



STATE OF WISCONSIN  
DEPARTMENT OF HEALTH SERVICES  
TRIBAL AFFAIRS OFFICE

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**TRIBAL COMMUNITY AIDS REPORTING SYSTEM (CARS)  
ACCOUNTING REPORTS MANUAL**

**CHAPTER III**

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**TRIBAL CARS PROFILE NUMBER: 66302**

**PROFILE ID TITLE:** IM Medicaid

**FULL TITLE:** Income Maintenance Medicaid

**REPORTING INSTRUCTIONS:** DO NOT REPORT COSTS ON THIS PROFILE

IM Administration Medicaid expenses allocate to this profile from Profile 66300. This profile then allocates 50% Profile 66320 Non-Fed and Profile 50% 66323 IM WMA Fed.

**PROFILE TYPE:** G - Allocates to Another

**EXPENSES ROLL TO THIS PROFILE FROM:**

**EXPENSES ROLL FROM THIS PROFILE TO:**

**EXPENSES ALLOCATE TO THIS PROFILE FROM:** 66300

**EXPENSES ALLOCATE FROM THIS PROFILE TO:** 66320, 66323

**REIMBURSEMENT PERCENTAGE:** 100 Percent

**LIMITATIONS:** 9-Month

**FEDERAL CATALOG (CFDA) NUMBER:** CFDA 435.66320, CFDA 93.778

**DIVISION RESPONSIBLE:** Health Care Access and Accountability