

Texas Unified Nutrition Programs System (TX-UNPS)

CACFP Centers Site Claims

Point of Sale (POS) File Specifications

Final V1.2

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**State of Texas
Department of Agriculture
Food and Nutrition Division**



Submitted by:



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Table of Contents

1. POINT OF SALE (POS) INTERFACE	4
1.1 Interface Characteristics.....	4
1.2 Constraints	5
1.3 Process Overview	5
1.4 File Layout.....	7
2. ACCESSING CACFP SITE CLAIM POS OPTION WITHIN TX-UNPS.....	8

Document Revision History

Version	Status	Date	Change Description	Updated By
V.01	Draft	06/13/2011	Initial draft submitted to TX-UNPS Project Management Team for review	Richard Roeckner
V.01	Draft	06/14/2011	Review with TDA comments	Ed Kelly
V.02	Draft	06/17/2011	CCG Responses to Comments	Richard Roeckner
V1.0	Final	06/20/2011	Finalized by TDA	Richard Roeckner
V1.1	Final	06/20/2011	Final release to TDA	Richard Roeckner
V1.2	Final	09/20/2013	Added field 125 to end of specification to accommodate new TDA field: "Number of Subsidized Children" (C-11 on the CACFP Centers Claim screen)	

1. Point of Sale (POS) Interface

The Child and Adult Care Food Program (CACFP) Centers site claim data may be either manually entered into TX-UNPS via the CACFP Claims module or imported via a file in a designated, pre-defined file format. Since some Contracting Entities maintain meal administrative systems that automatically capture point of sale (POS) data for meals served and generate reimbursement claims by site, TX-UNPS provides the ability for authorized users to import a POS file in a defined file format. Once the file is imported into TX-UNPS, claim validation and error checking will function in the same manner as if the site data was manually entered into TX-UNPS and the user had selected the Save button.

This option is available only for the Child and Adult Care Food Program (CACFP), which includes the following:

- Adult Care Program (AC)
- Childcare Center Program (CCC)
- Outside School Hours Program (OSH)
- Emergency Shelter Program (ES)
- Head Start Program (HS)
- At-Risk Childcare Program (AS)

1.1 Interface Characteristics

The following table identifies the characteristics of this interface:

Table 1: POS Systems – Interface Characteristics

Category	Characteristic
Purpose of Interface(s)	To upload a Contracting Entity's CACFP Centers site-level claim data
Type of Interface(s)	Batch
Initial Frequency Setting	On-demand initiated by Contracting Entity user
Interface Direction	Import into TX-UNPS
Import Method	Via YYYY-YYYY CACFP Claim Site List screen within the TX-UNPS CACFP Claims module (see Section 2)
Acceptable File Formats	ASCII Fixed Width per specification in this document
TDA Contact	TX-UNPS Help Desk

1.2 Constraints

The import process relies on the creation of an interface file that is a fixed width ASCII text file and contains site-level claim reporting information from a Contracting Entity's point of sale (POS) system. The file must be formatted according to the layout specified in the TX-UNPS CACFP Centers POS File Layout specifications. Contracting Entities will need to develop a method of creating this file, which may require working with their POS vendor or internal information technology department.

Any questions regarding the process or defined file format should be directed to the following TDA contact:

- Contact: Lee Ann Dumas
- Contact Email Address: Leeann.Dumas@TexasAgriculture.gov
- Contact Phone Number: 512-463- 8899

1.3 Process Overview

Creating the TX-UNPS CACFP Centers Claims POS File

When a Contracting Entity is ready to import site claim data into TX-UNPS for a specific month, they will initially execute an external process from their POS system to create the "import" file. This file can be saved on the Contracting Entity's local computer hard drive, network directory, or in any location desired by the user. The name of the file is not relevant to TX-UNPS, therefore the Contracting Entity can choose their own naming standard for the file. It is recommended that the Contracting Entity includes the claim month (e.g., May2011) in the file name.

Importing the CACFP Claims POS File into TX-UNPS

Once the file is created, the user will log into TX-UNPS to execute the import process. The interface process is initiated by a user with the appropriate TX-UNPS security to load the file. The intent is for the Contracting Entity user to conduct the upload process; however, any authorized user, including TDA staff, can upload a file given the proper TX-UNPS security rights and access to the CACFP Centers Claims POS file.

To upload the file into TX-UNPS, the Contracting Entity will click on a button on the TX-UNPS CACFP Claim Site List screen (see Section 2). TX-UNPS will present the user with a "File Open" dialog box and the user will navigate to and select the "import" file from the location where the user saved the file. After selecting the file, the user will click on an "upload" link. TX-UNPS will import the file and save the data. Uploaded files will be validated to ensure that Contracting Entities can only upload data for their sites.

