



Wisconsin Shares

CSAW User Guide
Authorization Management

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Division of Early Care and Education

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Authorization Management Introduction

From the CSAW home page, select the Authorization Management link located on the left side of the blue menu bar or select the desired link under Authorization Management heading.



The menu lists links to the Authorization Management pages.

New Authorization: Use this page to write a new authorization to a case that currently has no authorization. Use the case number, PIN, SSN, or last name and first name to find the case.

Existing Authorization for Case: Use this option to find recent authorizations for a case. Use the case number, PIN, SSN, or last name and first name to find the case.

Existing Authorization for Provider: Use this option allows you to search for authorizations at a specific provider.

End/Delete Authorization: Use this link to go directly to the page where you will end or delete an authorization.

School Bank Hours: This link will find a child or case for which you want to work with school bank hours for a school aged child.

Education Tracking: This link will bring you to individual search page where you can find an individual for whom you want to update the Education Tracking page.

Case Activity Summary: The case activity summary page displays the approved activity of the parent(s).

YoungStar

The goal of YoungStar is to improve the quality of child care and reward high-quality providers through a 5 Star quality rating system and by paying quality bonuses to 4 Star and 5 Star child care providers.

All Certified Family providers, Licensed Family providers, Licensed Group child care centers, public school programs that provide care outside the normal school day, and licensed day camps must participate in YoungStar before they can receive a Wisconsin Shares authorization.

All providers participating in YoungStar are required to complete the YoungStar rating process. Providers will be rated on a scale from 5 Stars to 1 Star.

- 5 Stars: Provider meets highest levels of quality standards. A 15% bonus is applied.
- 4 Stars: Provider meets elevated levels of quality standards. A 10% bonus is applied.
- 3 Stars: Provider meets proficient levels of quality standards. No bonus is applied.
- 2 Stars: Provider meets health and safety standards. A 5% reduction is applied.
- 1 Star Providers: These providers are not eligible for authorizations. These providers' child care licenses or certifications have been revoked, denied or suspended, even if they are in appeal status, or their Wisconsin Shares payments have been suspended due to fraud or suspected fraud.

Anniversary Date

The YoungStar Case Management system assigns an “anniversary date” to each provider location once the rating is complete. The anniversary date is the date the program was first rated in YoungStar. Providers must annually reapply to YoungStar by submitting a YoungStar Contract Renewal to the local YoungStar office prior to the provider’s anniversary date.

Example: If a provider’s rating was completed on October 1, 2011, the provider’s anniversary date is October 1, 2012, and October 1 of each subsequent year, as long as there are no breaks in the provider’s YoungStar contract.

CSAW will allow authorizations beyond the anniversary date however; all authorizations will automatically end when the grace period expires if the provider has not submitted their YoungStar Contract Renewal. During the grace period, new authorizations cannot be entered in CSAW. If the YoungStar Contract Renewal is entered by local YoungStar office staff during the grace period, local agency workers will be able to backdate authorizations to the provider’s anniversary date.

Authorizations during the Grace Period

CSAW will not allow new authorizations when child care providers have not returned their YoungStar Contract by their Anniversary Date and are in their six (6) to twelve (12) day grace period.

If a provider returns the YoungStar Contract during their grace period, the worker must retroactively authorize during the grace period if the parent was eligible for Wisconsin Shares and in an approved activity.

If a provider returns the YoungStar Contract after the grace period, authorizations will be allowed starting the Sunday of the week during which the contract was received.

Provider Regulation – Category Changes – New Certified Providers

When a program moves or the ownership changes, there may be ramifications related to YoungStar that could result in the provider needing to submit a new YoungStar Contract, which would affect the ability to create authorizations.

YoungStar Contracts and instructions regarding their submission to the local YoungStar office are included in all certification and licensing packets. It is the provider's responsibility to contact the local YoungStar office when the provider receives their provider, location and/or facility numbers. Once this information is received, YoungStar staff will enter the information into the YoungStar Case Management System, which will in turn allow for the creation of authorizations in CSAW.

Exceptions: Certified In-Home and Out-of-State

Certified In-Home, Out-of-State and temporarily unregulated providers will not be rated and are not eligible to receive YoungStar technical assistance or other provider services. Certified In-Home and Out-of-State providers will continue to receive Wisconsin Shares reimbursement if they sign a contract with the Department of Children and Families.

Certified In-Home providers must submit the Wisconsin Shares Participation Contract to DCF. If the Wisconsin Shares Participation Contract is not submitted, Wisconsin Shares authorizations and payments cannot be back dated to the date of application. Authorizations can only go as far back as the contract begin date or the provider regulation date, whichever is later.

NOTE: If a provider changes from provisional/regular to Certified In-Home provisional/regular, the provider must submit Wisconsin Shares Participation Contract before authorizations can be written in CSAW.

The Wisconsin Shares Participation Contract is available at <http://dcf.wisconsin.gov/forms/pdf/2587.pdf>

Contracts for Certified In-Home and Out-of-State should be returned to:

DCF/YoungStar
201 E. Washington Ave
Madison, WI 53708-8916
FAX: 608-267-7252

The Wisconsin Shares Participation Contract is valid for two years. CSAW will send a new Wisconsin Shares Participation Contract to Certified In-Home and Out-of-State providers at least 60 days before their contract expires.

