

Claiming Meals Served During COVID-19 School Closures



New York State
EDUCATION DEPARTMENT
CHILD NUTRITION KNOWLEDGE CENTER

- Thank you for joining this webinar.
- There will be no audio until the presentation begins at 2:30pm.
 - The Child Nutrition Program Office is currently closed.
- You may send any questions you have to CNTRAINING@NYSED.GOV

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New York State
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Claiming Meals Served During COVID-19 School Closures

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60-Day Claim Deadline Waiver

Claim Month/Year	Original Claim Submission Deadline	Waiver Submission Deadline
January 2020	April 1	April 29
February 2020	April 29	May 30

*January & February ONLY.
If March deadlines are waived, SED will post guidance on cn.nysed.gov



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Seamless Summer Option (SSO) or Summer Food Service Program (SFSP)

- Based on the information provided on the Seamless Summer Option (SSO)/Summer Food Service Program (SFSP) COVID-19 Application
- Requested up to 2 meals to serve (breakfast, lunch, snack or dinner)
- Activation requests submitted once closed sites began serving meals

Seamless Summer Option (SSO)/Summer Food Service Program (SFSP) COVID-19 Application

School Food Authority (SFA) or SFSP Sponsor Name	Meals will be served under the following option:
SFA or SFSP Sponsor LEA Code	<input type="radio"/> SSO <input type="radio"/> SFSP
<input type="checkbox"/> Check here to include all active Recipient Agencies (RA) or SFSP Sites. If not applying for entire SFA or SFSP Sponsor, list the RA(s) or SFSP Site(s) Name(s) and LEA Code(s). Attach additional sheets, as necessary. It is the SFA's responsibility to ensure the included RA(s) or Site(s) is aware of their involvement and the plans identified below.	Meals to be offered (Check up to two):
	<input type="checkbox"/> Breakfast
	<input type="checkbox"/> Lunch
	<input type="checkbox"/> Supper (SFSP only)
	<input type="checkbox"/> Snack
Flexibility being requested (check up to two):	
<input type="checkbox"/> Non-congregate meal at service (children will not need to stay on site while meals are consumed)	
<input type="checkbox"/> Serving at closed school building	
At what point following a COVID-19 related closure would the meal service start?	
2. Describe the meal distribution method(s) to be used and how children from closed schools will be targeted.	
3. Describe how the meal distribution will target low-income children, if the school does not have 50 percent or more free or reduced price children enrolled.	
4. Describe how the SFA will communicate the availability of meals to eligible families.	
5. Describe how the SFA will accommodate students with documented special dietary needs.	
6. Describe how the SFA will ensure proper operation of the program, including (a) meal content, (b) meal quality, (c) nutrition, and (d) food safety.	
a)	
b)	
c)	
d)	
<input type="radio"/> I am agreeing to amend the Single Permanent Agreement to include SSO.	
<input type="radio"/> I am operating SFSP in accordance with the signed Single Permanent Agreement on file.	
NAME AND TITLE OF SFA REPRESENTATIVE (PRINT)	SIGNATURE OF SFA REPRESENTATIVE DATE

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Serving in Non School Locations

- Community Center
- Delivery Bus
- Fire Station
- Housing authority



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Situation	NSLP/SBP/ASP Claim Screens		SFSP Claim Screens	
	NSLP SBP ASP	SSO Emergency Meals	SFSP Meals	SFSP Emergency Meals
Served meals when school was open & served meals in the SSO when schools closed	X	X		
Served meals when school was open & served meals in the SFSP when schools closed	X			X
Served only SFSP meals when schools closed				X
Served meals when schools were open, started out serving SSO meals when schools closed, but now serving SFSP meals	X	X		X

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Emergency Claiming for SSO Meals Served During COVID-19 Closures

Enter values for new record

Claim Month:	<input type="text" value="Mar"/>	<input type="text"/>
Program Enrollment:	<input type="text"/>	Days of Service: <input type="text"/>
Free Elig:	<input type="text"/>	Reduced Elig: <input type="text"/>
Free Meals:	<input type="text"/>	Reduced Meals: <input type="text"/>
Paid Meals:	<input type="text"/>	Emergency Dos: <input type="text"/>
Emergency Meals:	<input type="text"/>	Total Meals: <input type="text"/>

- To begin claiming emergency meals, SFA's will log into CNMS and follow the usual steps to file a new claim for breakfast, lunch, and snack.
- The same claim screens are used to capture meals served while school was open AND meals served under the SSO while school was closed (emergency meals).
- All claiming screens will have additional boxes where you will enter in your total emergency meal counts for each meal service and emergency days of service. However, these boxes only allow numbers to be submitted if the Recipient Agency (RA) and programs have been activated.