Data Validation

After the file has been imported, TX-UNPS will display a results screen so the user understands which, if any, records need to be corrected. If there are errors in the data, the user can either correct them manually in TX-UNPS or correct the errors in the POS system and re-upload the corrected file. The file can be uploaded as many times as the Contracting Entity would like; however, TX-UNPS will overlay any existing data with new data. Repetitive uploads will always overlay existing data until the claim is paid. After the claim for the month being uploaded is paid, subsequent uploads for the same month will result in the creation of a revised claim.

1.4 File Layout

Appendix A defines the file format for the TX-UNPS CACFP Centers Claims POS file. Please note the following:

- N = Numeric
Example: Numeric data that is represented with two digits and no decimal places will be shown in this document as N(2,0).
- C = Character
Example: Character data that fills a field that is 64 spaces wide will be shown in this document as C(64).

2. Accessing CACFP Site Claim POS Option within TX-UNPS

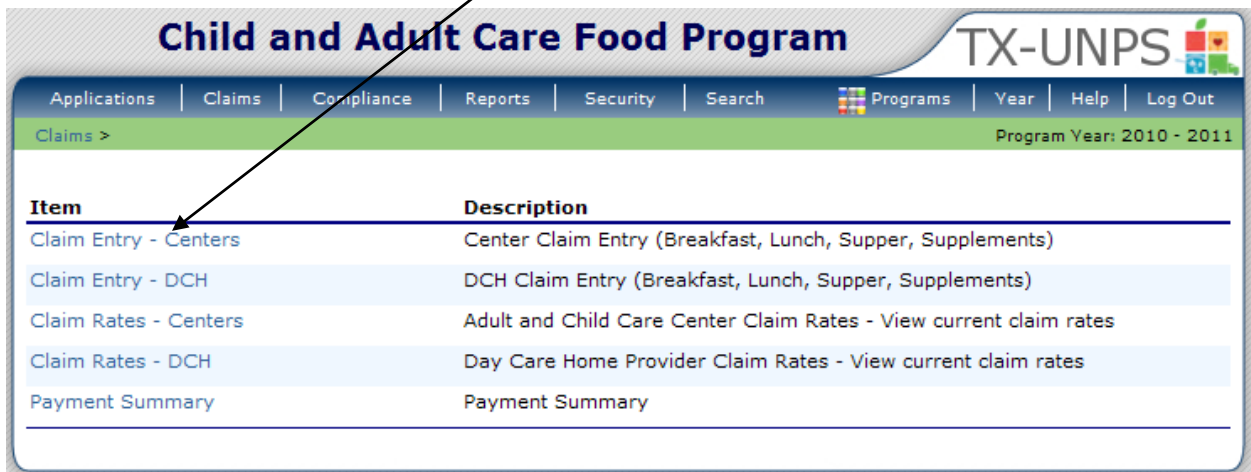
The following screens identify the steps required to upload CACFP Centers site claims data.

Step 1: Access the CACFP Claims Sub-module

Once an authorized user has logged into the CACFP module, access to the claims component for CACFP Claims is via “Claims” on the Menu Bar.



Step 2: Select “Claim Entry – Centers”



Step 3: On the CACFP Claim Year Summary screen, select Claim Month for the file to be uploaded

Claim Month	Adj Number	Claim Status	Date Received	Date Processed	Earned Amount
Oct 2010					\$0.00
Nov 2010					\$0.00
Dec 2010					\$0.00
Jan 2011					\$0.00
Feb 2011					\$0.00
Mar 2011					\$0.00
Apr 2011					\$0.00
May 2011					\$0.00
Jun 2011					\$0.00
Jul 2011					\$0.00
Aug 2011					\$0.00
Sep 2011					\$0.00

Step 4: On the CACFP Claim Month Details screen, select the “Add Original Claim” button

Claim Items	Adj Number	Date Received	Date Accepted	Date Processed	Earned Amount	Status
There are no claims for this month.						
Total Earned					\$0.00	

Step 5a: Select the "Upload Claim Data" button

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Mar 2011	0				

Step 5b: Select the POS claim file to be uploaded (use the Browse button to locate the file)

To Upload a file:
1. Click on the "Browse" button to find the file on your computer.
2. Once you locate the file, click the "Open" button.
3. When finished with the above steps, click "Upload".

* The upload may take a few minutes. Thank You for your patience.

Select File:

Step 5c: Select the "Upload" button

To Upload a file:
1. Click on the "Browse" button to find the file on your computer.
2. Once you locate the file, click the "Open" button.
3. When finished with the above steps, click "Upload".

* The upload may take a few minutes. Thank You for your patience.