Out-of-State providers receive Wisconsin Share reimbursement at 100% of the pre-YoungStar rate. Out-of-State providers receive a 10% increase for Accreditation accepted by Wisconsin Shares if their private price is at or below the maximum rate plus 10%.

New Authorizations

CSAW Will Not Allow a New Authorization

CSAW will not allow a new authorization to be written in the following situations:

- The licensed child care provider does not have a corresponding rate for the child's age group. This could be a part-time rate or a full-time rate.
- The child care provider is not in operation during the child's authorization timeframe.
- The child care provider's license or certification has expired.
- The YoungStar Contract has not been renewed and the child care provider is in the grace period (Certified or Licensed Child Care providers) if the grace period ends and the YoungStar Contract is not renewed all existing authorizations will end.
- An In-Home or Out-of-State child care provider's Wisconsin Shares contract has expired.
- The child care provider's YoungStar rating dropped to 1Star.
- The child has been removed from the home.

To create an authorization for a new case, select the *New Authorization* link from the navigation menu. The case search page is displayed, enter the case number.

List of Recent Authorizations

List of Recent Authorizations			
Case Details			
Case Number	2150787423	AG Status	Open
Admin Agency	Dane County (13)	Review Date	1/31/2016
Auth Worker ID		SMRF Date	7/31/2015
		Primary Person	Kesha Jones
		Address	1 W Wilson St Po Box 7850 Madison WI 53703-3445 Dane County

List of Recent Authorizations for the Case
No recent authorizations for the case.

Select this link to write a new authorization. [Authorize to a New Provider Location](#)

If the case has no previous authorizations, select *Authorize to a New Provider Location* and the *Search for a Provider* page will display. You may also use the new Advanced Search to further define your search.

The administrative agency information (highlighted in yellow above) has been added to the following pages: List of Recent Authorizations, Case Activity Summary, New Authorizations, Confirm Authorizations, Case Utilization Listing, and any other case related screens in the issuance module.

New Advanced Search

Advanced Search

If you are looking for a new location that was added today, you may need to use the [Basic Search](#)

Search For a Provider

Search Criteria

Provider ID(s)

Provider Number (Enter 10 Digits) Location Number

Tax ID Number (Enter 9 Digits) Facility ID

Provider Name Starts With Sounds Like Exact Name Contains

First Name Last Name

Business Name Facility Name

Address

Address

City

County

The Advanced Search offers many options for search criteria in addition to those in the Basic Search. You may search by provider type, licensed for certified, Star level, day or night care, or ages served.

<p>Type of Care</p> <p><input checked="" type="checkbox"/> Group Centers</p> <p><input checked="" type="checkbox"/> Family Providers</p> <p><input checked="" type="checkbox"/> Day Camps</p>	<p>Regulation</p> <p><input type="checkbox"/> Licensed/Public school</p> <p><input type="checkbox"/> Certified</p> <p><input checked="" type="checkbox"/> Licensed, Public School, and/or Certified</p>	<p>Star level</p> <p><input checked="" type="checkbox"/> 1 Star (Out of compliance)</p> <p><input checked="" type="checkbox"/> 2 Stars</p> <p><input checked="" type="checkbox"/> 3 Stars</p> <p><input checked="" type="checkbox"/> 4 Stars</p> <p><input checked="" type="checkbox"/> 5 Stars</p> <p><input checked="" type="checkbox"/> Not Rated/Out of state/In home</p>	<p>Time of Care</p> <p><input checked="" type="radio"/> Daytime or Night Care</p> <p><input type="radio"/> Daytime Care</p> <p><input type="radio"/> Night Care</p> <p><input type="radio"/> Daytime and Night Care</p> <p><input checked="" type="checkbox"/> Include Unknowns</p>	<p>Age of Children</p> <p style="text-align: right;">Youngest</p> <p style="text-align: right;"><input type="text"/> Any age</p> <p style="text-align: right;">Oldest</p> <p style="text-align: right;"><input type="text"/> Any age</p> <p><input checked="" type="checkbox"/> Include Unknowns</p>
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Authorization Related

List Only Locations eligible for authorization Include All Locations Custom

You may further narrow the search to include only providers that are currently eligible for authorizations; or by any additional custom criteria.

In Compliance (YoungStar rating is not equal to 1)

Participates in YoungStar or Has shares contract

Provider Rate Exists

Not suspended

Payment details completed

This feature enables you to narrow search criteria to licensed provider, or certified providers, Group Centers or Family child care providers. You may also narrow your search by Star level, hours of operations, and ages served.

Further, you may select to include only child care providers that are currently eligible for child care authorizations based on selected custom criteria.

Basic Search

The screenshot shows a web form titled "Search For a Provider" under the heading "Search". The form is divided into two main sections: "Search Criteria" and "Name search method".

