



Child and Adult Care Food Program (CACFP) Online Claim Manual for Child Care, Adult Care & Outside School Hours Programs



Wisconsin Department of Public Instruction (DPI)/Community Nutrition Team

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About Submitting Monthly CACFP Claims and Deadlines

- All claims must be submitted electronically by accessing DPI [Wisconsin Child Nutrition Program Online Services](#).
- 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 children.
- Processing of submitted claims occurs each Tuesday morning, unless that day is a holiday, in which case the processing would happen the following day. Payment processing does not occur the last two weeks of June and the last two weeks of December so that DPI's Business Office can do fiscal-and year-end closeouts.
- You may only submit one claim for each Child Nutrition Program per processing period.
- All agencies will receive their reimbursement payment via electronic deposit through [AIDS Banking](#).

Deadlines

Agencies have 60 days from the last day of the claiming month to submit claims. Below is the calendar of claim submitting deadlines. 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)

Late Claims

USDA requires the DPI to deny claims submitted more than 60 days after the end of the claiming month, but DPI is allowed to approve one exception per 36-month period for all child nutrition programs, which includes the Child and Adult Care Food Program Adult Day Care, At-Risk Afterschool Meals, Child Care, and Emergency Shelters. An exception for any of these programs would count as the agency's one-time exception, and would require manual claim submission.

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 has 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



Returning to Previous Pages:

- Click on one of the links 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.



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.



Logging into the Claim System

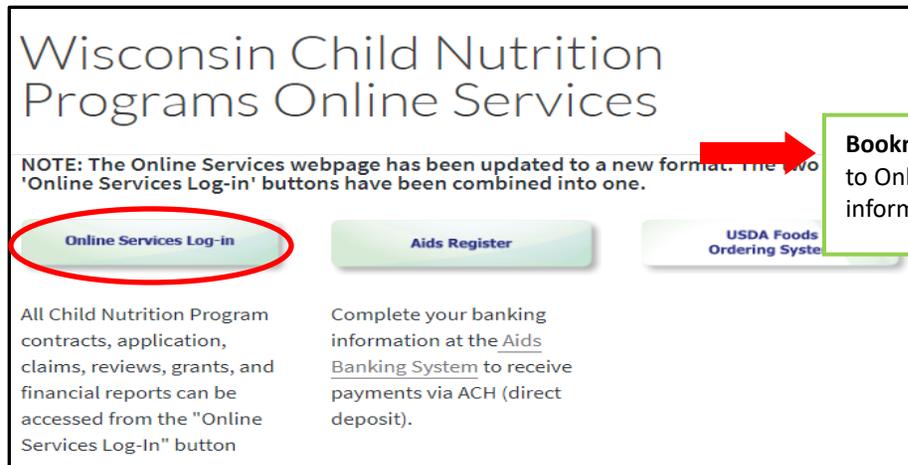
The use of Google Chrome is highly recommended.

1. Go to the **Wisconsin Child Nutrition Programs** webpage
<https://dpi.wi.gov/nutrition>. Click on the 'Online Services' link.

This will take you to the **Wisconsin Child Nutrition Programs Online Services** website: <https://dpi.wi.gov/nutrition/online-services>. Bookmark this page as a favorite.



2. Click on 'Online Services Log-in'.



Bookmark this page for future easy access to Online Services and to receive important information regarding contracts and claims.

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

If you have misplaced your password or to request a new password, contact , Jacque Jordee at 608-267-9134 as a primary contact or if not available, Najat Shorette at 608-266-6856. *Note: Passwords should be changed when the Authorized Representative or person authorized to submit a claim has left the agency.*

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



Logging into the Claim System (continued)

4. From the Main menu, select 'Community Nutrition Program'



5. From the Community Nutrition Programs menu, select 'Claim Reimbursement'



6. From the Claim Reimbursement menu, select 'Child and Adult Care Food Program'



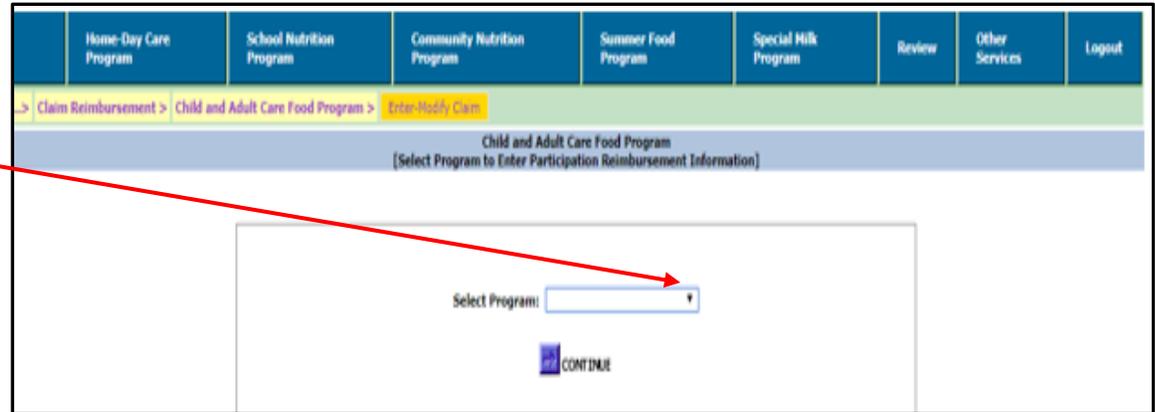
7. Select 'Enter-Modify Claim'
(This button is used to submit a new claim or to modify the claim prior to DPI processing it)