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Standard Counting & Claiming Schools

NSLP/SBP-When School Was Open

Enter the highest day of enrollment of the days in operation when school was open

Enter values for new record

Claim Month:	<input type="text" value="Mar"/>	<input type="text"/>
Program Enrollment:	<input type="text"/>	Days of Service: <input type="text"/>
Free Elig:	<input type="text"/>	Reduced Elig: <input type="text"/>
Free Meals:	<input type="text"/>	Reduced Meals: <input type="text"/>
Paid Meals:	<input type="text"/>	Emergency Dos: <input type="text"/>
Emergency Meals:	<input type="text"/>	Total Meals: <input type="text"/>

Enter the number of days meals were served when school was open. Do not include days meals were served when school was closed

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Standard Counting & Claiming Schools

NSLP/SBP

**Remember,
adult meals cannot
be claimed for
reimbursement**

Enter values for new record

Claim Month:	<input type="text" value="Mar"/>	<input type="text"/>
Program Enrollment:	<input type="text" value="1"/>	Days of Service: <input type="text"/>
Free Elig:	<input type="text"/>	Reduced Elig: <input type="text"/>
Free Meals:	<input type="text"/>	Reduced Meals: <input type="text"/>
Paid Meals:	<input type="text"/>	Emergency Dos: <input type="text"/>
Emergency Meals:	<input type="text"/>	Total Meals: <input type="text"/>

Enter in the number of days emergency meals were distributed for

***Emergency DOS: Many schools served multiple days meals at the same time so here you are entering the number of days meals were intended to provide for.**

For example, if on Friday you served 3 days of meals for Fri, Sat, and Sun. This would count as 3 service days.

Community Eligibility Provision (CEP) & Provision 2 Schools

NSLP/SBP

[Return to SFA claim](#)

Enter values for new record

Claim Period:	<input type="text" value="Mar"/>	<input type="text"/>
Program Enrollment:	<input type="text" value="1"/>	Days of Service: <input type="text"/>
Emergency Meals:	<input type="text"/>	Emergency DOS: <input type="text"/>
Total Meals:	<input type="text"/>	

Afterschool Snack (Under 50%)

[Return to SFA claim](#)

Enter values for new record

Claim Month:	<input type="text" value="Mar"/>	<input type="text"/>
Program Enrollment:	<input type="text"/>	Days of Service: <input type="text"/>
Free Elig:	<input type="text"/>	Reduced Elig: <input type="text"/>
Free Snacks:	<input type="text"/>	Reduced Snacks: <input type="text"/>
Paid Snacks:	<input type="text"/>	Emergency DOS: <input type="text"/>
Emergency Snacks:	<input type="text"/>	Total Snacks: <input type="text"/>

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Afterschool Snack (Under 50%) Cont'd

[Return to SFA claim](#)

Enter values for new record

Claim Month:	<input type="text" value="Mar"/>	<input type="text"/>
Program Enrollment:	<input type="text"/>	Days of Service: <input type="text"/>
Free Elig:	<input type="text"/>	Reduced Elig: <input type="text"/>
Free Snacks:	<input type="text"/>	Reduced Snacks: <input type="text"/>
Paid Snacks:	<input type="text"/>	Emergency DOS: <input type="text"/>
Emergency Snacks:	<input type="text"/>	Total Snacks: <input type="text"/>

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Afterschool Snack Needy (over 50%)

[Return to SFA claim](#)

Enter values for new record

Claim Month:

Program Enrollment: Days of Service:

Emergency Meals: Emergency DOS:

Free Snacks:

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Emergency Claiming Instructions for SSO Meals Served During COVID 19 Closures:

All of the emergency meals will be reimbursed in the free category based on the reimbursement the SFA/RA was already receiving (severe need, over/under 60%, etc.)

If meals were already claimed for March, you must go back to assure meals were claimed correctly and make adjustments as necessary.

The preceding slides outlined the steps for properly claiming emergency meals in the Seamless Summer Option of the National School Lunch Program.

BREAKFAST

NON-SEVERE NEED	SEVERE NEED
FREE	FREE
1.84 FEDERAL	2.20 FEDERAL
.1013 STATE	.1013 STATE
1.9413 TOTAL REIMBURSEMENT	2.3013 TOTAL REIMBURSEMENT

LUNCH

UNDER 60%	UNDER 60% + PBR*	OVER 60%	OVER 60% + PBR*
FREE	FREE	FREE	FREE
3.41 FEDERAL	3.48 FEDERAL	3.43 FEDERAL	3.50 FEDERAL
.0599 STATE	.0599 STATE	.0599 STATE	.0599 STATE
3.4699 TOTAL REIMBURSEMENT	3.5399 TOTAL REIMBURSEMENT	3.4899 TOTAL REIMBURSEMENT	3.5599 TOTAL REIMBURSEMENT

Amount of 30% NYS Initiative State Subsidy for 2019-2020 SY Lunches:

- \$1.901 for each **free** and **paid** lunch meal bringing total State reimbursement to 25 cents/lunch.
- \$0.519 for every **reduced-price** lunch meal bringing the total State reimbursement rate up to 50 cents/lunch.