Search Criteria:

- Advanced Search:** Check this box to get a listing of crossmatches based on the Business and Individual Name.
- Display All Locations:** Check this box to include invalid locations in the search results.
- Provider Number:** (Enter 10 Digits)
- Location Number:**
- Tax ID Number:** (Enter 9 Digits)
- Facility ID:**

Name search method: Starts With Sounds Like Exact

Name Fields:

- First Name:**
- Last Name:**
- Business Name:**
- Location Name:**
- Payee Name:**

At the bottom of the form, there is a "Search >" button and a blue link labeled "Search by Location Address".

Two red callout boxes with arrows pointing to the input fields provide additional instructions:

- The first callout box points to the Provider Number, Location Number, Tax ID Number, and Facility ID fields. It contains the text: "If you know the provider's number, tax ID, or Facility ID you may enter that search criteria here."
- The second callout box points to the First Name, Last Name, and Business Name fields. It contains the text: "If you know the provider's name, or business name you may enter that search criteria here."

If previous authorizations exist, and you want to create a new authorization to the same provider, simply click on the *New Authorization* link to the right of the Provider's Name and Number.

If you want to create an authorization to a new provider, click on the *Authorize to a New Provider Location* link on the lower right-hand corner of the screen. This link brings you to the *Provider Search* page and where you will search for the provider.

If the parent has selected a new provider, the authorization to the old provider must be end-dated. The two authorizations must not overlap.

Provider Management | Authorization Management | Issuance Management | PIES - Payment Adjustment Management | Report Management | Announcements | Administration | CCPI | WISCCRS | YoungStar

Authorization Menu

- New Authorization
- Case Activity Summary
- Existing Authorizations
 - Search by Case
 - Case Utilization
 - Education Tracking
 - End/Delete Authorization/s
 - Issuance History
 - Adjustment Requests List
 - School Bank Hours
 - Search by Provider
 - Location Details
 - Issuance History
 - Adjustment Requests List
 - Authorization Referral

List of Recent Authorizations

Case Details

Case Number 170047
 AG Status Open
 Auth Worker ID XCTR3

Agency 13
 Agency Person Chevy Silverado
 Review Date 10/31/2013
 MRF Date 4/30/2013

To authorize to the same provider select New Authorization

List of Recent Authorizations for the Case

Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEG DATE	END DATE	DAYS	REL	SPL	AUTH #	IND
Provider # / Name: 8800039458 - Patty Cake Day Care Location # / Name: 001 - Patty Cake 1												
Sten Silverado	01/24/08	LGRP	REG	A	R	01/27/13	04/27/13	35	N	N	3800297203	
Sten Silverado	01/24/08	LGRP	REG	E	R	02/03/13	03/09/13	35	N	N	5800297205	
Sten Silverado	01/24/08							20	N	N	8800297158	
Sten Silverado	01/24/08							20	N	N	7800297147	

To authorize to a different provider select Authorize to a New Provider Location

* Indicates the authorization is in pending status. If not confirmed by end of the day, Authorizations will be deleted. Click [here](#) to go to confirmation page.

[New Authorization](#)

[Authorize to a New Provider Location](#)

The *Case Activity Summary* page will display every time a new authorization is being written. Review this page to understand the parent's approved activity hours.

Case Activity Summary

The *Case Activity Summary* page is part of the driver flow and is displayed before every new authorization is written. This page provides up-to-date information about the approved activities of the *Eligible Adults* in the case. If there are two adults in the Assistance Group, the approved activity information for both adults is listed on this page.

Case Activity Summary

Case Activity Summary					
Case Details					
Case Number	0150749503		Agency	13	
AG Status	Open		Primary Person	Cassy Scenario	
Auth Worker ID			Review Date	12/31/2013	
			SMRF Date	12/31/2013	
Details of Eligible Adults in the Case					
Name:	Cassy Scenario		Approved Activity:	Unsubsidized Work	
			Effective Month:	07/2013	
Employment Details					
Employer Name	Address	Tax ID	Employment Type	Monthly Hours	End Month
Us Bank		2587458787	Regular Employment	22	
Self Employment Details					
There are No Self Employment Details.					
School Enrollment Details					
Enrollment Status	Highest Level of Education Completed	High School Graduation Status	Type of Educational Institution	School Name	
Not Enrolled					
Current W2 Placement: CSJ Full Community Service Job					
Employability Plan Activities					
			Employability Plan: 08/08/13 thru 12/15/13		
Activity	Begin Date	End Date	Weekly Hours	Childcare Indicator	
Job Search	08/08/13	12/15/13	10	Y	
Work Experience	08/19/13	12/15/13	20	Y	
W-2 Components					
Type	Phase	Begin Date	End Date	Daily Hours	Weekly Hours
Emp Search	Actual	08/08/13		2	10
Work Exper	Scheduled	08/08/13		0	0

The Case Activity Summary displays:

- Employment Details, if employment has recently been ended, an end month will display.
- Self-Employment Details, if an adult is self-employed, a calculation of maximum authorized hours will be displayed, however please review Child Care Policy Manual Chapter 3 for determining self-employment authorized hours.
- School Enrollment Details, if a parent or guardian is enroll in education as documented in CWW, it is displayed.
- W-2 Placement information, the W-2 placement is displayed.
- Assigned W-2 or FSET activities from the Employability Plan are displayed.
- Assigned activities from the WPCH screen in CARES.

