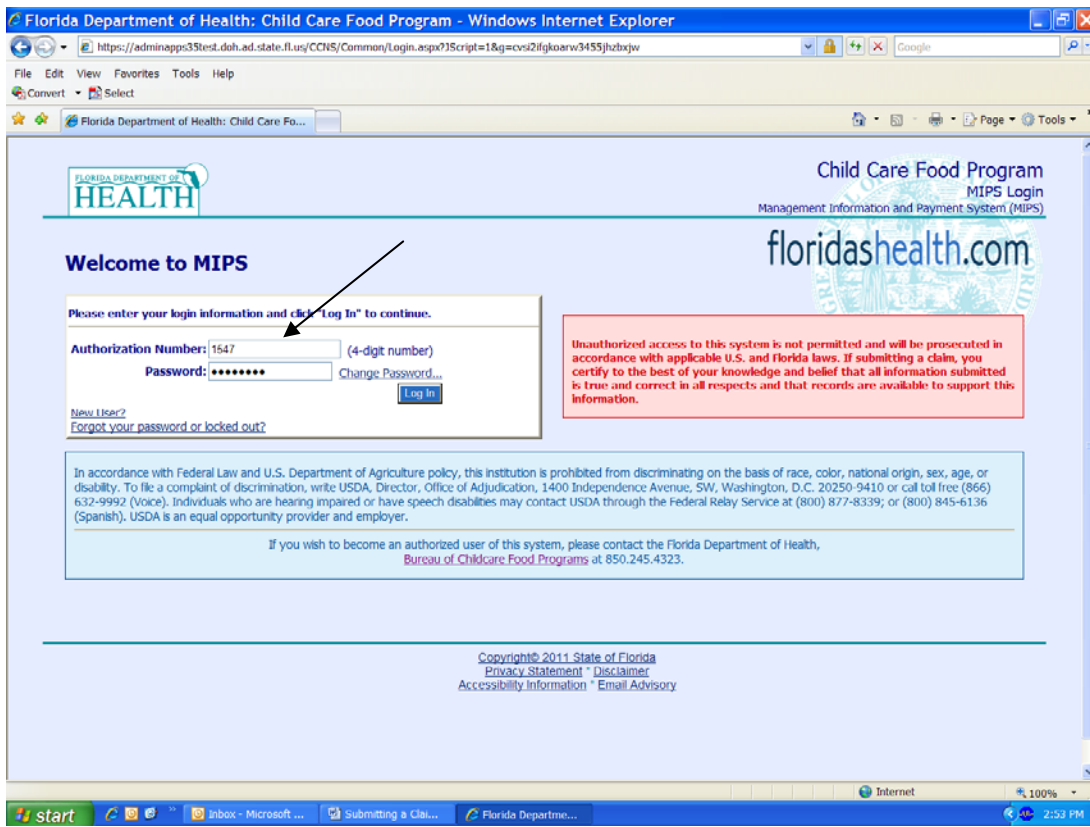


# Submitting a Claim in “New MIPS” Homeless Children Nutrition Program – multi-site

Log into MIPS (using same Authorization Number and Password as before)