Select File:

Appendix A

TX-UNPS CACFP Centers Point of Sale (POS) File Format Specifications

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
1	1	3	Upload Form ID	3	N(3,0)	Y	Value = 503 for every record 503 = CENTER Claim Upload
2	4	9	Serial Number	6	N(6,0)	Y	Sequential Record Number (1, 2, 3, etc.)
3	10	17	Process Date	8	N(8,0)	N	MMDDYYYY - Date the CE processed the data
4	18	23	Vendor Number	6	C(6)	N	CE Vendor Number Example (B26600), Do not include dashes
5	24	87	CE Name	64	C(64)	Y	Name of CE
6	88	92	CE ID Number	5	C(5)	Y	Unique TX-UNPS system generated CE number Do not include dashes; zero fill from left e.g. 01234
7	93	94	Claim Month	2	N(2,0)	Y	Enter the month the claim is being submitted for: Calendar month number (01, 02, 11, 12)
8	95	98	Claim Year	4	N(4,0)	Y	Enter the year the claim is being submitted for: YYYY of the calendar year (i.e. 2008)
9	99	162	Site Name	64	C(64)	Y	Name of Site
10	163	168	Site ID	6	C(6)	Y	Unique Site Number. This is the key identifier for each Site as displayed on the screen. Left 0 fill (ex 000001, 000002 etc). Use Site Number from TX-UNPS system.
11	169	170	Claim Meal Input Method	2	C(2)	Y	AC, FP (AC = Actual Count, FP = Fixed Percentage)
ADULT CARE CLAIM INFORMATION				THIS SECTION IS COMPLETED FOR ADULT CARE INFORMATION ONLY. IF NO MEALS ARE BEING CLAIMED FOR THIS SECTION, LEAVE ALL FIELDS BLANK.			
12	171	177	Total Days of Operation	7	N(7,0)	N	
13	178	184	Total Attendance	7	N(7,0)	N	
14	185	191	Free Enrolled Participants	7	N(7,0)	N	
15	192	198	Reduced-Price Enrolled Participants	7	N(7,0)	N	
16	199	205	Paid Rate Enrolled Participants	7	N(7,0)	N	
17	206	212	Total Enrolled	7	N(7,0)	N	

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
18	213	219	Title XIX/Title XX	7	N(7,0)	N	
19	220	226	Breakfast Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
20	227	233	Breakfast Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
21	234	240	Breakfast Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
22	241	247	Breakfast Total Meals Served	7	N(7,0)	N	
23	248	254	AM Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
24	255	261	AM Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
25	262	268	AM Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
26	269	275	AM Snack Total Meals Served	7	N(7,0)	N	
27	276	282	Lunch Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
28	283	289	Lunch Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
29	290	296	Lunch Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
30	297	303	Lunch Total Meals Served	7	N(7,0)	N	
31	304	310	PM Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
32	311	317	PM Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
33	318	324	PM Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
34	325	331	PM Snack Total Meals Served	7	N(7,0)	N	
35	332	338	Supper Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
36	339	345	Supper Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
37	346	352	Supper Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
38	353	359	Supper Total Meals Served	7	N(7,0)	N	
39	360	366	Evening Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
40	367	373	Evening Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
41	374	380	Evening Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
42	381	387	Evening Snack Total Meals Served	7	N(7,0)	N	
CHILD CARE CLAIM INFORMATION				THIS SECTION IS COMPLETED FOR CHILD CARE INFORMATION ONLY. IF NO MEALS ARE BEING CLAIMED FOR THIS SECTION, LEAVE ALL FIELDS BLANK.			
43	388	394	Total Days of Operation	7	N(7,0)	N	
44	395	402	Total Attendance	8	N(7,0)	N	
45	403	409	Free Enrolled Participants	7	N(7,0)	N	
46	410	416	Reduced-Price Enrolled Participants	7	N(7,0)	N	
47	417	423	Paid Rate Enrolled Participants	7	N(7,0)	N	
48	424	430	Total Enrolled	7	N(7,0)	N	
49	431	437	Breakfast Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
50	438	444	Breakfast Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
51	445	451	Breakfast Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
52	452	458	Breakfast Total Meals Served	7	N(7,0)	N	
53	459	465	AM Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
54	466	472	AM Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
55	473	479	AM Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
56	480	486	AM Snack Total Meals Served	7	N(7,0)	N	
57	487	493	Lunch Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
58	494	500	Lunch Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
59	501	507	Lunch Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
60	508	514	Lunch Total Meals Served	7	N(7,0)	N	
61	515	521	PM Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
62	522	528	PM Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
63	529	535	PM Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
64	536	542	PM Snack Total Meals Served	7	N(7,0)	N	
65	543	549	Supper Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
66	550	556	Supper Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
67	557	563	Supper Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
68	564	570	Supper Total Meals Served	7	N(7,0)	N	
69	571	577	Evening Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
70	578	584	Evening Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
71	585	591	Evening Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
72	592	598	Evening Snack Total Meals Served	7	N(7,0)	N	

