



When to Summit a Claim

Submit Special Milk Program reimbursement claims monthly. Claims for reimbursement must be submitted within 60 calendar days following the close of the claiming month.

Access the Colorado Nutrition Portal

Enter Claim into the Colorado Nutrition Portal

Item	Description
Claim - SNP	School Nutrition Program Claims
Claim - SSO	Seamless Summer Option Claims
Claim - FFVP	Fresh Fruit and Vegetable Program Claims
Claim Rates	View current claim rates
Payment Summary	Summary of payments made to this Sponsor

1. Click **Claims** on top blue menu tab
2. Click **Claim—SNP**
3. Click on the month to claim
4. Click on the red button, **Add Original Claim**
5. Next to the site for which you want to file a claim, click on **"Add"**

Actions	Site #	Site Name	Errors	Status
Add	6408	Site Names Protected		
Add	8700			
Add	8701			
Add	8702			
Add	8703			
Add	8704			
Add	8705			
Add	8706			

You are now on the Site Claim Report Page here you will enter all claim information for the selected site. You will need the following five pieces of information to complete the claim: total ½ pints purchased, total cost of milk, number of operating days, number of reimbursable milks served as free, and number of reimbursable milks served as paid.

M1—Enter the total number of fluid milk ½ pints purchased this month. If buying milk in quantities of milk greater than individual ½ pints, convert to ½ pint equivalents using tips below.

Milk by the Gallon = 16, ½ pints per gallon

Milk by the 5 gallon = 80, ½ pints per 5 gallons

M2— Enter the total cost of fluid milk purchased this month. This number is the total cost, as seen on receipts, invoices, purchase orders, etc. This is not a per unit price.



M3— Enter the number of operating days in the month. This is the number of days that the Special Milk Program operated in the selected month. For Example: If you operate Monday through Friday, and the month has 4 weeks then you had 20 operating days that month, subtract any observed holidays and site closures.

M4—

- Enter the number of reimbursable milks served as **Free** to students. **IMPORTANT:** Only Enter free milk if you are operating a **pricing with free option**.
- Enter the number of reimbursable milks served as **Paid** to students. **IMPORTANT:** If you are operating a **non-pricing program** input all milks served to students in the paid row
- The total line will calculate automatically.

Click the red **“Save”** button at the bottom of the screen.

You may see a screen saying your claim has ERRORS or WARNINGS

Warnings: It is possible that warnings will pop up; please review these to ensure your claim is correct; **claims can be submitted with warnings.**

Errors: It is possible that errors will pop up; please review these to ensure your claim is correct; **claims cannot be submitted with errors.**

Correct any errors according to the error description and correct any mistakes that caused warnings.
Add all additional sites using the same method.

Submit Monthly Claims for Payment

Once all sites are entered, confirm that the claim status is **“Validated”** for all sites then click the red **“Continue”**

Actions	Site #	Site Name	Errors	Status
View Modify	0001	Site Information Protected		Validated
<div><div>< Back</div><div>Continue</div><div>Upload Claim Data</div></div>				

- The next screen will give you the opportunity to review the consolidated claim for your district. Please check this to ensure accuracy.
- Click on the **“Certification box.”**
- Click on the red **“Submit for Payment”** button.
- The next page will show your confirmation number, save this for your records, an email confirmation will also be sent to the email you have on file.
- Select the finished button you will be returned to the Claim Month Details page where you can see the earned amount of reimbursement for the month.
- You can view your claims on the Claim month screen as well as the Claim Year Summary.

This institution is an equal opportunity provider.