Education tracking is still entered by workers on the Education Tracking page. The Case Activity Summary page has been modified as a convenience to display a running total of post-secondary and adult basic education (referred to as High School Education Tracking months used that have been recorded by workers on the Parent Education Tracking page).

The following Case Activity Summary example page is for Kesha Jones who is self-employed. Kesha is currently enrolled in school part-time and has previously used 3 months of authorized childcare for approved post-secondary education. -The Parent Education Tracking page is to be used by authorization workers to record months authorized for post-secondary or basic education that was approved to maintain employment. Education is not tracked on the Parent Education Tracking page for authorized childcare for W-2 participant activities on an Employment Plan.

Case Activity Summary			Printable View
Case Activity Summary			
Case Details			
Case Number 2150787423	AG Status Open	Primary Person Kesha Jones	
Admin Agency Dane County (13)	Review Date 1/31/2016	Address 1 W Wilson St Po Box 7850 Madison WI 53703-3445 Dane County	
Auth Worker ID	SMRF Date 7/31/2015		
Details of Eligible Adults in the Case			
Name: Kesha Jones (2584901102)	Approved Activity: Unsubsidized Work	Effective Month: 02/2015	
Employment Details			
There are No Employment Details.			
Self Employment Details Budgeted Self Employment Income: \$250.00 Allowed Weekly Hours*: 9			
Business Type	Business Name	Start Month	
Cosmetics - Sales/Avon		02/2013	
School Enrollment Details			
Enrollment Status	Highest Level of Education Completed	High School Graduation Status	Type of Educational Institution School Name
Half Time	Hs Diploma		Institute Of Higher Educ
Post Secondary Education Tracking		Basic Education Tracking	
3.0 months used		0 months used	

This activity information comes from CWW and CARES mainframe. If the *Eligible Adult* is employed the information comes from the CWW employment page; if self-employed, the information comes from the self-employment pages in CWW. School enrollment information comes from the school enrollment page in CWW. If the *Eligible Adult's* approved activity is EMTS or EMGE the school enrollment page in CWW must be completed for that individual.

The information on this page is refreshed twice each business day and therefore is reliable information to base a child care authorization on. For policy clarification regarding approved activities, please refer to the Wisconsin Shares Policy manual. After you've reviewed the approved activities, select the *New Authorization* link at the bottom of this page to navigate to the *New Authorization* screen.

New Authorizations

Case Details											
Case Number	2150755424					Agency	13				
AG Status	Open					Primary Person	Lady Macbeth				
Auth Worker ID						Review Date	3/31/2014				
						SMRF Date	9/30/2013				
Location Details											
Provider/Location#	4800036944/002					Months Open	Jan-Dec				
Provider Name	George Harrison Jr					Group Size	12				
Location Name	Beetle 2					Children under Age of Seven	12				
Phone #	(454) 545-4545					Hours: MON-FRI	7:00AM - 7:00PM				
Address	Fall River Beetletown WI 45454					SAT-SUN	Closed				
Eligible Children											
Auth Worker ID	XCTD03		Attendance Needs Confirmation?: No - County does not require confirmation								
Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS
Glamis Macbeth	04/02/12	N	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

New authorizations are written on the *New Authorization* screen. The authorization worker must authorize the correct number of hours, the correct authorization type, copayment type, and accurate begin and end-dates of the authorization for each child in the family.

If a child has been removed from the Assistance Group CSAW will not allow a future authorization to be written, you may however be able to write a retro-authorization.

The following functionality has been added: New Authorization timeframes will be cross checked with Provider operation month timeframes to ensure authorizations are not written for months when the facility is not open. CSAW will prohibit an authorization when timeframes do not correspond.

New Authorizations

New Authorizations

Case Details

Case Number 5150772658 **Agency** 13
AG Status Open **Primary Person** Suzie Foster
Auth Worker ID XCTR34 **Review Date** 12/31/2014
SMRF Date 6/30/2014

Location Details

Provider/Location# 3800039653/001 **Months Open** Jan-Dec
Provider Name Dane Danielson **Night Capacity** 0
Location Name Dane Day Care **Day Capacity** 8
Phone # (454) 545-4545 **Hours: MON-SAT** Closed
Address Dane St **SUN** 6:00AM - 6:00PM
Dane WI 45454

Eligible Children

Auth Worker ID XCTR34 **Attendance Needs Confirmation?:** No - County does not require confirmation

Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS
Kidd Toopenim	03/01/09	N									
Little Boy	06/01/08	N									

⚠ This child is no longer in this Assistance Group.

Add > < Back to Previous Page

In the example above, a warning message is displayed to indicate that this child has recently been removed from the case.

