



# PPS Training

revised 1/2012

## Financial Reports in Program Participation System (PPS)




# Expense Reports in Program Participation System (PPS)

- For 2011 dates of service (reports filed in April and May 2012), the Human Services Revenue Report (HSRR) and the 942 Expense Report will be reported through the Program Participation System (PPS).
- Previously HSRR and 942 reports were reported through the Human Services Reporting System (HSRS) Web Page.
- The transition from HSRS to PPS will not change expense reporting requirements for either report.



# What will change?

- PPS requires a WAMS ID, PPS and financial reporting security authorization to access the HSRR and 942 report.
- Appearance and Format - PPS web pages will differ from HSRS web screens.
- SPCs on the 942 Report have been reordered (but not renumbered) so those SPCs that provide an option for more detailed reporting are grouped at the bottom of the report.
- HSRR has been split from a single screen form to four tabs, with each tab collecting data for 4 of the 16 HSRR columns.



# Access to the Program Participation System (PPS)

- New users to PPS need a WAMS ID and need to complete a PPS Web Access Request for financial reports.
- WAMS IDs were previously required to complete HSRR and 942 reports in HSRS. If you already have a WAMS ID, you do not need to create a new one.
- Most individuals that previously reported 942 or HSRR were converted and authorized to access financial reports in PPS. If you previously reported this information for your agency, you should attempt to access financial reports in PPS before requesting access.
- For instructions to get a WAMS ID or to Request New PPS Access, please see the PPS power point titled “Getting Access to PPS”.



# Logging into PPS

- PPS login  
use the following link: <https://pps.wisconsin.gov/>
- Choose PPS (Program Participation System) link

Note: If you have access to other systems that use WAMS, such as HSRS, FSIA or CARES you will not need to create a new ID. You will use the same WAMS ID for all systems.

# PPS login and basic navigation

- ❖ Side Navigation Menu
- ❖ Page Navigation
  - Cancel
  - Reset
  - Saving
- ❖ Home Page

# Login to PPS from Gateway page









## Production URL is HTTPS://pps.wisconsin.gov

The screenshot shows a Windows Internet Explorer browser window titled "Gateway Page - Windows Internet Explorer provided by DHS - State of Wisconsin". The address bar displays "https://trn.pps.wisconsin.gov/". The page features a blue header with the Wisconsin state seal and the text "State of W I S C O N S I N". Below the header, the main content area is titled "Human Services System Gateway" and includes a link to "Add this Page to Favorites". A red banner indicates a "Training Environment". A paragraph explains that the page lists applications for determining functional and financial eligibility for various programs. Below this, there are nine links arranged in a 3x3 grid, each with an icon and a description. The link for "PPS" (Program Participation System) is circled in red. The links are: FSIA (Functional Screen Information Access), PPS (Program Participation System), WAMS (To access PPS / CWW / FSIA, signup for a Web Access Management System (WAMS) ID.), FSIA - Request Access (To complete a printable form that you can submit to your agency's security officer to get access to FSIA), PPS - Request Access (To complete a printable form that you can submit to your agency's security officer to get access to PPS), WISA (Wisconsin Integrated Security Application), FSIA - Training (Functional Screen Information Access (Training Environment)), PPS - Training (Program Participation System (Training Environment)), and CWW (CARES Worker Web).

**Human Services System Gateway** [Add this Page to Favorites](#)

**\*\* Training Environment \*\***

This page lists the applications that are used to determine functional and financial eligibility for various programs across the State of Wisconsin. The functional eligibility is determined for Adult, Children's and Mental Health programs. The financial eligibility includes FoodShare, Medicaid, SeniorCare, SSI Care Taker Supplement, Wisconsin Works and Child Care Programs.

 <b><a href="#">FSIA</a></b> Functional Screen Information Access	 <b><a href="#">PPS</a></b> Program Participation System	<b><a href="#">WAMS</a></b> To access PPS / CWW / FSIA, signup for a Web Access Management System (WAMS) ID.
 <b><a href="#">FSIA - Request Access</a></b> To complete a printable form that you can submit to your agency's security officer to get access to FSIA	 <b><a href="#">PPS - Request Access</a></b> To complete a printable form that you can submit to your agency's security officer to get access to PPS	 <b><a href="#">WISA</a></b> Wisconsin Integrated Security Application
 <b><a href="#">FSIA - Training</a></b> Functional Screen Information Access (Training Environment)	 <b><a href="#">PPS - Training</a></b> Program Participation System (Training Environment)	 <b><a href="#">CWW</a></b> CARES Worker Web

The PPS link in the last slide will open this login screen. Enter your WAMS ID and password to login.

YOU ARE ON WISCONSIN.GOV

State of W I S C O N S I N

**WAMS**  
WEB ACCESS  
MANAGEMENT SYSTEM

User ID:

Password:

Login

[Forgot your password? Is your account locked?](#)  
[Request a Wisconsin User ID and Password.](#)