Select Program to Enter Participant Reimbursement Information

Select Program through use of drop down box (Click on the arrow and highlight the agency type):

- Child Care Institution (CCI)
- Adult Day Care (ADC)



The screenshot shows a navigation menu at the top with options: Home-Day Care Program, School Nutrition Program, Community Nutrition Program, Summer Food Program, Special Milk Program, Review, Other Services, and Logout. Below the menu is a breadcrumb trail: Claim Reimbursement > Child and Adult Care Food Program > Enter-Modify Claim. The main heading is "Child and Adult Care Food Program [Select Program to Enter Participation Reimbursement Information]". A "Select Program:" dropdown menu is visible, with a red arrow pointing to the downward arrow icon. Below the dropdown is a "CONTINUE" button.

Click 'Continue'



The screenshot shows the same interface as above, but with "Child Care Institution (CCI)" selected in the dropdown menu. The "CONTINUE" button is highlighted with a red rectangle.

Participant Reimbursement Information – Parent Form

Enter total data for all sites:

- **Program:** This is populated from a previous screen.
- **Claim Date:** Indicate the claiming month and year using the drop-down boxes. Be sure to enter the CLAIM month, NOT the month you are completing the claim in.
- **Non-needy, Reduced and Free Category:** Enter the total number of non-needy, reduced and free participants for all sites claiming.

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

- **Sponsoring organizations** - the numbers entered for each category on the parent form must equal the sum of the numbers entered for each category for all sites on the site forms.
- **Number of days of service:** Enter the total days in the month the site was open and meals were served.
 - If the sites differed in the total days of service, list the greatest number for the days of service.

Click 'Continue'

Child Care Food Program > Enter-Modify Claim	
Child and Adult Care Food Program [Participation Reimbursement Information - Parent Form]	
Program:	Child Care Institution (CCI) ▼
Claim Date:	Month March ▼ Year 2018 ▼
	*Do NOT use commas while entering numbers.
Non-needy Category:	<input type="text"/>
Reduced Category:	<input type="text"/>
Free Category:	<input type="text"/>
Number of Days of Service:	<input type="text"/>
	 CONTINUE

List of Reimbursable Sites

Claim data must be submitted for each site claiming for the month.

The 'List of Reimbursable Sites' chart shows the site(s) your Agency is **approved** for to claim reimbursement for the type of program and claim date previously selected.

- Independent centers will see one line listing its one site
- Sponsoring organizations will see two or more lines listing all sites

The Status symbol key:

Status:	
	Site claim information submitted by agency.
	Site claim information not submitted by agency.

**Child and Adult Care Food Program (CACFP)
List of Reimbursable Sites**

Listed below is/are site(s) valid for claim reimbursement under the date claim and program selected. Select the site by clicking site number and provide/update participation information. Total sites enrollment must match total enrollment submitted on the parent claim for the claim to be submitted to DPI for processing.

Site No.	Site Name	Type of Site	Status
1828	Menomonie Day Care	Center-Child Care Inst. Day Ca	
1829	Menomonie Day Care Inc #2	Center-Child Care Inst. Day Ca	

Parent Total Enrollment	Site Total Enrollment	Claim Status
128	128	Complete

 CONTINUE

Status:

 Site claim information submitted by agency.

 Site claim information not submitted by agency.

Click on the **Site No.** to enter information for each site on the '**Participation Reimbursement Information – Site Form**'.

- If a site did not participate during the claiming month, do not enter any information for that site.
- If a site is not listed on this page, you will need to contact your Nutrition Program Consultant.

Participation Reimbursement Information – Site Form

Enter data for the selected site:

- **Program:** This is populated from a previous screen.
- **Claim Date:** This is populated from a previous screen.
- **Non-needy, Reduced and Free Category:** Enter the number of non-needy, reduced and free participants for this site.