Eligible Children

Auth Worker ID XCTD03 **Attendance Needs Confirmation?:** No - County does not require confirmation

Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS
Glamis Macbeth	04/02/12	N									

The **Auth Worker ID** defaults to the eligibility worker. If a previous authorization has been written that worker's ID is pre-filled. The location county that is associated with the Auth Worker ID will be the return address of the provider's attendance report form. Alerts are generated to the worker identified in this field when the eligibility worker completes changes in CWW that could affect the authorization. This includes alerts when there are changes on the Employment screen to increase or decrease the hours worked per month.

Eligible Children

Auth Worker ID XCTD03 **Attendance Needs Confirmation?:** No - County does not require confirmation

Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS
Glamis Macbeth	04/02/12	N									

Scl Ind: The school age indicator. CSAW automatically marks all children 5 years old. In this example the child is not school aged.

When a child will only need child care when school is closed due to weather or short breaks you will write a **zero-hour authorization**. Write a zero hour authorization only when the child does not need child care before and/or after school. Use “A” (attendance) Auth Type, and enter 0 in the “HRS” field.

When the child care provider records attendance on a zero-hour authorization all hours are recorded as Sch Hrs hours (School Bank Hours).

School Bank Hours

Each trimester each school aged child has approximately 110 school bank hours available. CSAW automatically marks all children over age 5 as school age. If the child is younger than 5, and is in need of school bank hours, you must manually modify the school age indicator to identify the child age as school age child (must be 3 years old or older). Instructions for changing the school age indicator can be found later in this section of the guide.

Note: School Bank hours must not be used when a school age child is ill and cannot attend school for several days. In these cases, it is better to create a separate authorization that covers the sick days. This will most often be a retro-authorization.

If the school aged child needs child care before and after school (up to 21 hours per week) in addition to days when school is closed, a part time authorization must be written.

Copayment Type

Eligible Children												
Auth Worker ID		XCTD03 Attendance Needs Confirmation?: No - County does not require confirmation										
Child's Name	DOB	SCL INF	CPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS	
Glamis Macbeth	04/02/12	N	▼	▼	▼	▼	▼	▼	▼	▼	▼	

For each child in the case select the correct copayment type. Use the drop-down menu and select the copayment type. Click on the reference table icon on the right side of the drop down menu for a description of the codes.

Copayment Code Types:	Description		Copay Amount
FOS	Foster Care or Subsidized Guardian	This code is automated to appear in CSAW for children who are indicated as Foster Care/Subsidized Guardianship in the Benefits Received page in CWW	No copayment is applied
KIN	Court-ordered Kinship Care with or without the Kinship Care Payment	This code is automated to appear in CSAW for children who are indicated to have at minimum a Kinship Relationship and Kinship Court Order in the Benefits Received Page in CWW	No copayment is applied
NCK	Child living with relative but no court order with or without the Kinship Care Payment	This code is automated to appear in CSAW for children who are indicated to have at minimum a Kinship Relationship in the Benefits Received Page in CWW	Copayment is not based on actual household income, instead it is based on 70% FPL
LNF	Parent is a Learnfare parent	Use this code for teen parents that are participating in Learnfare	No copayment is applied
REG	Regular copayment	Use this code for W-2 families, working families, FSET participants, and any others that do not fit another description	Copayment is based on actual household income, family size, and children in subsidized care
THS	Teen parent attending high school	Use this code for teen parents that are enrolled in high school	Copayment is not based on actual household income, instead it is based on 70% FPL
WWE	Parent has been in W-2 placement and has just started unsubsidized employment	Use this code for up to 5 weeks for W-2 parents that have begun new employment	Copayment is not based on actual household income, instead it is based on 70% FPL

Authorization Type

Select the correct Authorization Type.

A – Attendance (Certified providers and Licensed Family providers must have attendance based authorizations)

E – Enrollment

The screenshot shows the 'Eligible Children' form. At the top, there is a text box for 'Auth Worker ID' containing 'XCTD03' and a status message: 'Attendance Needs Confirmation?: No - County does not require confirmation'. Below this is a table with columns: Child's Name, DOB, SCL IND, COPAY TYPE, AUTH TYPE, RATE TYPE, BEGIN DATE, END DATE, HRS, AMT, REL, and SPL NDS. The first row contains data for 'Glamis Macbeth' with DOB '04/02/12' and 'N' in the SCL IND field. The 'AUTH TYPE' dropdown menu is circled in red.

See the Wisconsin Shares Policy Manual at:

<http://dcf.wisconsin.gov/childcare/wishares/manual.htm> for additional information on Enrollment and Attendance based authorizations.

Rate Type

CSAW will display Regular (R) for full- time or Part time (B), or Override (V) for licensed child care providers.

Select Override (V) from the Rate Type drop-down box when creating a special needs authorization with a higher rate and for authorizations where there is a discounted rate.

If child care will be provided in the child's home and the child care provider will work 15 or more hours per week select Override (V) Rate Type. You will need to enter an amount in the AMT field; if there is one child enter \$7.25. If there are multiple children divide \$7.25 between the authorized children. The child care provider category must be In Home Regular Certified (IHRC) or In Home Provisionally Certified (IHPC).

If child care will be provided in the child's home and the child care provider will provide care less than 15 hours per week, use the Certified (C) Rate Type.