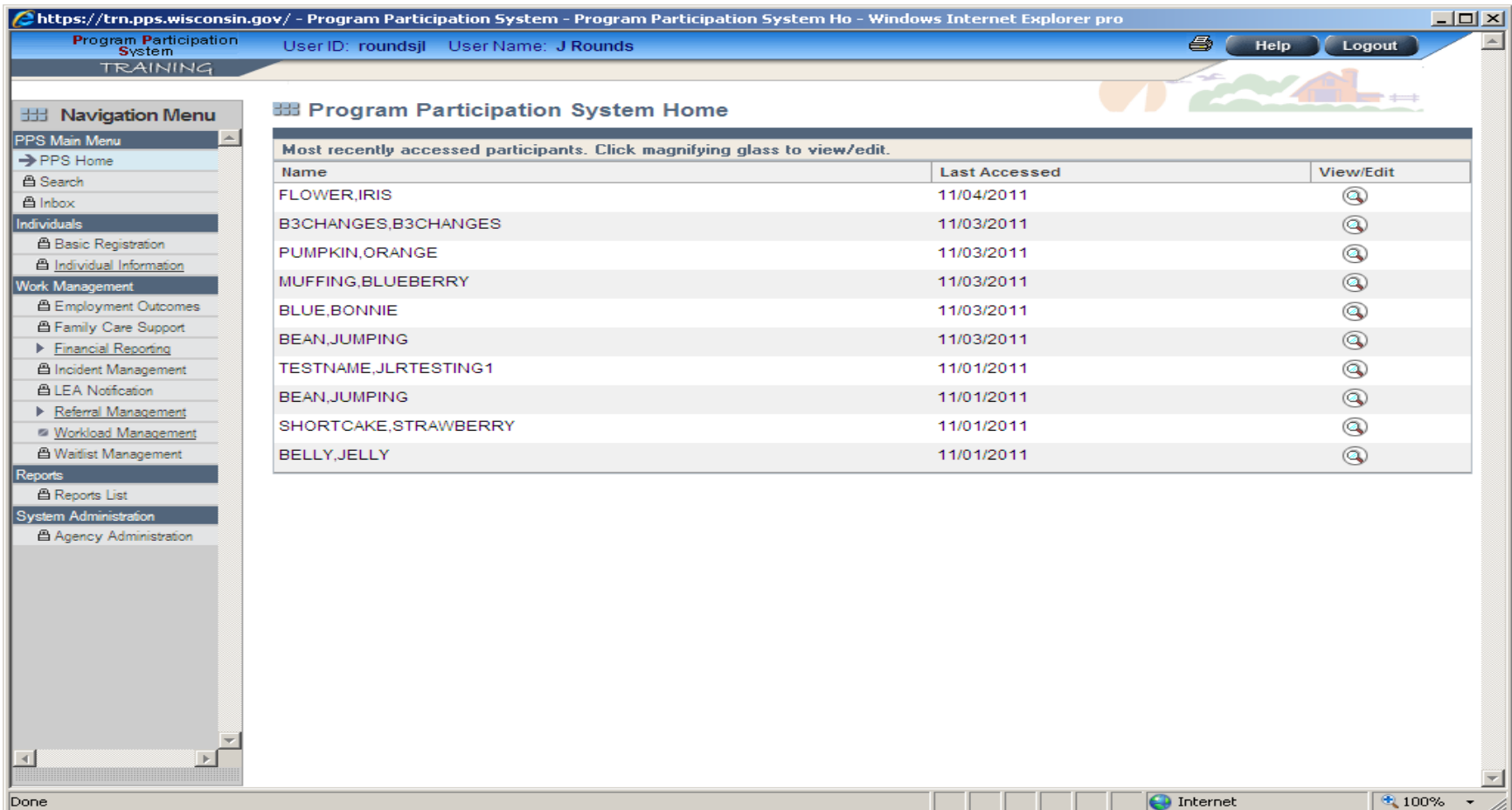
You are accessing the State of Wisconsin Local/Wide area network. This system is for authorized users only. All equipment, systems, services, and software connected to this network are intended only for the official business use of the State of Wisconsin. The State of Wisconsin reserves the right to audit, inspect and disclose all transactions and data sent over this medium in a manner consistent with State and Federal laws. By using this system you expressly consent to all such auditing, inspection and disclosure. Only software approved, scanned for virus, and licensed for State of Wisconsin use will be permitted on this network. Any illegal or unauthorized use of State of Wisconsin equipment, systems, services, or software by any person(s) may be subject to civil or criminal prosecution under state and federal laws, and may also result in disciplinary action where appropriate.

[WAMS Home](#) [Wisconsin Portal Home](#)  
Please don't bookmark this page.

Local intranet 125%



After logging in, you will be brought to the HOME Page. If you also enter service data into PPS web screens, you will see the last 10 individuals that you have accessed. If you do not enter service data into PPS, the list of names will be empty.



The screenshot shows the Program Participation System Home page. The browser address bar displays <https://trn.pps.wisconsin.gov/>. The page header includes the text "Program Participation System" and "User ID: roundsjl User Name: J Rounds". There are "Help" and "Logout" buttons in the top right corner.

The left sidebar contains a "Navigation Menu" with the following sections:

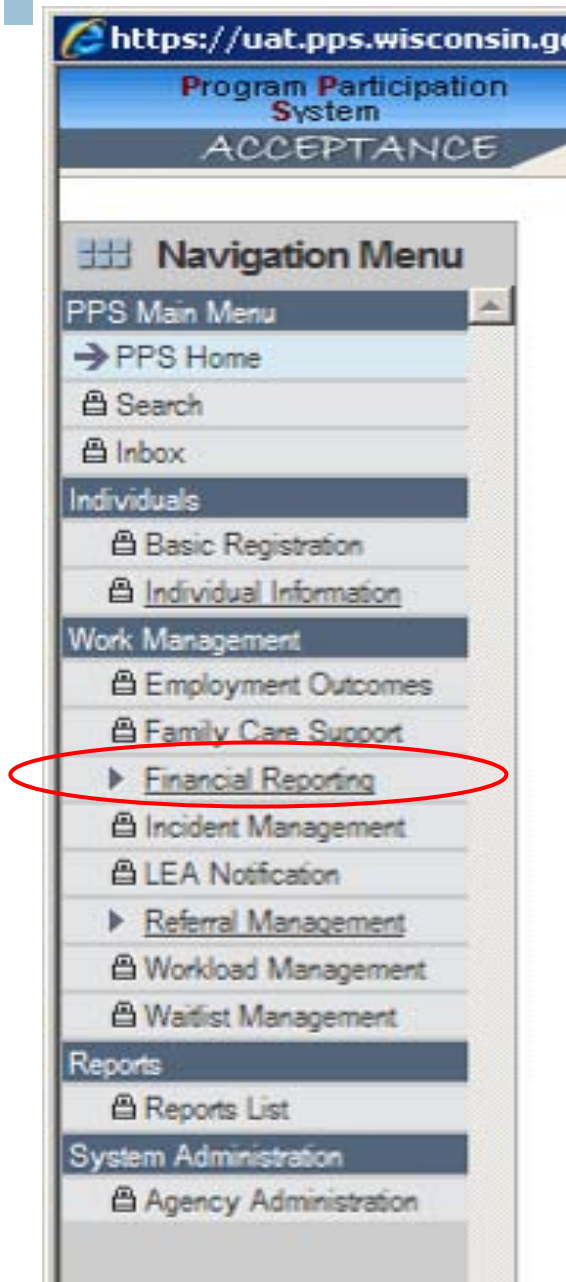
- PPS Main Menu
  - PPS Home
  - Search
  - Inbox
- Individuals
  - Basic Registration
  - Individual Information
- Work Management
  - Employment Outcomes
  - Family Care Support
  - Financial Reporting
  - Incident Management
  - LEA Notification
  - Referral Management
  - Workload Management
  - Waitlist Management
- Reports
  - Reports List
- System Administration
  - Agency Administration

