

Seamless Summer Option (SSO)

Claiming Instructions



Child Nutrition Management System

PROGRAM ▾

CLAIMS ▾

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LOG OFF ▾

School Food Au

- Claims Interface
- Claim Profile
- Late Claims
- Payments
- SFA View/New**

Information

School Food Authority: **Example CSD**
LEA Code: 000000000000
Payee Name: **Example CSD**
Agency Type: **Public School**
Team: **Team 5**
Contact:
County: **Example**
District: **Example CSD**
Federal ID Number: 00000000
Municipality Code: 000000000000
OSC Vendor Id: 000000000 expires on 01/09/21
DUNS Number:

[SAM Website](#)

To begin claiming meals, SFA's will log into CNMS and follow the usual steps to file a new claim for breakfast or lunch.



Child Nutrition Management System

Example CSD

Enter all criteria to query Claims

School Year:

Program Name:

View/Adjust or New:



Use the dropdown to choose the program you will be claiming for. The claiming steps will be the same for both breakfast and lunch.



Select "New" to make a claim.
Select "View/Adjust" for previously made claims.

Select when information has been entered.



Child Nutrition Management System

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RA Claims								
Recipients		Included Below					Additional Information	
Name	LEA Code	Free	Reduced	Paid	Emergency	Total	Hold Info	Prov. Info
Example High School	000000000000						New	

SFA Claim Roll-up

To modify, select an RA above. The changes made to the RA will then be incorporated in the SFA roll-up claim below.
[Back to SFA Annual Information](#)



Child Nutrition Management System

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RA Claims								
Recipients		Included Below					Additional Information	
Name	LEA Code	Free	Reduced	Paid	Emergency	Total	Hold Info	Prov. Info
Example High School	0000000000						New	
Example Middle School	0000000000						New	
Example Elementary School	0000000000						New	

SFA Claim Roll-up

To modify, select an RA above. The changes made to the RA will then be incorporated in the SFA roll-up claim below.
[Back to SFA Annual Information](#)

Select 'New' for the RA you are creating the claim for.

If an SFA has multiple RA locations, they will each be listed here, and the claim information will need to be entered for each of these individually.

This can be done by repeating the upcoming steps for each RA being claimed.



Example CSD
000000000000

Select a Claim Period for the 2021-22 Breakfast Program

Example High School
000000000000



- September
- October
- November
- December
- January
- February
- March
- April
- May
- June

* Indicates that the claim is under a lockdown period. Click [here](#) for more information

The following periods are outside the program operating dates:

- July
- August

Return

Select the claim month
Only the months available to claim for will have the option to select.

Claiming SSO for RAs that normally claim under Standard Counting and Claiming

Closed Enrolled Site

NYS ED Child Nutrition Management System

PROGRAM > CLAIMS > REPORTS > ADMIN > LOG OFF >

Example CSD
000000000000

RA Claim Entry
2021-22 Breakfast
Example High School
000000000000

[Return to SFA claim](#)

Enter values for new record

Claim Month: Sep

Program Enrollment: Days of Service:

Free Elig: Reduced Elig:

Free Meals: Reduced Meals:

Paid Meals: Emergency DOS:

Emergency Meals: Total Meals:

[Return to SFA claim](#)

Open Site

NYS ED Child Nutrition Management System

PROGRAM > CLAIMS > REPORTS > ADMIN > LOG OFF >

Example CSD
000000000000

RA Claim Entry
2021-22 Breakfast
Example High School
000000000000

[Return to SFA claim](#)

Enter values for new record

Claim Month: Sep

Program Enrollment: Days of Service:

Free Elig: Reduced Elig:

Free Meals: Reduced Meals:

Paid Meals: Emergency DOS:

Emergency Meals: Total Meals:

[Return to SFA claim](#)

- For Closed Enrolled sites, enter the enrollment number into the Program Enrollment box.
 - Enter the Days of Service for the month being claimed.
- Under SSO all meals will be free: Enter the total number of meals being claimed into the Free Meals box, and the Total Meals box.

- For Open sites, leave the Program Enrollment box blank. This will be calculated based on Free Meals served divided by Days of Service.
 - Enter the Days of Service for the month being claimed.
- Under SSO all meals will be free: Enter the total number of meals being claimed into the Free Meals box, and the Total Meals box.

Claiming SSO for RAs that normally claim under Community Eligibility Provision or Provision 2

Closed Enrollment Site

NYS ED Child Nutrition Management System

PROGRAM CLAIMS REPORTS ADMIN LOG OFF

Example CSD
000000000000

RA Claim Entry
2021-22 Lunch
Example High School
000000000000

[Return to SFA claim](#)

Enter values for new record

Claim Period:

Program Enrollment: Days of Service:

Emergency Meals: Emergency DOS:

Total Meals:

[Return to SFA claim](#)

Open Site

NYS ED Child Nutrition Management System

PROGRAM CLAIMS REPORTS ADMIN LOG OFF

Example CSD
000000000000

RA Claim Entry
2021-22 Lunch
Example High School
000000000000

[Return to SFA claim](#)

Enter values for new record

Claim Period:

Program Enrollment: Days of Service:

Emergency Meals: Emergency DOS:

Total Meals:

[Return to SFA claim](#)

- For Closed Enrolled sites, enter the enrollment number into the Program Enrollment box.
 - Enter the Days of Service for the month being claimed.
- Under SSO and CEP all meals will be free: Enter the total number of meals being claimed into the Total Meals box.

