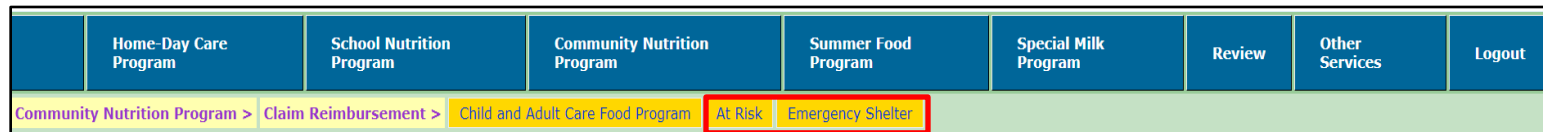
1. From the Main menu, select **'Community Nutrition Program'**

2. Select **'Claim Reimbursement'**

3. Select **'At Risk or Emergency Shelter'**

4. Select **'Enter-Modify Claim'**
   This button is used to submit a new claim or to modify the claim prior to DPI processing it

Click **'Continue'**

General Information

Note: Before entering your claim, you must have all site information readily available to complete submission.

Enter total data for all sites:

- **Date Claim Month:** Indicate claim month and year using drop-down boxes. Enter CLAIM month, **NOT** the month in which you are completing the claim.

  At-Risk meals and snacks may be reimbursed during the regular school year only. This includes weekends or holidays, including vacation periods during normal agency operation days and as approved in the CACFP contract.
  In areas where schools operate on a year-round basis the At-Risk program may receive reimbursement all year.

- **No. of Sites Claiming:** Enter the **total** number sites claiming for the month.

- **Max No. of Service Days:** Enter the total days in the month the site was open and claiming meals during the month.
  Sponsoring Organizations: If sites differ in total days of service, report the greatest number.

```
At Risk Claim Reimbursement
Enter Modify Claim General Information

Date Claim Month        [   v]      Date Claim Year    [   v]
No. of Sites Claiming   [    ]
Max No. of Service Days [    ]
Total Enrollment        [    ]

              Claim Preparer Information
First Name   [          ]      Last Name   [          ]
Phone Number [  ][  ][  ]       Extension   [          ]
Email Address [              ]

              CONTINUE
```

- **Total Enrollment:**
  - ➢ At-Risk Afterschool Programs: Record the highest total daily attendance in the afterschool hours program for all sites.
  - ➢ Emergency Shelters: Record the total number of residential participants under 19 years of age at all sites.

- **Enter Claim Preparer Information:** Enter first name, last name, phone number, extension, and email address.

Click '**Continue**'

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List of Reimbursable Sites

Claim data must be submitted for each site claiming for the month.
The numbers for each category on the General Information page must equal the total sum for each category on this site list.

The 'List of Reimbursable Sites' chart lists the site code and site name of each site **approved** in the CACFP contract.

- **Select first site**

- Click on the **Edit/Delete** to enter information for each site.

- If a site did not participate during the claim month, do not enter any information for that site.

- If a site is not listed on this page, contact your Assigned Consultant.

Click **'Continue'**

| School Nutrition Program | Community Nutrition Program | Logout |

..> Claim Reimbursement > At Risk> Enter-Modify Claim

At Risk Claim Reimbursement
Site List

Select site(s) and click 'Edit/Delete' button to Enter/Modify/Delete claim information for selected site(s).

Site Code & Name	Status	Select site(s)
11347 Blackhawk Middle School		☑
11346 Falk Elementary School		☐
11348 Memorial High School		☐

Total Site(s) claiming	Total Site(s) submitted	Total Site(s) Enrollment	Total Site(s) Enrollment Submitted	Status
2	0	100	0	Incomplete

Edit/Delete   CONTINUE

[Claim General Info]

Enter data for the selected site:

Site Code & Name
- **Enrollment:**
  - ➢ At-Risk Afterschool Programs:
    Independent (one site): Identify the day within the month for which the highest number of participants attended. Record this day's attendance.
    Sponsoring Organization (two or more sites): Among all At-Risk sites, identify the day within the month for which the highest number of participants attended. Record this day's attendance.
  - ➢ Emergency Shelters: Record the total number of residential participants under 19 years of age for site.

- **No. of Service Days:** Enter the total days in the month the site was open and claiming meals during month.

- **Average Daily Attendance (ADA):** Use attendance records, NOT meal counts.
  1. Determine the number of eligible participants in attendance each day the site was open and claiming meals.
  2. Add up each day's total to get a monthly total.
  3. Divide monthly total by number of days of service to determine ADA.
  4. Round all fractions up to the next whole number.