The main content area is titled "Program Participation System Home" and features a table of "Most recently accessed participants. Click magnifying glass to view/edit." The table has three columns: Name, Last Accessed, and View/Edit.

Name	Last Accessed	View/Edit
FLOWER,IRIS	11/04/2011	
B3CHANGES,B3CHANGES	11/03/2011	
PUMPKIN,ORANGE	11/03/2011	
MUFFING,BLUEBERRY	11/03/2011	
BLUE,BONNIE	11/03/2011	
BEAN,JUMPING	11/03/2011	
TESTNAME,JLRTESTING1	11/01/2011	
BEAN,JUMPING	11/01/2011	
SHORTCAKE,STRAWBERRY	11/01/2011	
BELLY,JELLY	11/01/2011	

The bottom of the browser window shows the status bar with "Done", "Internet", and "100%" zoom level.

# Side Navigation Menu



- ❖ Links available to you are based on your PPS Profile.
- ❖ The lock symbol means you do not have access to that function.
- ❖ If you are on a data entry page and use the side links to navigate away from the page any updates you have made will be saved.
- ❖ Financial Reports will expand to show several links related to financial reports.



# Report Selection

- To navigate to the financial report selection page, choose the Report Selection link from the list of choices under Financial Reporting.

# Report Selection Page

- 1 - Choose F20942 for the 942 report or F22540 for the HSRR.
- 2 - Your agency should appear in this box. If you have access for multiple agencies, make sure the correct agency is selected.
- 3 - Select the appropriate year (Reports submitted Jan-Apr 2012 are for the 2011 Report Year)

The screenshot shows the 'Program Participation System - Report Selection' page in Internet Explorer. The browser title bar indicates 'Program Participation System - Report Selection - Windows Internet Explorer provided by DHS - State of Wisconsin'. The page has a blue header with 'Program Participation System', 'User ID: PWRHC4', 'User Name: W Emslie', and buttons for 'Help' and 'Logout'. A 'TRAINING' banner is below the header. On the left is a 'Navigation Menu' with categories: PPS Main Menu (PPS Home, Search, Inbox), Individuals (Basic Registration, Individual Information), Work Management (Employment Outcomes, Family Care Support, Financial Reporting, Report Selection, Report Administration, Incident Management, LEA Notification, Referral Management, Workload Management, Waitlist Management), Reports (Reports List), and System Administration (Agency Administration). The 'Report Selection' form on the right has a 'Criteria Selection' section with three dropdown menus: 'Select Report' (F20942 Expense Report), 'Select Agency or Report Unit' (QPIB Financial Reports Only Agency), and 'Select Report Year' (2010). Red arrows labeled 1, 2, and 3 point to these dropdowns respectively. The form also includes 'Cancel', 'Reset', and 'Go' buttons. The status bar at the bottom shows 'Done', 'Local intranet', and '100%' zoom.

# Navigating Data Entry Pages

On data entry pages there is a Cancel check box and a Reset button. Click on the cancel button and then select either a link or the next button, then data will not be saved and you are navigated off the page.

Program Participation System - F20942 Expense Report - Windows Internet Explorer provided by DHS - State of Wisconsin

Program Participation System User ID: PWRHC4 User Name: W Emslie

TRAINING

Navigation Menu

PPS Main Menu

- PPS Home
- Search
- Inbox
- Individuals
  - Basic Registration
  - Individual Information
- Work Management
  - Employment Outcomes
  - Family Care Support
  - Financial Reporting
    - Report Selection
  - Report Administration
  - Incident Management
  - LEA Notification
  - Referral Management
  - Workload Management
  - Waitlist Management
- Reports
  - Reports List
- System Administration
  - Agency Administration

F20942 Expense Report

Report Summary

Report Unit: OPIB Financial Reports Only Agency Contact Name:

Report: F20942 Human Services Expense Report Phone Number:

Report Year: 2010 Email:

Report Status: In Progress

Download:

Report Detail Groups

Please enter your expense data below.

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
104 - Supportive Home Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
107 - Specialized Transportation and Escort	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
200 - Access Outreach and Prevention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
300 - Community Living/Supportive Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
400 - Investigations and Assessments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
500 - Community Support Programs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
600 - Work-Related and Day Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
615 - Supported Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
950 - Juvenile Corrections	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
700 - Community Residential Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
202 - Adult Family Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
205 - Shelter Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
506 - Community Based Residential Facility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
705 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0



# Helpful Note on Cancel

- If you navigate to a page and try to navigate out without making any changes you may get one or more red error messages. To get out of the page click on the cancel button and then navigate by either clicking the Next button or one of the side menu links.

For example, if one navigates to the 942 report, does not enter any data, and then clicks on a side link i.e. Report Selection; one will get red error messages for required fields. To get out of this situation check the Cancel check box and navigate off the page.

If you click on the Reset button, data on the screen is changed back to the last save and you remain on the page.