- For Open site, leave the Program Enrollment box blank. This will be calculated based on Free Meals served divided by Days of Service.
 - Enter the Days of Service for the month being claimed.
- Under SSO and CEP all meals will be free: Enter the total number of meals being claimed into the Total Meals box.



Child Nutrition Management System

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**Example CSD
000000000000
September 2021 Breakfast**

RA Claims								
Recipients		Included Below				Additional Information		
Name	LEA Code	Freq	Reduced	Paid	Emergency	Total	Hold Info	Prov. Info
Example High School	000000000000					None		
Example Middle School	000000000000					None		
Example Elementary School	000000000000					None		

SFA Claim Roll-up

To modify, select an RA above. The changes made to the RA will then be incorporated in the SFA roll-up claim below.

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Enter values for new record

WORKING

Insert

Clear

Once all the information has been entered into the system, the claim can be submitted.



Choose **Edit** if changes need to be made to the claim after information has been entered.

Example CSD
000000000000
September 2021 Breakfast

Submit Claim

RA Claims									
Recipients		Included Below					Additional Information		
Name	LEA Code	Free	Reduced	Paid	Emergency	Total	Hold Info	Prov. Info	
Example High School	000000000000	2612	0	0	0	2612			Edit

SFA Claim Roll-up

To modify, select an RA above. The changes made to the RA will then be incorporated in the SFA roll-up claim below.

Claim Month	Sep	Status	WORKING
Entered	10/28/21	Days of Service	18
Enrollment	764	Reduced Elig	0
Free Elig	0	Reduced Meals	0
Free Meals	2612	Emergency DOS	0
Paid Meals	0	Total Meals	2612
Emergency Meals	0		
Submitted	<input type="text"/>		

Ensure number and information for claim are correct.

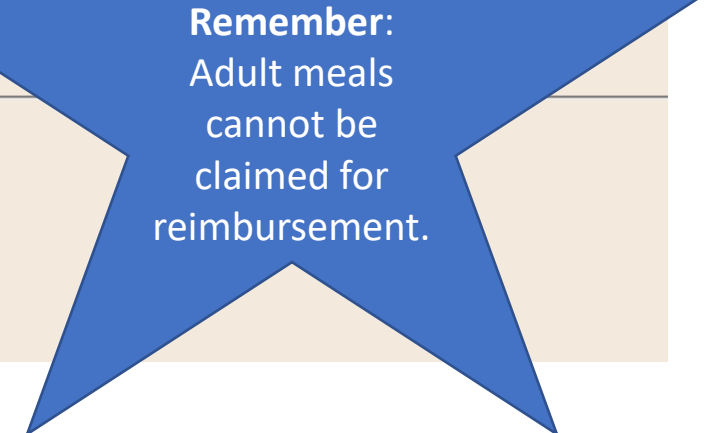
SFA Claim History

Claim	Created	Free	Reduced	Paid	Emergency	Total	Status	Submitted
Orig	28-OCT-21	2612	0	0	0	2612	WORKING	
Total	28-OCT-21	2612	0	0	0	2612	WORKING	

[Back to 2020-21 Breakfast claims](#) [Back to 2020-21 Annual Detail](#)

Date of claim submission will display in this space when claim has been submitted.

The empty box shows this claim has not yet been submitted.



Once all the information has been entered into the system for each RA, the claim can be submitted. Choose **Submit Claim** to submit the information for monthly reimbursement.

Example CSD
000000000000
September 2021 Breakfast

Payment Info

RA Claims									
Recipients		Included Below					Additional Information		
Name	LEA Code	Free	Reduced	Paid	Emergency	Total	Hold Info	Prov. Info	
Example High School	000000000000	2612	0	0	0	2612	View		

SFA Claim Roll-up

To modify, select on RA above. The changes made to the RA will then be incorporated in the SFA roll-up claim below.

Success!
Row updated

Claim Month	Sep	Status	SUBMIT
Entered	10/28/21	Days of Service	18
Enrollment	764	Reduced Elig	0
Free Elig	0	Emergency DOS	0
Free Meals	2612	Total Meals	2612
Paid Meals	0		
Emergency Meals	0		
Submitted	10/28/21		

SFA Claim History

Claim	Created	Free	Reduced	Paid	Emergency	Total	Status	Submitted
Orig	28-OCT-21	2612	0	0	0	2612	SUBMIT	28-OCT-21
Total	28-OCT-21	2612	0	0	0	2612	SUBMIT	28-OCT-21

Back to 2020-21 Breakfast claims Back to 2020-21 Annual Detail

Choose **Payment Info** to view the information on the payment for the monthly claim that was submitted. This will come up in a separate window as seen below.

Look for the green **Success!** and Submitted date on the screen after submitting to know the claim has gone through successfully.

2021-22 Breakfast Claim
Example CSD

Payment Information

Invoice Number	Entry Date	Invoice Description	Transaction Amount	Payment Amount	Amount Paid	Balance	Check Number	Voucher Number	Process Date	Posted Date	Paid Date	Status
Sep21-2338591-FBR	10/28/21	Federal Breakfast	\$5903	\$5903		\$0						Hold
Sep21-2338592-SBR	10/28/21	State Breakfast	\$265	\$265		\$0						Hold

Close Window

**Please contact your Child Nutrition
Representative if you have any
questions.**

<http://www.cn.nysed.gov/contact>