The screenshot shows the 'Eligible Children' form, identical to the one above. In this version, the 'RATE TYPE' dropdown menu is circled in red.

Note: When using the V rate type, CSAW will calculate the copayment. The authorization worker must collect the provider's override rate (hourly or weekly) to enter in the AMT field.

Select the correct Rate Type:

	Age of child	Hours Auth'd	Rate Type Code
Licensed	Age 6 or younger	1 - 24	B
	Age 6 or younger	25 - 50	R
	Age 7 or older	1 - 20	B
	Age 7 or older	21 - 50	R
Certified	Any Age	1 - 50	C

Note: Parameters have been added to CSAW that will only allow the use of the correct Rate Type.

Eligible Children

Auth Worker ID Attendance Needs Confirmation?: No - County does not require confirmation

Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS
Glamis Macbeth	04/02/12	N	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>						

Authorization Begin and End Dates

Authorizations always begin on Sunday and always end on Saturday. Enter the begin date to correspond with the parents' approved activity. The begin date cannot be earlier than the Saturday prior to the first month of eligibility in CWW. Enter the appropriate end date. The end date should correspond to the end of the school year, the beginning of the school year, or through the end of the next SMRF or review month.

Eligible Children

Auth Worker ID Attendance Needs Confirmation?: No - County does not require confirmation

Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS
Glamis Macbeth	04/02/12	N	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>						

Number of Hours

Enter the number of hours the child is eligible for. Include travel time for parents' to and from work and consider overlapping schedules in two parent and multiple generation households. The maximum number of hours is 50 hours. If a child needs more than 50 hours of care a second authorization will need to be written.

Eligible Children												
Auth Worker ID		XCTD03 Attendance Needs Confirmation?: No - County does not require confirmation										
Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS	
Glamis Macbeth	04/02/12	N										

Authorized Amount

When using the Override (V) Rate Type enter the discount rate (hourly if attendance based, weekly if enrollment based) in the AMT field.

If the authorization is for a child with a special need and you must issue a higher payment rate, enter that amount (hourly if attendance based and weekly if enrollment based) in the AMT field.

Eligible Children												
Auth Worker ID		XCTD03 Attendance Needs Confirmation?: No - County does not require confirmation										
Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS	
Glamis Macbeth	04/02/12	N										

Caring for Relatives

Check this box if the child is related to the child care provider. Certified child care providers are paid at the provisionally certified rate when all children in their care are relatives.

Eligible Children												
Auth Worker ID		XCTD03 Attendance Needs Confirmation?: No - County does not require confirmation										
Child's Name	DOB	SCL IND	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL NDS	
Glamis Macbeth	04/02/12	N										

Special Needs Indicator

Check the SPL NDS box if the child is 13 years or older and if the child is 12 years or younger and the provider has requested a higher rate.

If there is no higher payment requested and the child is less than 13 years old there is no need to check the special needs box. Checking this box allows CSAW to accept a higher rate.

Authorization workers no longer need to use a manual rate worksheet to calculate the copayment for special needs authorizations that have a higher rate. Use the Override (V) Rate Type and enter the higher rate (hourly or weekly) in the Amount field and check the Special Needs indicator box.

Provider Discounts

Child care providers may offer discounts when more than one child from a family in childcare. Child Care providers may also offer discounts when the parent is employed at the day care.

Authorization workers no longer need to use a manual rate worksheet to calculate a rate for child care provider discounts. Use the Override (V) Rate Type and enter the discounted rate (hourly or weekly) in the Amount field when writing a new authorization.

In-Home Childcare 15 or More Hours per Week

Authorization workers no longer need to use a manual rate worksheet to calculate a rate for In-Home child care providers that are caring for a child 15 or more hours per week. Use the Override (V) Rate Type and enter \$7.25 in the Amount field if there is one child, and pro-rate \$7.25 between all children if there is more than one child. When care is provided in the child's own home and care is being provided for 15 or more hours per week, there is a requirement to begin the payment calculation with Wisconsin minimum wage.

Authorizations above 50 hours per Week

When a child needs care for more than 50 hours per week a second authorization must be written for the additional hours, above 50. See the Wisconsin Shares Policy Manual Chapter 3, 3.6.5. <http://dcf.wisconsin.gov/childcare/wishares/manual.htm>

Identify a School Age Child

Sometimes you will need to manually change the status of a 3 to 4 year old to school-age to allow a child care provider to claim school bank hours. This will happen when a 3 or 4 year old is attending a 4K or a HeadStart program. To make this change, select the *School Bank* link in the left-side navigation menu. The individual search screen will display. Enter the case number or search by the child's name. If the case does not have any children above 3 years of age, the system will not allow you to go any further.

If there are children over 3 years of age, the child's pin number is highlighted and you will be able to access *Select a School Year* page.

Select the desired school year. For example if the school year is 2013-2014, select 2014.

