

To: DCF/DMCPS Administrator  
DCF Area Administrators  
Child Placing Agency Directors  
Child Welfare Agency Directors  
County Departments of Community Programs Directors  
County Departments of Human Services Directors  
County Departments of Social Services Directors  
Group Home Providers  
Tribal Social Service/Indian Child Welfare Directors  
Private Child Placing Agencies  
Residential Care Center Providers  
Shelter Care Providers  
Tribal Chairpersons

From: Wendy Henderson   
Administrator

Re: Covid-19 Public Health Emergency Funds for Congregate Care

## PURPOSE

The purpose of this memo is to provide the process to request funds related to increased costs to Group Homes and Residential Care Centers due to the increased costs to provide care and support continuity for children in out-of-home care as a result of the Covid-19 Public Health Emergency.

## BACKGROUND

Governor Tony Evers declared a public health emergency due to the spread of COVID-19 in the state of Wisconsin. DCF recognizes the acute need for emergency funding related to caring for children during the public health emergency. DSP recognizes the need to provide additional financial support to cover unforeseen costs to continue facility operations during this time. These funds will be limited to additional costs incurred specifically related to, and for the duration of, the current public health emergency for placements made by counties, DMCPs, and the Department.

## INFORMATION SUMMARY

DSP will utilize the extraordinary payment request process to supplement additional facility costs related to the COVID-19 Public Health Emergency for placements by WI public purchasers. Costs can be related to lost capacity, consumables, plant and property changes, staffing. Emergency placement fees may also be charged to support facilities continuing to accept new placements after the issuance of this memo and during the duration of the public health emergency. Please follow the below steps to request a COVID-19 extraordinary payment.

Complete and submit the following documents to request extraordinary payments for additional funds related to COVID-19:

- An Extraordinary Payment Request (DCF-F-2794-E) Form for each facility you operate that has placements made by a Wisconsin County, DMCPs, or the Department  
<https://dcf.wisconsin.gov/files/forms/doc/2794.docx>
  - The facility should complete the top portion of the form as normal, leaving the child information blank, as it will be provided on the [COVID EPR Provider Cost Worksheet](#) described below.

- Under Provider rationale for the request please complete as follows:

Provide rationale for the request that includes all of the following.

1. An explanation of the child's service needs that are not accounted for in the daily rate.

COVID-19 Public Health Emergency

2.  Yes  No Are the child's service needs paid for by another source; e.g., Medicaid, insurance, SSI, etc.? If "Yes", specify the source.

3. Provide a breakdown of the additional costs by cost category (as defined per the Provider Cost and Service Report) and the means by which additional services be provided.

See attached COVID-19 EPR Provider Cost Report Worksheet

- A completed [COVID EPR Provider Cost Worksheet](#) for the agency. Instructions to complete the worksheet are contained in the worksheet.
- **Submit** the Extraordinary Payment Request Form and the COVID EPR Provider Cost Worksheet for each facility to the Rate Regulation email box:
  - [DCFCWLRateReg@wisconsin.gov](mailto:DCFCWLRateReg@wisconsin.gov)
  - Subject Line: *COVID-19 Extraordinary Payment Request*

A provider may request a new calculation or add additional new placements to the calculation after the original request is approved by the Department. To make either additional request, a provider must follow the processes listed below:

- To make a request for an entirely new calculation once one is already approved, an agency shall submit the above information again.
  - An [Extraordinary Payment Request](#) (DCF-F-2794-E) Form for each facility you operate that has placements made by a Wisconsin County, DMCPs, or the Department.
    - The facility should complete the top portion of the form as normal, leaving the child information blank, as it will be provided on the COVID EPR Provider Cost Report Worksheet described below
    - Under Provider rationale for the request please complete as follows:

Provide rationale for the request that includes all of the following.

1. An explanation of the child's service needs that are not accounted for in the daily rate.

COVID-19 Public Health Emergency

2.  Yes  No Are the child's service needs paid for by another source; e.g., Medicaid, insurance, SSI, etc.? If "Yes", specify the source.

3. Provide a breakdown of the additional costs by cost category (as defined per the Provider Cost and Service Report) and the means by which additional services be provided.