Program Participation System - F20942 Expense Report - Windows Internet Explorer provided by DHS - State of Wisconsin

Program Participation System User ID: PWRHC4 User Name: W Emslie

TRAINING

Navigation Menu

PPS Main Menu

- PPS Home
- Search
- Inbox

Individuals

- Basic Registration
- Individual Information

Work Management

- Employment Outcomes
- Family Care Support
- Financial Reporting
  - Report Selection
  - Report Administration
  - Incident Management
  - LEA Notification
  - Referral Management
  - Workload Management
  - Waitlist Management

Reports

- Reports List

System Administration

- Agency Administration

F20942 Expense Report

Cancel

Report Summary

Report Unit: OPIB Financial Reports Only Agency \* Contact Name:

Report: F20942 Human Services Expense Report \* Phone Number:

Report Year: 2010 Email:

Report Status: In Progress

Download:

Report Detail Groups

Please enter your expense data below.

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
104 - Supportive Home Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
107 - Specialized Transportation and Escort	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
200 - Access Outreach and Prevention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
300 - Community Living/Supportive Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
400 - Investigations and Assessments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
500 - Community Support Programs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
600 - Work-Related and Day Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
615 - Supported Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
950 - Juvenile Corrections	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
700 - Community Residential Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
202 - Adult Family Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
205 - Shelter Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
506 - Community Based Residential Facility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
705 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0

(1 item remaining) Downloading picture https://trn.pps.wisconsin.gov/pps/images/navigation/ftv2plastnode.gif...

Local intranet 100%



# Data Page Navigation – exiting system

Program Participation System - F20942 Expense Report

Program Participation System UserID: PWRHC4

TRAINING

Navigation Menu

PPS Main Menu

- PPS Home
- Search
- Inbox
- Individuals
  - Basic Registration
  - Individual Information
- Work Management
  - Employment Outcomes
  - Family Care Support
  - Financial Reporting
    - Report Selection
    - Report Administration
  - Incident Management
  - LEA Notification
  - Referral Management
  - Workload Management
  - Waitlist Management
- Reports
  - Reports List
- System Administration
  - Agency Administration

F20942 Expense Report

Report Summary

Report Unit: OPIB Financial Reports Only Agency

Report: F20942 Human Services Expense Report

Report Year: 2010

Report Status: In Progress

Contact Name:

Phone Number:

Email:

Download: Save

Report Detail Groups

Please enter your expense data below.

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	0	0	0	0	0	0	0	0	\$0
104 - Supportive Home Care	0	0	0	0	0	0	0	0	\$0
107 - Specialized Transportation and Escort	0	0	0	0	0	0	0	0	\$0
200 - Access Outreach and Prevention	0	0	0	0	0	0	0	0	\$0
300 - Community Living/Supportive Services	0	0	0	0	0	0	0	0	\$0
400 - Investigations and Assessments	0	0	0	0	0	0	0	0	\$0
500 - Community Support Programs	0	0	0	0	0	0	0	0	\$0
600 - Work-Related and Day Services	0	0	0	0	0	0	0	0	\$0
615 - Supported Employment	0	0	0	0	0	0	0	0	\$0
950 - Juvenile Corrections	0	0	0	0	0	0	0	0	\$0

Logout

Cancel Reset

16 of 24 - Clipboard Item collected.



# Saving Data: Three options

- ❖ Click on a side navigation menu link.
- ❖ Click on Save button (at top or bottom of report).
- ❖ Click on Return button (bottom of report). Clicking Return will save the data and bring you back to the Report Selection

Program Participation System - F20942 Expense Report - Windows Internet Explorer provided by DHS - State of Wisconsin

User ID: PWRNCA User Name: W Enslie

Navigation Menu

20942 Expense Report

Report Summary

Report Unit: OPB Financial Reports Only Agency Contact Name:

Report: F20942 Human Services Expense Report Phone Number:

Report Year: 2010 Email:

Report Status: ☐ In Progress

Download **Save**

Report Detail Groups

Please enter your expense data below

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
104 - Supportive Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
107 - Specialized Transportation and Escort	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
200 - Access Outreach and Prevention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
300 - Community Living/Supportive Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
400 - Investigations and Assessments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
500 - Community Support Programs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
600 - Work-Related and Day Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
815 - Supported Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
950 - Juvenile Corrections	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
700 - Community Residential Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
202 - Adult Family Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
205 - Shelter Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
508 - Community Based Residential Facility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
706 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0

Program Participation System - F20942 Expense Report - Windows Internet Explorer provided by DHS - State of Wisconsin

User ID: PWRNCA User Name: W Enslie

Report Summary

Report Unit: OPB Financial Reports Only Agency Contact Name:

Report: F20942 Human Services Expense Report Phone Number:

Report Year: 2010 Email:

Report Status: ☐ In Progress

Download **Save**

Report Detail Groups

Please enter your expense data below

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
705 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
711 - Residential Care Apartment Complex - LTS Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
800 - Community Treatment Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
305 - Restitution	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
501 - Crisis Intervention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
507 - Counseling/Therapeutic Resources	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
512 - Intensive In-Home Autism Services - LTS Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
704 - Day Treatment - Medical	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
710 - Skilled Nursing - LTS only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
900 - Inpatient and Institutional Care Including IMD	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
703 - Detoxification - Hospital Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
503 - Inpatient	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
505 - DD Centers/Nursing Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
SUBTOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Adult - Age 18 Years and Over	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child - Age Under 18 Years	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Ready to Submit as Final? ☐ Yes ☒ No

**Save** **Return**

# Submitting Report as Final

- ❖ Verify that data has been keyed correctly.
- ❖ Update contact information (see red box). Include an email address if available.
- ❖ Mark “Ready to Submit as Final?” button at the bottom of the report (see red oval) as “Yes” (default is “No”).

