



STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
TRIBAL AFFAIRS OFFICE

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

CHAPTER III

TRIBAL CARS PROFILE NUMBER: 66324

PROFILE ID TITLE: IM BC +T19 Fed Reimb

FULL TITLE: Income Maintenance BadgerCare Plus Title 19 Federal Reimbursement

REPORTING INSTRUCTIONS: DO NOT REPORT EXPENSES ON THIS PROFILE

This profile is for the federal payment of the Medicaid BadgerCare plus expenses. The eligible IM expenses are identified in Appendix B of the State and Tribe contract.

PROFILE TYPE: E - Sum Sufficient

EXPENSES ROLL TO THIS PROFILE FROM:

EXPENSES ROLL FROM THIS PROFILE TO:

EXPENSES ALLOCATE TO THIS PROFILE FROM: 66303

EXPENSES ALLOCATE FROM THIS PROFILE TO:

REIMBURSEMENT PERCENTAGE: 100%

LIMITATIONS: None

FEDERAL CATALOG (CFDA) NUMBER: CFDA: 93.778

DIVISION RESPONSIBLE: Health Care Access and Accountability