Select School Year

Select School Year

Select School Year

PIN * 8584801855 (Enter 10 Digits)

School Year * 2013 

[Go to Identify School age child Page >](#)

To access the Identify a School age child page, you must click on *Go to Identify School age Child Page*. The following page will display:

Add Identify School Age Child

Add Identify School Age Child

Child Details

Child's Name Alex Spring	DOB 06/01/2008
PIN 8584801855	SSN 854-74-1041

School Bank Hours for Year 2013

School Age Child? * 

Period 1

Effective Begin date	07/01/2012	Effective End date	12/01/2012
Initial Bank Hours	100	Balance Bank Hours	100
Accumulated Rebank Hours	0	Last Rebank Date	

Period 2

Effective Begin date	12/02/2012	Effective End date	02/02/2013
Initial Rebank Hours	120	Balance Bank Hours	120
Accumulated Rebank Hours	0	Last Rebank Date	

Period 3

Effective Begin date	02/03/2013	Effective End date	06/29/2013
Initial Bank Hours	110	Balance Bank Hours	110
Accumulated Rebank Hours	0	Last Rebank Date	

The school year is divided into three periods and a total of 320 bank hours are available and allocated among the three periods. The begin-date and end-date of each period are shown on this screen, along with the initial number of hours allotted and the balance remaining for the child for that period.

Accumulated Rebank Hours displays the number of hours that have been restored for the period. School Bank hours do not carry over from one period to another or from one year to another. If a child has used all the available School Bank Hours in a period, you may want to review the school calendar and local snow days to be sure the provider is reporting this correctly. Changes to the number of school bank hours can be made by contacting the child care help desk at childcare@wisconsin.gov or by phoning 608-246-1657.

Confirm Authorizations

All authorizations must be confirmed on same day they are written. If not confirmed, they will be deleted during night batch cycle.

It is recommended that all authorizations for a family are written and then confirmed at the same time.

Provider # / Name: 1800039231 - Ana D'care												
Location # / Name: 001 - Ana 001												New Authorization
Phone #:												
Boy Alliecat	04/01/11	PSCH	REG	E	R	01/05/14	05/03/14	30	N	N		
* Boy Alliecat	04/01/11	PSCH	REG	A	R	02/23/14	03/29/14	19	N	N		
Provider # / Name: 4800039514 - Lena Lovely												
Location # / Name: 001 - Mary Sunshine												New Authorization
Phone #: (608) 224-5815												
Boy Alliecat	04/01/11	LFAM	REG	A	B	10/27/13	01/04/14	15	N	N		
Girl Alliecat	05/02/10	LFAM	REG	A	B	10/27/13	01/04/14	15	N	N		
* Indicates the authorization is in pending status. If not confirmed by end of the day, authorizations will be deleted. Click here to go to confirmation page.												

As shown above, on the List Authorizations page you can identify authorizations that are not yet confirmed. Select the link in the warning message to go to the confirmation page.

Confirm Authorizations

Confirm Authorizations												
Case Details												
Case Number	5150765350					Agency	13					
AG Status	Open					Primary Person	Josie Alliecat					
Auth Worker ID	XCTR35					Review Date	12/31/2014					
						SMRF Date	6/30/2014					
List of Pending Authorizations for the Case												
Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	AMT	REL	SPL IND	AUTH #
Provider # / Name: 1800039231 - Ana D'care Location # / Name: 001 - Ana 001 New Authorization Phone #:												
Boy Alliecat	04/01/11	PSCH	REG	A	R	02/23/14	03/29/14	19	0	N	N	8800297358
Authorize to a New Provider Location												
< Go to Authorization List Page						Confirm Authorizations >						

Authorization Comments

When creating an authorization, the option to enter comments is available after the authorization is confirmed.

Select the word, "Comments" to add authorization information as the screen shot below indicates.

Case Details												
Case Number	1150773812					Agency	13					
AG Status	Open					Primary Person	Julie July					
Auth Worker ID	XCTR34					Review Date	2/28/2015					
						SMRF Date	8/31/2014					
List of Authorizations for the Case as of 12/21/13												
Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL	TRM IND	
Provider # / Name: 3800039653 - Dane Danielson Location # / Name: 001 - Dane Day Care Phone #: (454) 545-4545 New Authorization												
Jack July	01/01/12	LFAM	REG	E	V	03/02/14	05/03/14	10	N	Y		Comments(00)
Jackie July	02/01/10	LFAM	REG	E	V	03/02/14	05/03/14	10	N	Y		Comments(00)

select the word, "Comments"

Enter information in the comments section and select the word, "Add".

Authorization Comments

Authorization Comments

Authorization Details

Case Number	1150773812	Agency	13
AG Status	Open	Primary Person	Julie July
Child's Name	Jack July	DOB	1/1/2012
PIN	1584876701	SSN	545-48-8877
Provider #	3800039653	Location #	001
Provider Name	Dane Danielson	Location Name	Dane Day Care
		Address	Dane St Dane WI 45454
Auth #	7800297367	Phone #	(454) 545-4545

Add Authorization Comments

Comments:

Type your notes and then press the Add button.

0 of 3500 characters.

Any comments associated with the authorizations will appear in the List of Authorizations for a Case page.

To review the added authorization information, select the word, "Comments".

Case Details

Case Number	4150777349	Agency	13
AG Status	Open	Primary Person	April B...
Auth Worker ID	XCTR34	Review Date	3/...
		SMRF Date	...