See attached COVID-19 EPR Provider Cost Report Worksheet

- A completed [COVID EPR Provider Cost Worksheet](#) for the agency. Instructions to complete the worksheet are contained in the worksheet.
- **Submit** the Extraordinary Payment Request Form and the COVID EPR Provider Cost Worksheet for each facility to the Rate Regulation email box:
  - [DCFCWLRateReg@wisconsin.gov](mailto:DCFCWLRateReg@wisconsin.gov)
  - Subject Line: COVID-19 Extraordinary Payment Request
- When a new child is placed in the facility, the provider may make a request for that new child to have the COVID-19 (already approved) extraordinary costs applied to that child and/or add the Emergency Placement Fee to the new child's extraordinary rate, an [Extraordinary Payment Request](#) (DCF-F-2794-E) Form must only be submitted. The Department will use the amounts previously approved for the extraordinary payment for the child, plus the Emergency Fee if requested.

Group Homes and Residential Care Centers seeking to access additional funding shall **submit** the application information to the Rate Regulation email:

[DCFCWLRateReg@wisconsin.gov](mailto:DCFCWLRateReg@wisconsin.gov)

Subject Line: COVID-19 Extraordinary Payment Request

DCF will process and approve each request directly in eWisACWIS for each child placed by a county in Wisconsin, DMCPs, or the Department. Additional costs incurred to support the continuity of placements

that are private pay, out-of-state or by the Division of Juvenile Corrections should be resolved with those placing entities for the duration of the COVID-19 public health emergency. DCF will approve requests as funds allow.

Requests submitted and approved are required to be a reasonable and allowable costs. DCF may ask for further documentation of what was actually incurred. These are extraordinary payments and will be taken into consideration in next year's rate setting process just as these types of payments are today. These funds are subject to the rules related to allowable profit or reserves.

County agencies will process the Extraordinary Payment Requests approved by the Department cued for payment through the normal financial batch processing. Counties are encouraged to process these payments weekly so as to expedite the availability of funds to the facilities currently incurring increased costs due to the COVID-19 public health emergency. Additional guidance for county agencies will be included with the State/County contract amendments the week of April 6, 2020.

**Virtual Guidance on the Submission of the Extraordinary Rate Request Process for COVID-19:**

In an effort to assist facilities in completing the forms accurately, DCF will be hosting SKYPE calls to review the Extraordinary Rate Request Process for COVID-19 related costs for each facility type on the following dates and times:

**April 3, 2020**

3:00-3:30 Residential Care Centers: **Toll Free:** 877-336-1831  
**USA Caller Paid/International Toll:** 404-443-6397  
**Access Code:** 226894  
[Join Skype Meeting](#)

3:30-4:00 Group Homes: **Toll Free:** 877-336-1831  
**USA Caller Paid/International Toll:** 404-443-6397  
**Access Code:** 226894  
[Join Skype Meeting](#)

4:00-4:30 Shelter Care Facilities: **Toll Free:** 877-336-1831  
**USA Caller Paid/International Toll:** 404-443-6397  
**Access Code:** 226894  
[Join Skype Meeting](#)

**Follow-up calls to answer additional questions are scheduled for April 8, 2020 at:**

1:30-2:30 Residential Care Centers: **Toll Free:** 877-336-1831  
**USA Caller Paid/International Toll:** 404-443-6397  
**Access Code:** 226894  
[Join Skype Meeting](#)

2:30-3:00 Group Homes: **Toll Free:** 877-336-1831  
**USA Caller Paid/International Toll:** 404-443-6397  
**Access Code:** 226894  
[Join Skype Meeting](#)

CENTRAL OFFICE CONTACT: Section Chief  
Bureau of Permanence and Out-of-Home Care  
Out-of-Home Care Section  
(608) 422-6930

MEMO WEB SITE: <https://dcf.wisconsin.gov/cwportal/policy>

Attachment Links:

Extraordinary Payment Request(DCF-F-2794-E) - For use by providers to request extraordinary payments from Wisconsin Public Purchaser.

<https://dcf.wisconsin.gov/files/forms/doc/2794.docx>

COVID-19 EPR Cost Report Worksheet – Used to demonstrate the additional costs by category for the response to COVID-19 Public Health Emergency

<https://dcf.wisconsin.gov/files/ratereg/excel/COVIDEPRWorksheetforProviders.xlsx>