\*\*Be sure to take notice of any messages on the screen

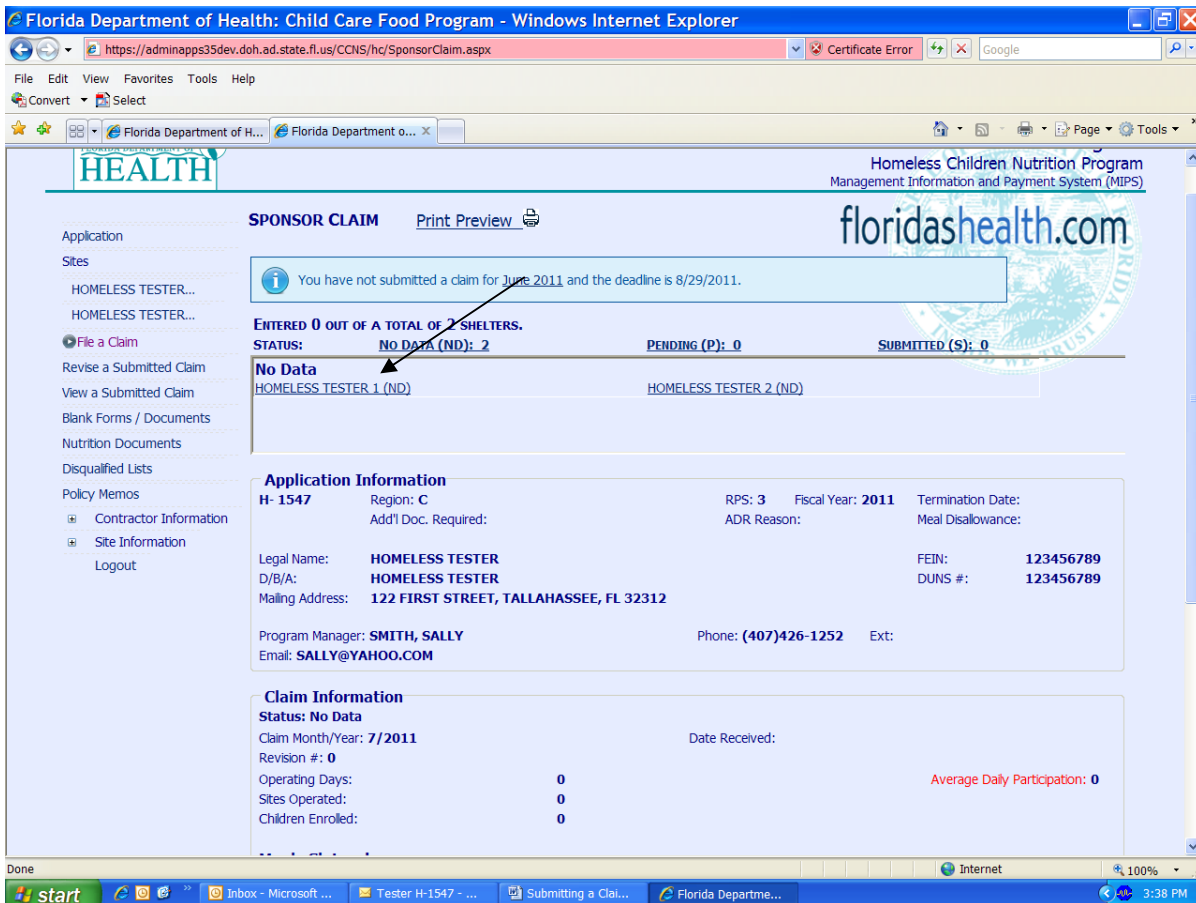
Click on **File a Claim** on your menu to get to the Sponsor Claim. Select the correct Claim Month and Year from the dropdown, then select **Continue**.