Program Participation System - F20942 Expense Report - Windows Internet Explorer provided by DHS - State of Wisconsin

User ID: PWRMCA User Home: W Enrole

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F20942 Expense Report

Report Summary

Report Unit: OPB Financial Reports Only Agency

Report: F20942 Human Services Expense Report

Report Year: 2010

Report Status: In Progress

Contact Name:

Phone Number:

Email:

Download:

Report Detail Groups

Please enter your expense data below

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
104 - Supportive Home Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
107 - Specialized Transportation and Escort	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
200 - Access Outreach and Prevention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
300 - Community Living/Supportive Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
400 - Investigations and Assessments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
500 - Community Support Programs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
600 - Youth Related and Day Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
815 - Supported Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
950 - Juvenile Corrections	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
700 - Community Residential Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
202 - Adult Family Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
205 - Shelter Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
508 - Community Based Residential Facility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
705 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0

Program Participation System - F20942 Expense Report - Windows Internet Explorer provided by DHS - State of Wisconsin

User ID: PWRMCA User Home: W Enrole

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F20942 Expense Report

Report Summary

Report Unit: OPB Financial Reports Only Agency

Report: F20942 Human Services Expense Report

Report Year: 2010

Report Status: In Progress

Contact Name:

Phone Number:

Email:

Download:

Report Detail Groups

Please enter your expense data below

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
705 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
711 - Residential Care Apartment Complex - LTS Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
800 - Community Treatment Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
305 - Restitution	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
501 - Crisis Intervention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
507 - Counseling/Therapeutic Resources	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
512 - Intensive In-Home Autism Services - LTS Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
704 - Day Treatment - Medical	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
710 - Skilled Nursing - LTS only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
900 - Inpatient and Institutional Care Including IMD	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
703 - Detoxification - Hospital Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
503 - Inpatient	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
505 - DD Centers/Nursing Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
SUBTOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Adult - Age 18 Years and Over	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child - Age Under 18 Years	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Ready to Submit as Final? ☐ Yes ☒ No

Save

# 942 Report

■ The 942 expense report is arranged for reporting expenses by target group and standard program cluster.

■ Please note that the order of SPCs on the 942 report in PPS differs slightly from the previous 942 report in HSRS. The order was changed to group together those SPCs that provide for service level reporting (next slide)

Report Detail Groups									
Please enter your expense data below.									
STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	0	0	0	0	0	0	0	0	\$0
104 - Supportive Home Care	0	0	0	0	0	0	0	0	\$0
107 - Specialized Transportation and Escort	0	0	0	0	0	0	0	0	\$0
200 - Access Outreach and Prevention	0	0	0	0	0	0	0	0	\$0
300 - Community Living/Supportive Services	0	0	0	0	0	0	0	0	\$0
400 - Investigations and Assessments	0	0	0	0	0	0	0	0	\$0
500 - Community Support Programs	0	0	0	0	0	0	0	0	\$0
600 - Work-Related and Day Services	0	0	0	0	0	0	0	0	\$0
615 - Supported Employment	0	0	0	0	0	0	0	0	\$0
950 - Juvenile Corrections	0	0	0	0	0	0	0	0	\$0
<b>700 - Community Residential Services</b>	0	0	0	0	0	0	0	0	\$0
202 - Adult Family Home	0	0	0	0	0	0	0	0	\$0
205 - Shelter Care	0	0	0	0	0	0	0	0	\$0
506 - Community Based Residential Facility	0	0	0	0	0	0	0	0	\$0
705 - Detoxification - Social Setting	0	0	0	0	0	0	0	0	\$0
711 - Residential Care Apartment Complex - LTS Only	0	0	0	0	0	0	0	0	\$0
<b>800 - Community Treatment Services</b>	0	0	0	0	0	0	0	0	\$0
305 - Restitution	0	0	0	0	0	0	0	0	\$0
501 - Crisis Intervention	0	0	0	0	0	0	0	0	\$0
507 - Counseling/Therapeutic Resources	0	0	0	0	0	0	0	0	\$0
512 - Intensive In-Home Autism Services - LTS Only	0	0	0	0	0	0	0	0	\$0
704 - Day Treatment - Medical	0	0	0	0	0	0	0	0	\$0
710 - Skilled Nursing - LTS only	0	0	0	0	0	0	0	0	\$0
<b>900 - Inpatient and Institutional Care Including IMD</b>	0	0	0	0	0	0	0	0	\$0
703 - Detoxification - Hospital Setting	0	0	0	0	0	0	0	0	\$0
503 - Inpatient	0	0	0	0	0	0	0	0	\$0
505 - DD Centers/Nursing Home	0	0	0	0	0	0	0	0	\$0
<b>TOTAL</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>SUBTOTAL</b>	0	0	0	0	0	0	0	0	
Adult - Age: 18 Years and Over									
Child - Age: Under 18 Years	0	0	0	0					



# 942 Report

- SPCs 700, 800 and 900 have been moved near the bottom of the report. Data for these SPCs may be reported at the SPC level (blue box) or by the service level (red box).
- Report at the either SPC level or service level only. If data is entered at the service level for SPC 700, 800 or 900, subtotals are automatically calculated.

Program Participation System - F20942 Expense Report

User ID: PWRHC4 User Name: W Emise

Help Logout

## F20942 Expense Report

Cancel Reset

**Report Summary**

Report Unit: OPIB Financial Reports Only Agency Contact Name:

Report: F20942 Human Services Expense Report Phone Number:

Report Year: 2010 Email:

Report Status: In Progress

Download: Save

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- Agency Administration

**Report Detail Groups**

Please enter your expense data below.