*Performance-based cash reimbursement, previously 6 cents, has increased to 7 cents.

AFTERSCHOOL SNACKS

FREE 0.94

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Questions- Claiming SSO

*Email CNCOVID@nysed.gov if there are any changes in operation

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Claiming SFSP Meals Served During COVID-19 School Closures

NYS ED .gov Child Nutrition Management System

PROGRAM ▾ CLAIMS ▾ REPORTS ▾ ADMIN ▾

Enter all criteria to query Claims

School Year: 2019-20 ▾

Program Name: Summer Food Service Program ▾

View/Adjust or New: New ▾

Find Clear

- Log into CNMS and from the Claims tab on the blue bar, click on View/New.
- Select School Year 2019-20 and the program name is Summer Food Service Program
- If this is the first time you are entering emergency claims, choose New.

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Select the Month You are Entering a Claim For

Child Nutrition Management System

PROGRAM • CLAIMS • REPORTS • ADMIN • LOG OFF •

[Click here to renew SAM](#)

Select a Claim Period for the 2019-20 Summer Food Service Program

- September 2019
- October 2019
- November 2019
- December 2019
- January 2020
- February 2020
- March 2020
- April 2020

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

Claims already exist for the following periods:

- July 2019
- August 2019

- Only the months that you have been approved to claim emergency meals will be available.
- Each month must be submitted separately.
- If you are also submitting meals under the SSO, or in the NSLP and SBP from when schools were open, ensure there is no overlap in days of service.

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Complete for Each Approved SFSP Site

Child Nutrition Management System

PROGRAM • CLAIMS • REPORTS • ADMIN • LOG OFF •

Mar 2019-20 Summer Food Service Program Claim

Sponsor Claim

Please use [this icon](#) to select LEA Code and Site Name

LEA Code Site Name

	Days Of Service	Meals	Seconds	Total
Breakfast	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Lunch	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Snack	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Supper	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Supplmt	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Emergency Brk	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Emergency Lunch	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Emergency Snack	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Insert?

- Click on the blue arrow and select the LEA of the site(s) where you will claim emergency meals for the month.
- Enter in the emergency days of service (DOS).
- For days of service, enter the number of days meals were intended to provide for. For example, if on Friday you served 3 days of meals for Fri, Sat, and Sun. This would count as 3 service days.
- Please note, you can only claim for the meal types in which you were approved on your COVID-19 Emergency Application.
- Scroll down to the bottom the of the screen and click the 'Insert' button

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Double check that the claim has been entered correctly and accurately consolidated .

Click the blue 'Submit Claim' button on the top of the screen.

You will see your meals in the Emergency Meals section in the Sponsor Claim Roll Up

Apr 2019-20 Summer Food Service Program Claim

[Submit Claim](#)

Sponsor Claim Roll-Up						
Meal Type	Days Of Service	Meals	Seconds	Seconds Allowed	Total	
Breakfast	0	0	0	0	0	1000
Lunch	0	0	0	0	0	1000
Snack	0	0	0	0	0	0
Supper	0	0	0	0	0	0
Supplement	0	0	0	0	0	0
Emergency Breakfast	0	0	0	0	0	1000
Emergency Lunch/Supper	0	0	0	0	0	1000
Emergency Snack	0	0	0	0	0	0

Create Date 04/16/20 Submit Date: Status:

[Update](#) [Revert](#)

Site Claims										
Sites		Included Above					Emergency			Additional Information
Name	LEA Code	Breakfast	Lunch	Supper	Snack	Supplement	Breakfast	Lunch/Supper	Snack	Hold Info
		0	0	0	0	0	1000	1000	0	

To modify, select a site. The changes made to the Site will then be incorporated in the Sponsor claim roll-up above.

[New Site Claim](#)

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Claiming Reminders



- Maintain documentation that demonstrates where meals were prepared and distributed.
- Adult meals are not claimable or reimbursable.
- If you have any questions, please reach out to your SFSP representative or email cnsfsp@nysed.gov

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2020 SFSP Reimbursement

Meal Type	Site Type	Rate	Increase from 2019
Breakfast	Rural and/or Self-Prep	\$2.3750	\$0.0775
	*Other	\$2.3300	\$0.0750
Lunch/Supper	Rural and/or Self-Prep	\$4.1525	\$0.1200
	*Other	\$4.0875	\$0.1200
Snack	Rural and/or Self-Prep	\$0.9775	\$0.0250

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Questions- Claiming SFSP

*Email CNCOVID@nysed.gov if there are any changes in operation

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Website:
CN.NYSED.GOV

Email:
cntraining@nysed.gov

