



STATE OF WISCONSIN
DEPARTMENT OF HEALTH SERVICES
DIVISION OF ENTERPRISE SERVICES
BUREAU OF FISCAL SERVICES

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

CARS PROFILE ID: 155805

PROFILE NAME: COVID19 Contact Tracing

FULL PROFILE NAME: COVID19 Contact Tracing

DIVISION RESPONSIBLE: Division of Public Health

PROFILE TYPE: F - Contract Controlled

CONTRACT TYPE: Other

REIMBURSEMENT PERCENTAGE: 100%

LIMITATIONS: None

EXPENSES ROLL TO THIS PROFILE FROM: N/A

EXPENSES ROLL FROM THIS PROFILE TO: 155805

EXPENSES ALLOCATE TO THIS PROFILE FROM: N/A

EXPENSES ALLOCATE FROM THIS PROFILE TO: N/A

**CATALOG OF FEDERAL DOMESTIC ASSISTANCE
(CFDA) NUMBER:** Enter Text

**REPORTING
INSTRUCTIONS:**

Public Health Departments will submit expense reports on a monthly basis to CARS for any eligible expenses related to disease investigation within 24 hours of lab results, contact interviews within 48 hours of lab results and daily check in calls for each person in isolation or quarantine for 14 days.