***Child Care Counts: Stabilization Payment Program***

**REQUEST FOR REVIEW**

If you believe you were wrongfully denied a Child Care Counts payment or that your *Child Care Counts* overpayment was established in error, you may seek review of that denial or overpayment by filling out this form and following the instructions below:

* Your request must be emailed, faxed, or postmarked **no later than 10 calendar days of the date on the denial or overpayment letter**. Email is recommended to avoid delays.
* State clearly and specifically what you believe was incorrect in this decision.
* Attach any relevant documentation to support your claim.
* Email, mail or fax your request:
  + **Email**: [DCFDECECOVID19CCPayments@wisconsin.gov](mailto:)
  + **Mail**: Wisconsin Department of Children and Families

BCCSA/OPA

PO Box 8916

Madison, WI 53708-8916

* + **Fax**: 608-266-5473
* The review will be limited to the statement and supporting documentation you submit unless the reviewing authority has questions or seeks clarification from you.

A DCF representative will contact you within one business day to confirm receipt of your request.

|  |  |
| --- | --- |
| Applicant Full Name |  |
| Facility Name |  |
| Provider/Location Number |  |
| Phone Number/Email |  |
| Denial or Overpayment Letter Date |  |
| Denial Reason (if applicable) |  |
| *Use this space below to state clearly and specifically what you believe was incorrect in the denial decision. Be sure to attach relevant documentation to support your claim.* | |

(08/2023)