Summer Food Service Program Reimbursement Claim (PI-1494) Instructions (REV 11/19)

General Guidelines

- SFSP claims should be submitted online, unless otherwise instructed by a DPI.
- When a paper claim is requested, use the PI-1494 SFSP Parent Reimbursement Claim form. This may also be used to consolidate meal count data prior to entry online.
- The SFSP claim form (PI-1494), instructions and online claim manual can be found at: <u>https://dpi.wi.gov/community-nutrition/sfsp/claiming-reimbursement</u>.
- Sponsors of all types of sites are permitted to combine claims:
 - o for 10 operating days or less in their initial month of operations with the claim for the subsequent month;
 - o for 10 operating days or less in their final month of operations with the claim for the preceding month; or
 - for 3 **consecutive** months, as long as this combined claim only includes 10 operating days or less from each of the first and last months' of program operations.
- Claims submitted more than 60 days after the end of the claiming month cannot be paid unless a one-time exemption is approved by DPI. PLEASE NOTE: If the final month of operation has less than 10 days of operation the claim must be submitted within 60 days of the last day of operation.
- Claims may only be submitted for meal types that have been approved within the SFSP application for the specific site locations, meet all Program requirements and for which proper documentation is on file.

Sponsors with Year Round Sites:

- Are permitted to combine claims only during the summer months (June, July, and August) if the requirements noted above for combining claims are met.
- Must file monthly claims when meals are served September through May.
- Should never select 'Final Claim' online or on the paper form.

Reporting 2nd Meals

Closed Enrolled, Open, Restricted Open and NYSP sites are permitted to claim for 2nd meals served to children providing all program requirements have been met. The number of 2nd meals that can be claimed is restricted to 2% of the total first meals served for that meal type. To calculate the maximum number of 2nd meals to be reimbursed, multiply the number of first meals served by 2%. Use normal rounding procedures to determine the whole number to report. *If the actual number of 2nd meals is less than the calculated 2%, claim only the ACTUAL number served.*

Example: 1000 1st breakfasts served
250 2nd breakfasts served
1000 1st breakfasts x 2% = 20
Report only 20 2nd breakfasts. The additional 230 2nd breakfasts will not be reimbursed.

Instructions for PI-1494 Summer Food Service Program Parent Reimbursement Claim

I. GENERAL INFORMATION

Fill in your 6 digit AGENCY CODE (can be found on the Application approval letter), NAME OF SPONSORING AGENCY, TELEPHONE NUMBER (of the person that can answer claim questions), indicate if the claim is the FINAL claim for reimbursement, check the MONTHS and indicate the NUMBER OF DAYS of operation in each month that the claim covers.

II. CERTIFICATION

The Authorized Representative or person designated to sign per the approved SFSP Sponsor Application (PI-1482) must sign the claim form if submitting a paper copy.

III. PARTICIPATION BY TYPE OF SITE—report site detail for non-camp sites only: Closed Enrolled, Open, Restricted Open and NYSP

COLUMNS 1-7

1. SITE CODE: Enter the site code; the site code is listed at the top of each site application.

- 2. NAME OF SITE: Enter the name of the site. This should correspond with the name approved on the site application.
- **3.** DAYS OF SERVICE: Report the number of days that meals were served at that site during the claim period. Use the most days when there is a difference between types of meals.

Example: Breakfast was served 10 days out of the month and lunch was served 8 days. Report 10 days as the number of days that meals were served.

- 4. BREAKFASTS:
 - 1st Meals—Report the total number of first meals served to eligible children during the claim period at that site.
 - 2nd Meals—Report the total number of second meals served to eligible children during the claim period. If the total number of second meals served exceeds 2% of the total first meals served, then report only the maximum number that may be reimbursed (which is 2% of the total first meals served).

5. LUNCHES:

- 1st Meals—Report the total number of first meals served to eligible children during the claim period.
- 2nd Meals—Report the total number of second meals served to eligible children during the claim period. If the total number of second meals served exceeds 2% of the total first meals served, then report only the maximum number that may be reimbursed (which is 2% of the total first meals served).
- 6. SUPPERS:
 - 1st Meals—Report the total number of first meals served to eligible children during the claim period.
 - 2nd Meals—Report the total number of second meals served to eligible children during the claim period. If the total number of second meals served exceeds 2% of the total first meals served; then report only the maximum number that may be reimbursed.
- 7. SUPPLEMENTS (SNACKS):
 - 1st Meals—Report the total number of first meals served to eligible children during the claim period.
 - 2nd Meals—Report the total number of second meals served to eligible children during the claim period. If the total number of second meals served exceeds 2% of the total first meals served, then report only the maximum number that may be reimbursed (which is 2% of the total first meals served).

IV. PARTICIPATION BY TYPE OF SITE— report site detail for **camp sites only**.

If the sponsoring agency has more than one camp site, duplicate page 2 of PI-1494 and complete part IV. for each camp site. Enter the **four**-digit Site Agency Code for each camp site. You can find this site code(s) on the Application/Agreement approval letter and at the top of each approved camp site application.

COLUMN 1-10

- 1. BEGINNING DATE: Provide the beginning date for each session. A camping session is defined by the group of children in attendance for a designated period of time. When this group of children changes, another session begins.
- 2. ENDING DATE: Provide the ending date for each session.
- 3. TOTAL DAYS OF SERVICE: Report the number of days that meals were served during the claim period for each session. Use the most days when there is a difference between types of meals.

Example: Lunch was served 10 days out of the session and breakfast was served 9 days. Report 10 days as the number of days that meals were served.

- 4. AVERAGE DAILY ATTENDANCE: Report the average daily attendance (ADA) of children for each session during the claim period.
 - a. Identify each individual session's primary meal service (i.e. meal service with highest total number meals served) during the claim period;

b. Divide the total number of meals served for the session's primary meal service by the number of operating days for that session, for that claim period, to obtain the session's ADA. Round up.

	Number of Operating Days during Claim Period	Number of Breakfast Served	Number of Lunches Served	Number of Supper Served	Number of Snacks Served	ADA
Session 1	7	540	630*	630	0	90
Session 2	7	552	644*	643	92	92
Session 3	5	179	200	225*	44	45

Example for Sponsor with Camp Sites – Report by Session (No Total for Site)

*Primary meal service

5. ENROLLMENT INFORMATION:

- Report the total number of children enrolled for each session.
- Report the number of children determined to be "needy" for each session.

NUMBER OF MEALS SERVED TO ALL CHILDREN

- 6. BREAKFASTS:
 - Report the total number of breakfasts served to **all** children for each session. Camps cannot claim 2nd meals that may be served.
- 7. LUNCHES:
 - Report the total number of lunches served to **all** children for each session. Camps cannot claim 2nd meals that may be served.
- 8. SUPPERS:
 - Report the total number of suppers served to **all** children for each session. Camps cannot claim 2nd meals that may be served.

9. SUPPLEMENTS (SNACKS):

• Report the total number of supplements served to **all** children for each session. Camps cannot claim 2nd meals that may be served.