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
OUTSIDE SCHOOL HOURS CLAIM INFORMATION				THIS SECTION IS COMPLETED FOR OUTSIDE SCHOOL HOURS CLAIM INFORMATION ONLY. IF NO MEALS ARE BEING CLAIMED FOR THIS SECTION, LEAVE ALL FIELDS BLANK.			
73	599	605	OSH -Total Days of Operation	7	N(7,0)	N	
74	606	612	OSH - Total Attendance	7	N(7,0)	N	
75	613	619	Free Enrolled Participants	7	N(7,0)	N	
76	620	626	Reduced-Price Enrolled Participants	7	N(7,0)	N	
77	627	633	Paid Rate Enrolled Participants	7	N(7,0)	N	
78	634	640	Total Enrolled	7	N(7,0)	N	
79	641	647	Breakfast Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
80	648	654	Breakfast Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
81	655	661	Breakfast Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
82	662	668	Breakfast Total Meals Served	7	N(7,0)	N	
83	669	675	AM Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
84	676	682	AM Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
85	683	689	AM Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
86	690	696	AM Snack Total Meals Served	7	N(7,0)	N	
87	697	703	Lunch Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
88	704	710	Lunch Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
89	711	717	Lunch Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
90	718	724	Lunch Total Meals Served	7	N(7,0)	N	
91	725	731	PM Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
92	732	738	PM Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
93	739	745	PM Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
94	746	752	PM Snack Total Meals Served	7	N(7,0)	N	
95	753	759	Supper Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
96	760	766	Supper Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
97	767	773	Supper Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
98	774	780	Supper Total Meals Served	7	N(7,0)	N	
99	781	787	Evening Snack Free Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
100	788	794	Evening Snack Reduced Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
101	795	801	Evening Snack Paid Rate Meals Served	7	N(7,0)	N	IF Claim Meal Input Method = "Fix Percentage (FP)", Leave blank
102	802	808	Evening Snack Total Meals Served	7	N(7,0)	N	
EMERGENCY SHELTER INFORMATION				THIS SECTION IS COMPLETED FOR EMERGENCY SHELTER ONLY. IF NO MEALS ARE BEING CLAIMED FOR THIS SECTION, LEAVE ALL FIELDS BLANK.			
103	809	815	ES - Total Days of Operation	7	N(7,0)	N	
104	816	822	ES - Total Attendance	7	N(7,0)	N	
105	823	829	ES - Breakfast Free Meals Served	7	N(7,0)	N	
106	830	836	ES - AM Snack Free Meals Served	7	N(7,0)	N	
107	837	843	ES - Lunch Free Meals	7	N(7,0)	N	

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
			Served				
108	844	850	ES - PM Snack Free Meals Served	7	N(7,0)	N	
109	851	857	ES - Supper Free Meals Served	7	N(7,0)	N	
110	858	864	ES - Evening Snack Free Meals Served	7	N(7,0)	N	
HEAD START INFORMATION				THIS SECTION IS COMPLETED FOR HEAD START ONLY. IF NO MEALS ARE BEING CLAIMED FOR THIS SECTION, LEAVE ALL FIELDS BLANK.			
111	865	871	HS - Total Days of Operation	7	N(7,0)	N	
112	872	878	HS - Total Attendance	7	N(7,0)	N	
113	879	885	HS - Breakfast Free Meals Served	7	N(7,0)	N	
114	886	892	HS - AM Snack Free Meals Served	7	N(7,0)	N	
115	893	899	HS - Lunch Free Meals Served	7	N(7,0)	N	
116	900	906	HS - PM Snack Free Meals Served	7	N(7,0)	N	
117	907	913	HS - Supper Free Meals Served	7	N(7,0)	N	
118	914	920	HS - Evening Snack Free Meals Served	7	N(7,0)	N	
AT RISK INFORMATION				THIS SECTION IS COMPLETED FOR AT-RISK ONLY. IF NO MEALS ARE BEING CLAIMED FOR THIS SECTION, LEAVE ALL FIELDS BLANK.			
119	921	927	At Risk - Total Days of Operation	7	N(7,0)	N	
120	928	934	At Risk - Total Attendance	7	N(7,0)	N	
121	935	941	At Risk - Breakfast Served	7	N(7,0)	N	
122	942	948	At Risk - Lunch Served	7	N(7,0)	N	
123	949	955	At Risk - Snacks Served	7	N(7,0)	N	

Field Seq.	Position From	Position To	Description	Field Size	Field Type	Required Fields	Notes
124	956	962	At Risk - Suppers Served	7	N(7,0)	N	
125	963	969	Child Care Center – Subsidized Children	7	N(7,0)	N	This is only required if the Center is For Profit