



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: 155902***

**PROFILE NAME:** HIV LCS/EI(GPR)

**DIVISION RESPONSIBLE:** DPH

**PROFILE TYPE:** F – Contract Controlled

**CONTRACT TYPE:** Other

**REIMBURSEMENT PERCENTAGE:** 100.000

**LIMITATIONS:** N/A

**EXPENSES ROLL TO THIS PROFILE FROM:** N/A

**EXPENSES ROLL FROM THIS PROFILE TO:** 155902

**EXPENSES ALLOCATE TO THIS PROFILE FROM:** N/A

**EXPENSES ALLOCATE FROM THIS PROFILE TO:** N/A

**CATALOG OF FEDERAL DOMESTIC  
ASSISTANCE (CFDA) NUMBER:** N/A

**PROFILE DESCRIPTION:**

1. The Department's allowable cost policy applies.
2. Reported expenditures on form DMT-855 (CARS Expenditure Report Form)
3. Activities include: Provides home and community based services for HIV infected clients. Includes primary medical care, dental and needs assessment services.