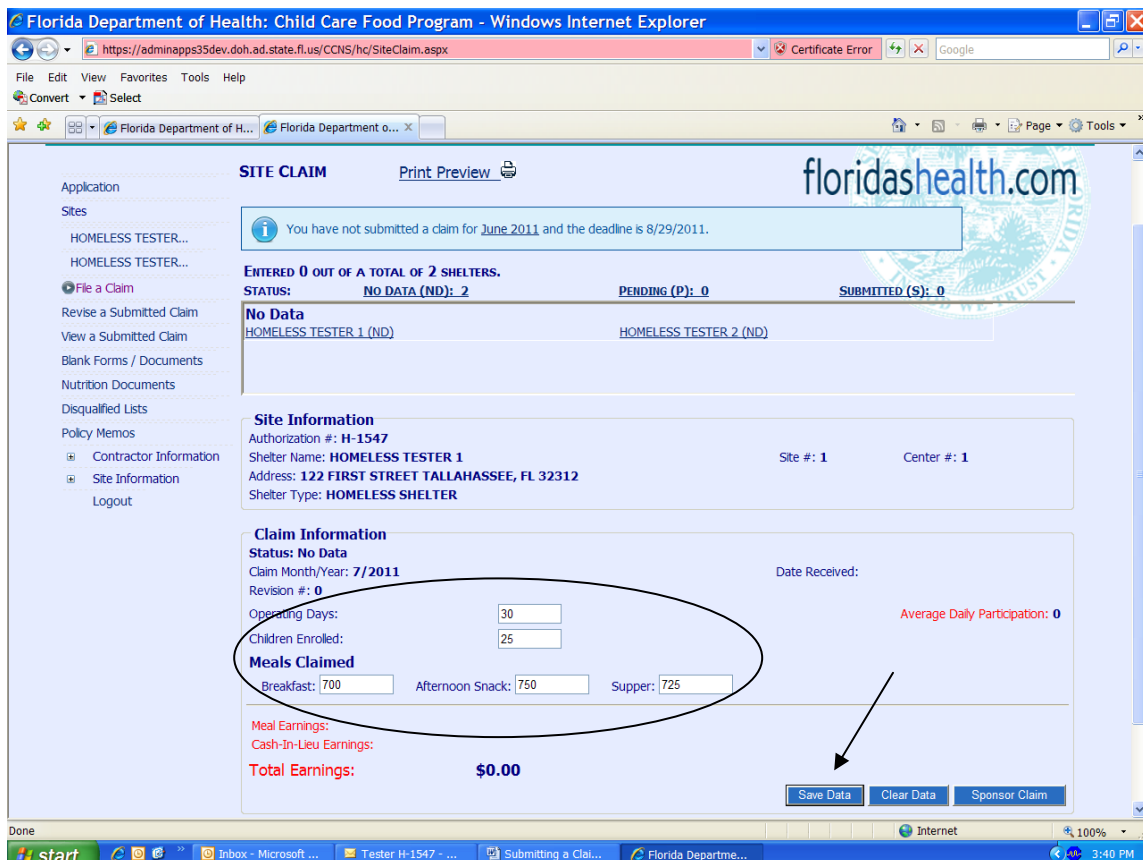
The Program Manager screen will appear. In order to file your claim, you must either confirm the information by clicking **Yes**; or, if anything is incorrect, you must click **No** and then enter the correct information and click on **Update**.



The Claim Screen then appears. Enter your Site Claim information at this time by clicking on each Site Name in the box at the top.



The Site Claim is where you enter each site's operating days, enrollment information and meal counts. Click on **Save Data** as each site claim is completed.



Once all Site Claim information is in, click on **Sponsor Claim** at the bottom of the Site Claim. On the Sponsor Claim you will see all the site claim data added up and displayed in the fields. Check to ensure your totals match these totals.

Enter your Sponsor Claim information (expenditures) in the pink colored fields. Then click on the **Calculate** button at the bottom of the screen and check for any errors which will come up in a red box.

**Florida Department of Health: Child Care Food Program - Windows Internet Explorer**

https://adminapps35dev.doh.ad.state.fl.us/CCNS/hc/SponsorClaim.aspx

File Edit View Favorites Tools Help

Convert Select

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Nutrition Documents

Disqualified Lists

Policy Memos

Contractor Information

Site Information

Logout

**Application Information**

**H- 1547** Region: C RPS: 3 Fiscal Year: 2011 Termination Date:

Add'l Doc. Required: ADR Reason: Meal Disallowance:

Legal Name: HOMELESS TESTER FEIN: 123456789

D/B/A: HOMELESS TESTER DUNS #: 123456789

Mailing Address: 122 FIRST STREET, TALLAHASSEE, FL 32312

Program Manager: SMITH, SALLY Phone: (407)426-1252 Ext:

Email: SALLY@YAHOO.COM

**Claim Information**

Status: No Data

Claim Month/Year: 7/2011 Date Received:

Revision #: 0

Operating Days: 0 Average Daily Participation: 0

Sites Operated: 0

Children Enrolled: 0

**Meals Claimed**

Breakfast: Afternoon Snack: Supper:

Operating Expenditures:	\$6,000
Administrative Expenditures:	\$200
Total Expenditures:	
Income to Program:	\$0
Meal Earnings:	\$0.00
Cash-In-Lead:	\$0.00
Actual Reimbursement:	\$0.00
Total Adjustments:	\$0.00
<b>Total Reimbursement:</b>	<b>\$0.00</b>

Calculate

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start Inbox - Microsoft ... Tester H-1547 - ... Submitting a Clai... Florida Departme...