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elderly (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	0	0	0	0	0	0	0	0	\$0
104 - Supportive Home Care	0	0	0	0	0	0	0	0	\$0
107 - Specialized Transportation and Escort	0	0	0	0	0	0	0	0	\$0
200 - Access Outreach and Prevention	0	0	0	0	0	0	0	0	\$0
300 - Community Living/Supportive Services	0	0	0	0	0	0	0	0	\$0
400 - Investigations and Assessments	0	0	0	0	0	0	0	0	\$0
500 - Community Support Programs	0	0	0	0	0	0	0	0	\$0
600 - Work-Related and Day Services	0	0	0	0	0	0	0	0	\$0
615 - Supported Employment	0	0	0	0	0	0	0	0	\$0
950 - Juvenile Corrections	0	0	0	0	0	0	0	0	\$0
<b>700 - Community Residential Services</b>	0	0	0	0	0	0	0	0	\$0
202 - Adult Family Home	0	0	0	0	0	0	0	0	\$0
205 - Shelter Care	0	0	0	0	0	0	0	0	\$0
506 - Community Based Residential Facility	0	0	0	0	0	0	0	0	\$0
705 - Detoxification - Social Setting	0	0	0	0	0	0	0	0	\$0
711 - Residential Care Apartment Complex - LTS Only	0	0	0	0	0	0	0	0	\$0
<b>800 - Community Treatment Services</b>	0	0	0	0	0	0	0	0	\$0
305 - Restitution	0	0	0	0	0	0	0	0	\$0
501 - Crisis Intervention	0	0	0	0	0	0	0	0	\$0
507 - Counseling/Therapeutic Resources	0	0	0	0	0	0	0	0	\$0
512 - Intensive In-Home Autism Services - LTS Only	0	0	0	0	0	0	0	0	\$0
704 - Day Treatment - Medical	0	0	0	0	0	0	0	0	\$0
710 - Skilled Nursing - LTS only	0	0	0	0	0	0	0	0	\$0
<b>900 - Inpatient and Institutional Care</b>	0	0	0	0	0	0	0	0	\$0
703 - Detoxification - Hospital Setting	0	0	0	0	0	0	0	0	\$0
503 - Inpatient	0	0	0	0	0	0	0	0	\$0
505 - DD Centers/Nursing Home	0	0	0	0	0	0	0	0	\$0
<b>TOTAL</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>SUBTOTAL</b>	0	0	0	0	0	0	0	0	\$0
Adult - Age: 18 Years and Over	0	0	0	0	0	0	0	0	\$0
Child - Age: Under 18 Years	0	0	0	0	0	0	0	0	\$0

Ready to Submit as Final? Yes No

Save Return

# 942 Report

Subtotals of expenses for Adults (18+) and children (<18) in DD, MH, AODA and PD/SD target groups must also be reported (red box).

Total Expense column (blue box) will update only when data is saved. There are a number of ways to save data. See slide #17.

When the report is complete, remember to enter contact information (green box) before selecting "Ready to Submit as Final" (red arrow) and saving the report.

Program Participation System - F20942 Expense Report

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  - Workload Management
  - Waitlist Management
- Reports
  - Reports List
- System Administration
  - Agency Administration

F20942 Expense Report

Report Summary

Report Unit: OPIB Financial Reports Only Agency

Report: F20942 Human Services Expense Report

Report Year: 2010

Report Status: In Progress

Contact Name:

Phone Number:

Email:

Download:

Report Detail Groups

Please enter your expense data below.

STANDARD PROGRAM CLUSTER	Developmental Disability (1)	Mental Health (2)	Alcohol/Other Drug Abuse (3)	Physical & Sensory Disability (4)	Delinquent & Status Offender (5)	Abused & Neglected Children (6)	Children & Families (7)	Adults & Elder (8)	Total Expenses Columns (1) thru (8)
100 - Child Day Care - Crisis Respite	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
104 - Supportive Home Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
107 - Specialized Transportation and Escort	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
200 - Access Outreach and Prevention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
300 - Community Living/Supportive Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
400 - Investigations and Assessments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
500 - Community Support Programs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
600 - Work-Related and Day Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
615 - Supported Employment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
650 - Juvenile Corrections	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
700 - Community Residential Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
202 - Adult Family Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
205 - Shelter Care	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
506 - Community Based Residential Facility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
705 - Detoxification - Social Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
711 - Residential Care Apartment Complex - LTS Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
800 - Community Treatment Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
305 - Restitution	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
501 - Crisis Intervention	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
507 - Counseling/Therapeutic Resources	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
512 - Intensive In-Home Autism Services - LTS Only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
704 - Day Treatment - Medical	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
710 - Skilled Nursing - LTS only	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
900 - Inpatient and Institutional Care including IMD	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
703 - Detoxification - Hospital Setting	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
503 - Inpatient	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
505 - DD Centers/Nursing Home	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
TOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
SUBTOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
Adult - Age: 18 Years and Over	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0
Child - Age: Under 18 Years	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$0

Ready to Submit as Final? ☐ Yes ☒ No

# HSRR

The HSRR report has been separated into four tabs in PPS to avoid the need to scroll (red box).

Each tab has 4 columns:

1. DD and MH (shown) – DD Children, DD Adult, MH Children, MH Adult.
2. AODA and PD/SD – AODA Children, AODA Adult, PD Children, PD Adult.
3. Other TG – Delinquent & Status Offender, Abused & Neglected Children, Children & Families, Adult & Elderly
4. Other HSRR TG – Income Maintenance, Child Care Administration, Energy Assistance, General Relief/Interim Assistance.

Program Participation System TRAINING User ID: PWRHC4 User Name: W Enslie Help Logout

## F22540 Revenue Report

Cancel Reset

Report Summary

Report Unit: OPIB Financial Reports Only Agency Contact Name:

Report: F22540 Human Services Revenue Report Phone Number:

Report Year: 2010 Email:

Report Status: In Progress

Download:

DD and MH AODA and PD/SD Other TG Other HSRR TG

Report Detail

REVENUE SOURCE	Dev. Disability Children	Dev. Disability Adult	Mental Health Children	Mental Health Adult	Total (Current Tab)	Total (All Tabs)
<b>COUNTY REVENUE</b>						
County Revenue For MH INPAT/ST Cost	0	0	0	0	\$0	\$0
County revenue Other	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>STATE/FEDERAL REVENUE - DHFS</b>						
State General Relief	0	0	0	0	\$0	\$0
Waiver Funds	0	0	0	0	\$0	\$0
BCA For MH Inpatient Costs	0	0	0	0	\$0	\$0
BCA Other	0	0	0	0	\$0	\$0
WIMCR - Act 318 Adjustment	0	0	0	0	\$0	\$0
DHS State/County Contract all other	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>STATE/FEDERAL REVENUE - OTHER AGENCIES</b>						
DWD Contract for Child Care Admin	0	0	0	0	\$0	\$0
DOC State/County Contract	0	0	0	0	\$0	\$0
DOA Contract For Energy Assistance	0	0	0	0	\$0	\$0
Area Agency on Aging Contract	0	0	0	0	\$0	\$0
DOT Funds	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>EDS REVENUE</b>						
MA FFS Revenue	0	0	0	0	\$0	\$0
WIMCR - EDS Payment	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>OTHER</b>						
Grants	0	0	0	0	\$0	\$0
Other Third Party Collections	0	0	0	0	\$0	\$0
Court Assessed Fees	0	0	0	0	\$0	\$0
Other Client Fees/Donations	0	0	0	0	\$0	\$0
Production revenues	0	0	0	0	\$0	\$0
Other revenues	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>Grand Total</b>	\$0	\$0	\$0	\$0	\$0	\$0