  Schools Only: For ADA step 1 above, use one of the following:
  1. Use Total Sites Enrollment, OR
  2. Highest number of meals served of the different meal types claimed
  Sponsoring Organizations: Record ADA for each site.

- **Breakfast, AM Snack, Lunch, PM Snack, Supper, and Additional Snack, 2nd Lunches, 2nd Supper:** Enter the total meal count number for each meal your agency is approved to claim at the selected site.

  Enter '0' (zero) in the fields that do not apply. Do NOT use commas or decimal points when entering numbers.

Click **'Save'.**

This will take you back to the 'List of Reimbursable Sites' page. Under 'Status' it will change from blank to filled. Repeat steps above for each site that is claiming for the month. If a site is not claiming do not enter any information for that site. Upon completion of all site information, click 'Continue'.

Review the information that is shown for the unpaid claim, and if all is correct, **enter the preparer's name and telephone number.**

Click on the **'Submit'** button at the bottom to submit the claim to DPI to be processed for payment.

Submission and Confirmation

A screen will appear to confirm receipt of the submitted claim. The statement will include the date the claim was successfully submitted. **PRINT THIS SCREEN FOR YOUR RECORDS, AS WELL AS THE SCREEN SHOWING THE REIMBURSABLE DOLLAR ($) AMOUNT.**

Directions for printing are below. Keep copies of these two screens on file along with all CACFP support documentation.
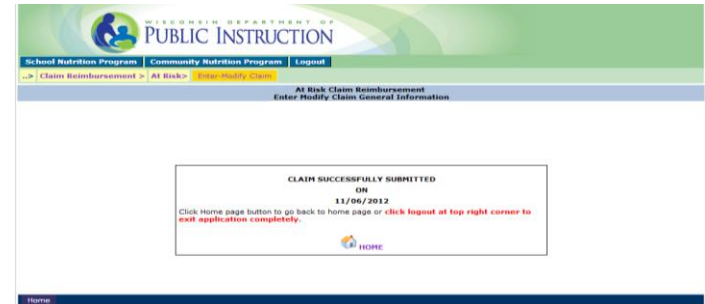
View and Print Claims

View and/or print claims after they have been submitted to DPI via the 'Print-View Claim' Menu.

To get to the **'Print-View Claim'** screen, click on the 'Home' button and then select:
1. Community Nutrition Program (blue heading)
2. Claim Reimbursement
3. At Risk or Emergency Shelter
4. Print-View Claim

Printing a Claim:
1. Select 'Claim Month' and 'Year' from the drop-down box.
2. Click 'Search.'

If the claim is found for the given criteria, the claim and the date the claim was submitted will appear. Click on 'New (paid)' link under the 'Claim Type' to view or print the claim information. If a claim is not found for the given criteria, a box will not appear under 'Claim Type' and a message will appear that no claim is found.
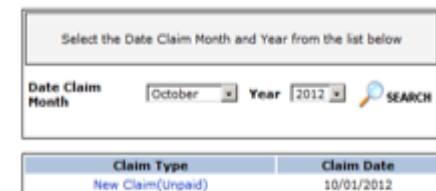
Amending Claims

Claims that have not been processed by DPI must be amended online. After a claim has been processed by DPI it CANNOT be amended online. Processing of claims is completed, in most cases, on Tuesday mornings.

Amending Claim Prior to DPI Processing: Follow the steps to enter a claim that begin on page five of this manual. The unprocessed claim will be available for selection.

Amending Claim After DPI Processed Claim:
1. Print the claim by following directions in the 'View and Print Claims' section on the previous page.
2. Draw a line through any item that must be changed (e.g., number of meals, average daily attendance) and write in correct number(s).
3. Sign, date and email a scanned copy to cntfiscal@dpi.wi.gov.

Contacts

If you do not know your password or wish to request a new one, or if you need assistance completing the claim online, contact:

Primary Contact: Jacque Darrow at 608-267-9134; Jacqueline.darrow@dpi.wi.gov
Secondary Contact: Deborah Mann at 608-266-6856; Deborah.mann@dpi.wi.gov

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1. **mail:**
   U.S. Department of Agriculture
   Office of the Assistant Secretary for Civil Rights
   1400 Independence Avenue, SW
   Washington, D.C. 20250-9410; or
2. **fax:**
   (833) 256-1665 or (202) 690-7442; or
3. **email:**
   program.intake@usda.gov

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