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

- **Sponsoring organizations** - the numbers entered for each category on each site form must equal the sum of the numbers entered for each category on the parent form.
- **Total Number of Enrolled Children:** Enter the total number of 'Non-Needy', 'Reduced Price' and 'Free' participants for this site.
- **Number of Days of Service:** Enter the total days in the month this site was open and meals were served.
- **Average Daily Attendance:** Enter the average daily attendance for the claiming month for this site. This must be a rounded up to a whole number, no decimal point.
- **Breakfast, AM Snack, Lunch, PM Snack, Dinner, and Additional Snack:** Enter the total meal count number for each meal your agency is approved to claim at this site.
Enter '0' (zeros) in the fields that do not apply. Do NOT use commas or decimal points when entering numbers.

Click 'Save'.

Child and Adult Care Food Program [Participation Reimbursement Information - Site Form]	
Program:	Child Care Institution (CCI)
Claim Date:	September, 2008
<small>*Do NOT use commas while entering numbers.</small>	
Non-Needy:	
Reduced Price:	
Free:	
Total Number of Enrolled Children:	
Number of Days of Service:	
Average Daily Attendance:	
Breakfasts:	
AM Snack:	
Lunches:	
PM Snack:	
Suppers:	
Additional Snack:	
<small>Optional for Extra Lunch/Supper</small>	
Lanches 2nd:	
Supper 2nd:	
<input type="button" value="SAVE"/> <input type="button" value="DELETE"/>	

[\[Parent Form\]](#) [\[Site List\]](#)

Participation Reimbursement Information – Site Form (continued)

This will take you back to the 'List of Reimbursable Sites' page. Under 'Claim Status' it will say **Complete**.

If you are a sponsoring organization, this page will continue to appear until information is entered for each site. If a site is not claiming, do not enter any information for that site. After entering all site information, click **Continue**.

Home-Day Care	School Nutrition Program	Community Nutrition Program	Summer Food Program	Logout						
Home Enter-Modify Claim										
Child and Adult Care Food Program (CACFP) List of Reimbursable Sites										
176803 - Menomonie Day Care Inc										
Listed below is/are site(s) valid for claim reimbursement under the date claim and program selected. Select the site by clicking site number and provide/update participation information. Total sites enrollment must match total enrollment submitted on the parent claim for the claim to be submitted to DPI for processing.										
Site No.	Site Name	Type of Site	Status							
1828	Menomonie Day Care	Center-Child Care Inst. Day Ca								
1829	Menomonie Day Care Inc #2	Center-Child Care Inst. Day Ca								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: left; font-weight: bold; font-size: small;">Parent Total Enrollment:</td> <td style="text-align: center;">128</td> <td style="text-align: left; font-weight: bold; font-size: small;">Site Total Enrollment:</td> <td style="text-align: center;">56</td> <td style="text-align: left; font-weight: bold; font-size: small;">Claim Status:</td> <td style="text-align: center; color: red;">InComplete</td> </tr> </table>					Parent Total Enrollment:	128	Site Total Enrollment:	56	Claim Status:	InComplete
Parent Total Enrollment:	128	Site Total Enrollment:	56	Claim Status:	InComplete					
Status: Site claim information submitted by agency. Site claim information not submitted by agency.										

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.**

Program	Child Care Food Program (CCI)
Claim Date:	03/01/2018
Non-needy Category:	2
Reduced Category:	1
Free Category:	47
Total Number of Enrolled Children:	50
Number of Days of Service:	20

Total Reimbursable Meals Summary Based on Site(s) Participation Information								
Total Breakfasts	Total AM Snack	Total Lunches	Total PM Snack	Total Suppers	Total Additional Snack	Total Lunches 2nd	Total Supper 2nd	Total Meals
379	233	446	610	496	0	0	0	2,164

Site Participation Detail Information														
Site No.	Non-Needy	Reduced Price	Free	Total Enrollment	Days Operating	ADA	Breakfasts	AM Snack	Lunches	Lunches 2nd	PM Snack	Suppers	Supper 2nd	Additional Snack
13711	2	1	47	50	20	39	379	233	446	0	610	496	0	0

[CERTIFICATION]

I HEREBY CERTIFY to the best of my knowledge that this claim is true, correct, and in accordance with the terms of existing agreement, that records are available to support this claim, and that payment has not been received. Meal counts have been reviewed and analyzed to ensure accuracy. I acknowledge that failure to submit accurate claims will result in recovery of an over claim and may result in the withholding of payments, suspension, or termination of the program. I understand that the information on this claim is being given in connection with the receipt of federal funds and that deliberate misrepresentation or withholding of information may result in prosecution under applicable State and Federal statutes.

Preparer Name and Telephone No.:

[\[Parent Form\]](#) [\[Site List\]](#)

8. 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, AS WELL AS THE SCREEN SHOWING THE REIMBURSABLE \$ AMOUNT FOR YOUR RECORDS.** Directions for printing the screen that show what was submitted along with the reimbursable \$ amount follow on the next page. Keep copies of these two screens on file along with your handwritten claim and all CACFP supporting documentation.