Ready to Submit as Final? ☐ Yes ☒ No



# 'DD and MH', 'AODA, PD/SD' tab

- Navigation Menu
- PPS Main Menu
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  - Referral Management
  - Workload Management
  - Waitlist Management
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    - Reports List
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    - Agency Administration

Report Summary

Report Unit: OPIB Financial Reports Only Agency      Contact Name: \_\_\_\_\_

Report: F22540 Human Services Revenue Report      Phone Number: \_\_\_\_\_

Report Year: 2010      Email: \_\_\_\_\_

Report Status: In Progress

Download: [icon] Save

DD and MH    AODA and PD&SD    Other TG    Other HSRR TG

Report Detail

REVENUE SOURCE	Dev. Disability Children	Dev. Disability Adult	Mental Health Children	Mental Health Adult	Total (Current Tab)	Total (All Tabs)
<b>COUNTY REVENUE</b>						
County Revenue For MH INPT/INST Cost	0	0	0	0	\$0	\$0
County revenue Other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - DHFS</b>						
State General Relief	0	0	0	0	\$0	\$0
Waiver Funds	0	0	0	0	\$0	\$0
BCA For MH Impatient Costs	0	0	0	0	\$0	\$0
BCA Other	0	0	0	0	\$0	\$0
WIMCR - Act 318 Adjustment	0	0	0	0	\$0	\$0
DHS State/County Contract all other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - OTHER AGENCIES</b>						
DWD Contract for Child Care Admin	0	0	0	0	\$0	\$0
DOC State/County Contract	0	0	0	0	\$0	\$0
DOA Contract For Energy Assistance	0	0	0	0	\$0	\$0
Area Agency on Aging Contract	0	0	0	0	\$0	\$0
DOT Funds	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>EDS REVENUE</b>						
MA FFS Revenue	0	0	0	0	\$0	\$0
WIMCR - EDS Payment	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>OTHER</b>						
Grants	0	0	0	0	\$0	\$0
Other Third Party Collections	0	0	0	0	\$0	\$0
Court Assessed Fees	0	0	0	0	\$0	\$0
Other Client Fees/Donations	0	0	0	0	\$0	\$0
Production revenues	0	0	0	0	\$0	\$0
Other revenues	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Grand Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Report Summary

Report Unit: OPIB Financial Reports Only Agency      Contact Name: \_\_\_\_\_

Report: F22540 Human Services Revenue Report      Phone Number: \_\_\_\_\_

Report Year: 2010      Email: \_\_\_\_\_

Report Status: In Progress

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DD and MH    AODA and PD&SD    Other TG    Other HSRR TG

Report Detail

REVENUE SOURCE	Alcohol/Other Drug Abuse Children	Alcohol/Other Drug Abuse Adult	Physical Sensory Disability Children	Physical Sensory Disability Adult	Total (Current Tab)	Total (All Tabs)
<b>COUNTY REVENUE</b>						
County Revenue For MH INPT/INST Cost	0	0	0	0	\$0	\$0
County revenue Other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - DHFS</b>						
State General Relief	0	0	0	0	\$0	\$0
Waiver Funds	0	0	0	0	\$0	\$0
BCA For MH Impatient Costs	0	0	0	0	\$0	\$0
BCA Other	0	0	0	0	\$0	\$0
WIMCR - Act 318 Adjustment	0	0	0	0	\$0	\$0
DHS State/County Contract all other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - OTHER AGENCIES</b>						
DWD Contract for Child Care Admin	0	0	0	0	\$0	\$0
DOC State/County Contract	0	0	0	0	\$0	\$0
DOA Contract For Energy Assistance	0	0	0	0	\$0	\$0
Area Agency on Aging Contract	0	0	0	0	\$0	\$0
DOT Funds	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>EDS REVENUE</b>						
MA FFS Revenue	0	0	0	0	\$0	\$0
WIMCR - EDS Payment	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>OTHER</b>						
Grants	0	0	0	0	\$0	\$0
Other Third Party Collections	0	0	0	0	\$0	\$0
Court Assessed Fees	0	0	0	0	\$0	\$0
Other Client Fees/Donations	0	0	0	0	\$0	\$0
Production revenues	0	0	0	0	\$0	\$0
Other revenues	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Grand Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

# 'Other TG' and 'Other HSRR TG' tabs

## Navigation Menu

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- Referral Management
- Workload Management
- Waitlist Management
- Reports
- Reports List
- System Administration
- Agency Administration

## F22540 Revenue Report

Cancel [X] Reset

### Report Summary

Report Unit: OPIB Financial Reports Only Agency      Contact Name: \_\_\_\_\_  
Report: F22540 Human Services Revenue Report      Phone Number: \_\_\_\_\_  
Report Year: 2010      Email: \_\_\_\_\_  
Report Status: In Progress

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DD and MH   AODA and PD&SD   **Other TG**   Other HSRR TG

### Report Detail

REVENUE SOURCE	Delinquent & Status Offender	Abused & Neglected Children	Children & Families	Adult & Elderly	Total (Current Tab)	Total (All Tabs)
<b>COUNTY REVENUE</b>						
County Revenue For MH INPT/INST Cost	0	0	0	0	\$0	\$0
County revenue Other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - DHFS</b>						
State General Relief	0	0	0	0	\$0	\$0
Waiver Funds	0	0	0	0	\$0	\$0
BCA For MH Impatient Costs	0	0	0	0	\$0	\$0
BCA Other	0	0	0	0	\$0	\$0
WIMCR - Act 318 Adjustment	0	0	0	0	\$0	\$0
DHS State/County Contract all other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - OTHER AGENCIES</b>						
DWD Contract for Child Care Admin	0	0	0	0	\$0	\$0
DOC State/County Contract	0	0	0	0	\$0	\$0
DOA Contract For Energy Assistance	0	0	0	0	\$0	\$0
Area Agency on Aging Contract	0	0	0	0	\$0	\$0
DOT Funds	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>EDS REVENUE</b>						
MA FFS Revenue	0	0	0	0	\$0	\$0
WIMCR - EDS Payment	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>OTHER</b>						
Grants	0	0	0	0	\$0	\$0
Other Third Party Collections	0	0	0	0	\$0	\$0
Court Assessed Fees	0	0	0	0	\$0	\$0
Other Client Fees/Donations	0	0	0	0	\$0	\$0
Production revenues	0	0	0	0	\$0	\$0
Other revenues	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Grand Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## Navigation Menu