If no error messages pop up, select the **Submit Claim** button to file your claim. The Green confirmation box should then appear which means your claim was successfully submitted.

**Florida Department of Health: Child Care Food Program - Windows Internet Explorer**

https://adminapps35dev.doh.ad.state.fl.us/CCNS/hc/SponsorClaim.aspx

File Edit View Favorites Tools Help

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Logout

### Application Information

**H- 1547** Region: C RPS: **3** Fiscal Year: **2011** Termination Date:

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Legal Name: **HOMELESS TESTER** FEIN: **123456789**

D/B/A: **HOMELESS TESTER** DUNS #: **123456789**

Mailing Address: **122 FIRST STREET, TALLAHASSEE, FL 32312**

Program Manager: **SMITH, SALLY** Phone: **(407)426-1252** Ext:

Email: **SALLY@YAHOO.COM**

### Claim Information

Status: **No Data**

Claim Month/Year: **7/2011** Date Received:

Revision #: **0**

Operating Days: **0** Average Daily Participation: **0**

Sites Operated: **0**

Children Enrolled: **0**

### Meals Claimed

Breakfast: Afternoon Snack: Supper:

Operating Expenditures:	<input type="text" value="\$6,000"/>
Administrative Expenditures:	<input type="text" value="\$200"/>
<b>Total Expenditures:</b>	<b>\$6,200</b>
Income to Program:	<input type="text" value="\$0"/>
<b>Meal Earnings:</b>	<b>\$0.00</b>
<b>Cash-In-Lieu:</b>	<b>\$0.00</b>
<b>Actual Reimbursement:</b>	<b>\$0.00</b>
<b>Total Adjustments:</b>	<b>\$0.00</b>
<b>Total Reimbursement:</b>	<b>\$0.00</b>

Upon entering all required information, click on the *Submit Claim* button. Failure to click on this button means your claim has not been submitted and will not be paid.

**Submit Claim**

Done

start | Inboxes - Microsoft ... | Tester H-1547 - ... | Submitting a Clai... | Florida Departme... | Internet | 100% | 3:45 PM

## **Site-based Claiming Step-by-Step Process for Homeless Children Nutrition Program Contractors**

Once you confirm (or amend) Program Manager Information, you will then see your Claim Screen.

The screen will be divided into two parts:

Top Section – you'll see an alphabetized list of all approved sites for that month and their claim status.

Claim Status Descriptions:

No Data – no data has been entered for that month

Pending – data has been saved but the Sponsor Claim has not been submitted yet

Submitted – data for site has been entered and submitted with Sponsor Claim

Bottom Section – you'll see the Sponsor Claim without any data. All data on the Sponsor Claim will be automatically filled in for you (based on data you enter into the Site Claims) except for Operating Expenditures, Administrative Expenditures and Income to Program.

**Click on the site name** you wish to enter (in the Top Section)  
That site's claim will open up on the bottom

**Enter Number of Operating Days** for that site

**Enter Number of Children Enrolled**

**Enter Meal Counts** in appropriate categories

**Click on Save Data** button when finished – if you do not do this, the site claim information will be deleted and you will have to enter it again.

Note – Revision # on the Site Claim will remain "0" until the Sponsor Claim is submitted to DOH. In other words, you may change and save the Site Claim as many times as you wish (prior to submitting the Sponsor Claim) and it won't have any affect on your payment.

If you inadvertently enter data into a Site Claim that is not claiming meals that month, click on Clear Data to remove the data.

When you have successfully completed the data entry for a site and click on Save Data, you will get a pop-up box telling you that your claim data has been saved for that site and the site's status up at the top of the page will change from No Data to Pending. **Click "OK."**

After saving you can **Click on Print Preview** link at the top of the page or the **Printer icon** next to the link if you wish to view and/or print the Site Claim.

