How to Submit a Claim Standard Counting & Claiming Breakfast / Lunch / Snack

Navigating CNMS Monthly Reimbursement Claims as a Standard Counting and Claiming School

Step One: Access CNMS

Go to Child Nutrition Knowledge Center (<u>www.cn.nysed.gov</u>)

NYSED.GOV	Board of Regents	News	Index A-Z	
		2	New York State EDUCATION DEPARTMENT CHILD NUTRITION KNOWLEDGE CENTER	CN MS CHILD NUTRITION Management System Log In

Log into the Child Nutrition Management System (CNMS)

Sign in https://porta	ald.nysed.gov			-
Username	cnnysed	Child Nutrition Management System		
Password			Welcome to CNMS	
-	Sign in Cancel			-

Step Two: Access New Claim Page



Enter all criteria to qu	iery Claims	
School Year:	2023-24 🗸	Select: School Year
Program Name:	Lunch 🗸	
View/Adjust or New:	New 🗸	Program, and "New"
The way		
	Click "Find"	•

Step Three: Start a New Claim

-								
Recipien Name Elementary School	ts LEA Code 8888888888 8888888888888888888888888	RA Claims Included Below Free Reduced Paid Summer 22 S	SO Total	Addition Hold In	al Information fo Prov. Info		Cli to Re (R/	ck "N the A cipieı 4)
 September 2023 October 2023 November 2023 November 2023 November 2023 2024 	February 24 March 2024 April 2024 May 2024 June 2024 m is under a loc	24 kdown period. Click here for more inform	ation		Seleo to Fi	ct tł le tł	ne M he Cl	lonth Iaim

Click "New" Next to the Appropriate Recipient Agency (RA)

Step Four: Insert Monthly Claim Information

City CSD			
8888888888			
RA Claim Entry 2023-24 Lunch Elementary Sch 8888888888 Return to SFA claim	iool		
Enter values for new	record		
Claim Month:	Nov		
Program Enrollment:	680	Days of Service:	13
Free Elig:	195	Reduced Elig:	26
Free Meals:	984	Reduced Meals:	169
Paid Meals:	2017	Total Meals:	3170
Linsert Clear Return to SFA claim			

Enter:

- └→ Program Enrollment
- → Days of Service
- → Free Elig & Reduced Elig (Eligibles)
- → Free Meals, Reduced Meals, & Paid Meals
- → Total Meals

Click "Insert"

(this will bring you back to the previous page)

Step Five: Submit the Monthly Claim

Complete and Insert New Claims for Additional RAs

RA Claims												
Recipie	nts		I	includ	led Below			Additional	Information			
Name	LEA Code	Free	Reduced	Paid	Summer 22 SSO	Total		Hold Info	Prov. Info			
Elementary School	8888888888	984	169	2017	0	3170	Edit					
High School	8888888889						New					
							1	3				

City CSD 8888888880 November 2023 Lunch



Verify All Claims are Inserted and Accurate

Click "Submit" and "OK"

portald.nysed.gov says

I certify that all information submitted herein is true and correct. Please be advised that failure to submit accurate claims may jeopardize future participation in federal and state Child Nutrition Programs, including but not limited to the assessment of fiscal sanctions and penalties and potential termination of program participation. In addition, 7 CFR 210.26 provides that, whoever embezzles, willfully misapplies, steals, or obtains by fraud any funds, assets, or property provided under this part whether received directly or indirectly from the Department, shall if such funds, assets, or property are of a value of \$100 or more, he fined



2023-24 Lunch Claims

Claim Period	Enrollment	Free	Reduced	Paid	Summer 22 SSO	Total	DOS	ADP	Summer 22 SSO DOS	Summer 22 SSO ADP	Status	Claim Profile
Nov	680	984	169	2,017	0	3,170	13	243.846	0	0	Submit	<u>View</u>
Total		984	169	2,017	0	3,170						

2023-24 Lunch Claims

Claim Period	Enrollment	Free	Reduced	Paid	Summer 22 SSO	Total	DOS	ADP	Summer 22 SSO DOS	Summer 22 SSO ADP	Status	Claim Profile
Nov	680	984	169	2,017	0	3,170	13	243.846	0	0	Working	<u>View</u>
Total		984	169	<mark>2,017</mark>	0	3,170						

Claims With a "Submit" Status are Processed for Reimbursement *Claims Displaying a "Working" Status Have Not Been Submitted*

Confirm all claims are accurate and reflect a submitted status.