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- Reports
- Reports List
- System Administration
- Agency Administration

## F22540 Revenue Report

Cancel [X] Reset

### Report Summary

Report Unit: OPIB Financial Reports Only Agency      Contact Name: \_\_\_\_\_  
Report: F22540 Human Services Revenue Report      Phone Number: \_\_\_\_\_  
Report Year: 2010      Email: \_\_\_\_\_  
Report Status: In Progress

Download: [X] Save

DD and MH   AODA and PD&SD   Other TG   **Other HSRR TG**

### Report Detail

REVENUE SOURCE	Income Maintenance	Child Care Administration	Energy Assistance	General Relief/ Interim Assistance	Total (Current Tab)	Total (All Tabs)
<b>COUNTY REVENUE</b>						
County Revenue For MH INPT/INST Cost	0	0	0	0	\$0	\$0
County revenue Other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - DHFS</b>						
State General Relief	0	0	0	0	\$0	\$0
Waiver Funds	0	0	0	0	\$0	\$0
BCA For MH Impatient Costs	0	0	0	0	\$0	\$0
BCA Other	0	0	0	0	\$0	\$0
WIMCR - Act 318 Adjustment	0	0	0	0	\$0	\$0
DHS State/County Contract all other	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>STATE/FEDERAL REVENUE - OTHER AGENCIES</b>						
DWD Contract for Child Care Admin	0	0	0	0	\$0	\$0
DOC State/County Contract	0	0	0	0	\$0	\$0
DOA Contract For Energy Assistance	0	0	0	0	\$0	\$0
Area Agency on Aging Contract	0	0	0	0	\$0	\$0
DOT Funds	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>EDS REVENUE</b>						
MA FFS Revenue	0	0	0	0	\$0	\$0
WIMCR - EDS Payment	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>OTHER</b>						
Grants	0	0	0	0	\$0	\$0
Other Third Party Collections	0	0	0	0	\$0	\$0
Court Assessed Fees	0	0	0	0	\$0	\$0
Other Client Fees/Donations	0	0	0	0	\$0	\$0
Production revenues	0	0	0	0	\$0	\$0
Other revenues	0	0	0	0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>Grand Total</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>



# HSRR

HSRR Note: Navigating between tabs on the HSRR will save data you have entered on the current tab

Each tab shows a total for each row of the current tab under "Total (current Tab)" as well as a total for each row across the entire report under "Total (All Tabs)."

When you have completed ALL tabs of the HSRR report and you are ready to submit, remember to provide contact information (green box) and to select "Ready to Submit as Final" button near the bottom right of any tab (red arrow).

Program Participation System TRAINING User ID: PWRHC4 User Name: W Enslie

Navigation Menu

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  - Agency Administration

F22540 Revenue Report

Report Summary

Report Unit: OPIB Financial Reports Only Agency

Report: F22540 Human Services Revenue Report

Report Year: 2010

Report Status: In Progress

Contact Name:

Phone Number:

Email:

Download:

DD and MH AODA and PD&SD Other TG Other HSRR TG

Report Detail

REVENUE SOURCE	Dev. Disability Children	Dev. Disability Adult	Mental Health Children	Mental Health Adult	Total (Current Tab)	Total (All Tabs)
<b>COUNTY REVENUE</b>						
County Revenue For MH INPAT/ST Cost	0	0	0	0	\$0	\$0
County revenue Other	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>STATE/FEDERAL REVENUE - DHFS</b>						
State General Relief	0	0	0	0	\$0	\$0
Waiver Funds	0	0	0	0	\$0	\$0
BCA For MH Inpatient Costs	0	0	0	0	\$0	\$0
BCA Other	0	0	0	0	\$0	\$0
WIMCR - Act 318 Adjustment	0	0	0	0	\$0	\$0
DHS State/County Contract all other	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>STATE/FEDERAL REVENUE - OTHER AGENCIES</b>						
DWD Contract for Child Care Admin	0	0	0	0	\$0	\$0
DOC State/County Contract	0	0	0	0	\$0	\$0
DOA Contract For Energy Assistance	0	0	0	0	\$0	\$0
Area Agency on Aging Contract	0	0	0	0	\$0	\$0
DOT Funds	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>EDS REVENUE</b>						
MA FFS Revenue	0	0	0	0	\$0	\$0
WIMCR - EDS Payment	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>OTHER</b>						
Grants	0	0	0	0	\$0	\$0
Other Third Party Collections	0	0	0	0	\$0	\$0
Court Assessed Fees	0	0	0	0	\$0	\$0
Other Client Fees/Donations	0	0	0	0	\$0	\$0
Production revenues	0	0	0	0	\$0	\$0
Other revenues	0	0	0	0	\$0	\$0
<b>Total</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>Grand Total</b>	\$0	\$0	\$0	\$0	\$0	\$0

Ready to Submit as Final? ☐ Yes ☒ No

# Questions about Financial Reports (942 and HSRR) in PPS

## ■ Contacts

- SOS Desk

- Hours: Monday through Friday

8:00 – 11:30 AM

12:30 - 4:00 PM

(you may leave voice mail at other times  
and someone will return your call)

- E-mail: [DHSSOSHelp@wisconsin.gov](mailto:DHSSOSHelp@wisconsin.gov)

- Phone: (608) 266-9198

- Fax: (608) 267-2437