This will bring up the Site Claim Report which will show reimbursement information on that site (how meal earnings were derived). You may print this report by clicking the printer icon on the report toolbar (not the Internet toolbar) and **Click “OK.”**

NOTE: It is recommended that you enter all sites that you are claiming for the month before submitting the Sponsor Claim; otherwise you will have to file a revision which will delay that payment until the next months' claim (as happens now).

However, you do not have to enter all sites at one time. You may enter single sites or groups of sites, save them, and go back later to enter the rest before submitting the Sponsor Claim.

Once you have entered all the sites that you are claiming for the month, **Click on Sponsor Claim** button at the bottom of the page.

You will see the Sponsor Claim with all compiled data from the Site Claims you have submitted. At the top of the Sponsor Claim you will find a statement telling you how many sites have been entered.

If the compiled data in the Sponsor Claim is incorrect, you can only change it by going into the individual Site Claims and fixing the data there. All data fields in the Sponsor Claim, except for Operating Expenditures, Administrative Expenditures and Income to Program, are automatically filled in and are not changeable on that screen.

Once you have verified that all sites have been entered and the compiled numbers look right to you,

### **Enter information into the Operating Expenditures, Administrative Expenditures and Income to Program**

**Click on Calculate** button

**Click on Submit Claim** button. If you wish to print your claim, you must do it AFTER you submit your claim, or your claim will not be processed. If your claim has been successfully submitted, a “Congratulations! Your claim has been successfully submitted” message will appear on your screen.

**Click on Print Preview** link or the **Printer Icon** if you wish to pull up your Sponsor Claim Report.

## Instructions on other things you can do in MIPS

**\*\*When printing from MIPS, always click on the Printer icon in the report toolbar, NOT the icon in the Internet toolbar**

Pull up and Print your Application – Click on **Application**, click **Print Preview** at top of page

Pull up and Print your Site Form –

- Single-site contractors – Click on your site that is listed on the menu under **Site**
- Multi-site contractors – Click on **Sites** on the menu and your list of sites will show on the screen. Click on the site you wish to print (using the Search feature to find it, if necessary), click **Print Preview** at top of page

Revise a Claim – Click **Revise a Submitted Claim**, select the claim you want to revise, change the numbers that need changing, click **Calculate**, then click **Submit Claim**

View a Claim that was Previously Filed – Click on **View a Submitted Claim**, select from dropdown the claim you wish to view, click **Search**.

Note: you may not revise this claim through this link, you must click the Revise a Claim link for that purpose

\*If you are a multi-site contractor and are viewing a revised claim, only those site claims associated with the revision will show in the top section.

Pull and Print Blank Forms and Documents – Click on **Blank Forms/Documents**, find the document you wish to print, click on the link, then click on the printer icon in the report toolbar (not the Internet toolbar) and click **OK**.

Pull Contractor Information – Click on **Contractor Information** on the menu and the menu will expand to show you what reports are available. These reports will be specific to your Authorization Number.

- Blank Claim – blank claim with your organization information printed at the top
- Claim Data Summary – reported claim information by fiscal year
- Payment Summary – claim payment information by fiscal year
- Profit Status – shows your up-to-date total reimbursement compared to total expenditures. The percent in the right hand column should be zero (0) or a negative number indicating you are not in profit status.
- Reimbursement Rates – shows all the reimbursement rates by state fiscal year
- Site Form – your site information report
  - If you are a multi-site contractor this is where you can print all of your sites at once (just leave the search criteria at “All Sites”)
- Site List – a listing of all approved sites under your Authorization Number

Pull Site Information (Multi-site contractors only) – Click on **Site Information** on the menu and the menu will expand to show you what reports are available. These reports will be specific to the sites under your Authorization Number

- Site Claim Data Summary – shows site claim information, by site (you may choose all sites, or individual sites for the report)
- Site Missing Claim – Select a month/year and the report will show any outstanding site claims that have not been filed yet
- Site Payment Summary – shows payment information by site (you may choose all sites, or individual sites for the report)
- Site Reimbursement – shows reimbursement by site claim (you may choose all sites, or individual sites for the report). If you are reimbursing your sites, send the site this report with their payment.