Community and School Nutrition Programs					
	Home-Day Care	School Nutrition Program	<u>Community Nutrition Program</u>	Summer Food Program	Logout
Home	Enter-Modify Claim				
Your Child and Adult Care Food Program claim dated: 2008-09-01 was successfully submitted to DPI on Wed Nov 12 09:25:43 CST 2008. For your record and to see the Reimbursable \$ amount, you can print a copy of the recently submitted claim using 'View-Print' option under Community Nutrition Program.					

Viewing and Printing Claims

You can view and/or print claim(s) after they has been submitted to DPI via the 'View-Print' Menu.

1. To obtain the **View/Print Screen**, select
 - a. Home,
 - b. Community Nutrition Program,
 - c. Claim Reimbursement,
 - d. Child and Adult Care Food Program,
 - e. View/Print Claim.

This screenshot shows the top navigation bar with buttons for Home-Day Care, School Nutrition Program, Community Nutrition Program, Summer Food Program, Special Milk Program, Other Services, and Logout. Below the navigation bar, the breadcrumb trail is Home > Child and Adult Care Food Program > Enter-Modify Claim. The main content area is titled 'Child and Adult Care Food Program' with a subtitle '[Select Program to Enter Participation Reimbursement Information]'. It shows the organization '446806 - YMCA of the Fox Cities Inc' and a 'Select Program:' dropdown menu. The dropdown menu is open, showing 'Child Care Institution (CCI)' and 'Adult Day Care (ADC)' as options.

Printing a Claim:

1. Select the Program (CCI or ADC) from the drop down list box,
2. Select Claim Month and Year from the drop down list box, and
3. Click the 'Search' button.

If the claim is found for the given criteria, the claim and the date the claim was submitted will appear. Click on the words 'New (paid)' under the 'Claim Type' link to view or print the detailed 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.

This screenshot shows the search results page. The breadcrumb trail is Home > Child and Adult Care Food Program > View-Print Claim. The main content area is titled 'Child and Adult Care Food Program (CACFP)' with a subtitle '[View Participation Monthly Reimbursement Information]'. It shows the organization '446806 - YMCA of the Fox Cities Inc'. Below this, there are fields for 'Select Program:' (dropdown), 'Date Claim Month:' (dropdown), and 'Year:' (dropdown). A 'SEARCH' button is visible. Below the search fields, there is a link '[Click Claim Type to View Claim]' and two buttons: 'Claim Type' and 'Date Submitted'.

This screenshot shows the search results page with a table of claims. The breadcrumb trail is Home > Child and Adult Care Food Program > View-Print Claim. The main content area is titled 'Child and Adult Care Food Program (CACFP)' with a subtitle '[View Participation Monthly Reimbursement Information]'. It shows the organization '446806 - YMCA of the Fox Cities Inc'. Below this, there are fields for 'Select Program:' (dropdown) set to 'Child Care Institution (CCI)', 'Date Claim Month:' (dropdown) set to 'January', and 'Year:' (dropdown) set to '2012'. A 'SEARCH' button is visible. Below the search fields, there is a link '[Click Claim Type to View Claim]' and a table with two columns: 'Claim Type' and 'Date Submitted'.

Claim Type	Date Submitted
New (Paid)	02/14/2012
	05/18/2012

Modifying a Claim

After entering a claim for reimbursement, agencies may modify their claim online until the time the claim is processed by DPI. Processing of claims at DPI is completed, in most cases, on Tuesday mornings. After a claim has been processed by DPI it CANNOT be modified online.

Modifying Online: Required method of modifying a claim that has NOT been processed. To modify online, simply follow the steps for entering a claim that begin on page 4 of this manual. The unprocessed claim will be available for selection on the 'Participation Reimbursement Information – Parent Form' screen.

Modifying After Claim has been Processed: This method is required once the claim has been processed by DPI. For modifying a claim that has already been processed, print the claim by following directions in the *CACFP Internet Claim Manual* to 'View/Print Claim'. Draw a line through any item that needs to be changed (e.g., number of meals, average daily attendance) and write in the correct number(s). Sign, date, and email a scanned copy to Najat.shorette@dpi.wi.gov or fax to Federal Aids and Audit section at 608-267-9207.

Contacts

If you have misplaced your password or wish to request a new password, please contact:

Primary Contact: Jacque Jordee at 608-267-9134; jacqueline.jordee@dpi.wi.gov

Secondary Contact: Najat Shorette at 608-266-6856; Najat.shorette@dpi.wi.gov

Fiscal Fax: 608-267-9207

Jacque Jordee and Najat Shorette can also assist you in completing the claim online if you are experiencing problems.