List of Authorizations for the Case as of 12/21/13

Child's Name	DOB	CATG	COPAY	AUTH	RATE	BEGIN	END	HRS	REL	IR
			TYPE	TYPE	TYPE	DATE	DATE			
Provider # / Name: 9800038999 - Kate Kemp Location # / Name: 001 - Kate Kemp Phone #: (454) 545-4545										
Dayze Raign	06/01/08	LFAM	REG	A	B	03/30/14	06/14/14	10	N	N
Sonny Raign	02/01/05	LFAM	REG	A	B	03/30/14	06/14/14	10	N	N

[New Authorization](#)

This will bring you to the Authorization Comments screen.

In the Authorization Comments screen:

- Additional Comments can be added.
- Comments can be updated by selecting the “Pencil” icon.
This can only be done within the business day that the comment is entered.
- Comments can be deleted by selecting the “Trash Can” icon.
This can only be done within the business day the comment is entered.

0 of 3500 characters.

Add >

Entered Date	Entered By	Comments		
05/30/2014	Rose Prochazka	Summer child care needs have been adjusted.		
05/07/2014	Pirkko Zweifel	comment entered by xctd50.		
04/21/2014	Rose Prochazka	School aged auth test note		
04/21/2014	Rose Prochazka	this is the second note for this auth.		

Modifying an Existing Authorization

You may search by provider or by case to find the authorization(s) that may need to be modified.

List of Authorizations for a Child for a Location

This page lists all authorizations for a child in a chronological order listing the newest on top. Enter a date range to see all authorizations that were open during a specific time period.

List of Authorizations for a Child for a Location

List of Authorizations for a Child for a Location

Case Details

Case Number 9150745999	Agency 40
AG Status Open	Primary Person Katie Drana
Auth Worker ID XCTW13	Review Date 5/31/2014
	SMRF Date 11/30/2013

Child Details

Child's Name Honey Booboo Drana	DOB 01/01/2011
PIN 9584815440	SSN 545-54-5111

Location Details

Provider # 8800039458	Location # 001
Provider Name Patty Cake Day Care	Location Name Patty Cake 1
Phone # (608) 231-2632	Address 123 Main St Anytown WI 45454

List of Authorizations for the Child for the Location as of 03/19/13

AUTH #	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	AUTH BEGIN DATE	AUTH END DATE	HRS	REL	SPL IND	TRM	
6800297246	LGRP	REG	E	R	06/02/13	11/30/13	40	N	N		

Rate Details

Rate Begin Dt	Rate End Dt	Weekly Rate	Hou
06/02/13	11/30/13	<u>194.00</u>	6.0

Select this pencil icon to modify this authorization.

The Modify Authorization screen will display:

Modify Authorization

Modify Authorization

Authorization Details

Case Number 9150745999 **Agency** 40
AG Status Open **Primary Person** Katie Drana
Child's Name Honey Booboo Drana **DOB** 1/1/2011
PIN 9584815440 **SSN** 545-54-5111
Provider # 8800039458 **Location #** 001
Provider Name Patty Cake Day Care **Location Name** Patty Cake 1
Address 123 Main St
Anytown WI 45454
Auth # 6800297246 **Phone #** (608) 231-2632

CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL NDS	DELETE ?	DELETE REASON
LGRP	REG	E	R	06/02/13	11/30/2013	40	N	N	<input type="checkbox"/>	<input type="text"/>

If you delete the authorization you will need to select a *Delete Reason* code: *Agency Error* or *Other*.

CSAW will not allow you to end-date or delete an authorization that overlaps a period for which attendance has been reported. If an authorization has been confirmed it can be deleted as long as attendance has not been recorded.

List of Authorizations for a Location

A search by provider will result in a list of all authorizations for a selected period for a specific child care provider.

List of Authorizations for a Location

List of Authorizations for a Location

Authorization Period

This search will bring a list of all authorizations for a specific period for this location.

Begin Date *

When you enter the Begin Date only, authorizations with an End Date that is greater than the Begin Date will be displayed.

End Date

When you enter both a Begin and End Date, authorizations that span any part of the time period entered will display.

Include deleted authorizations

Location Details

Provider # 8800039458	Location # 001
Provider Name Patty Cake Day Care	Location Name Patty Cake 1
Phone # (608) 231-2632	Address 123 Main St Anytown WI 45454

List of Authorizations for the Provider Location as of 03/19/13

Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL	TRM IND
Case No: 2700545923 Agency: 40 Primary Person: Public Assistance Auth Worker ID: XCTD03											
Kid Assistance	01/01/12	LGRP	REG	A	R	12/16/12	03/30/13	18	N	N	
Case No: 9150745999 Agency: 40 Primary Person: Katie Drana Auth Worker ID: XCTW13											
Honey Booboo Drana	01/01/11	LGRP	REG	E	R	06/02/13	11/30/13	40	N	N	
Jackie Onassis	10/31/09	LGRP	FOS	E	R	06/02/13	11/30/13	40	N	N	

Select the pencil icon to modify the authorization. The Authorization Modification screen will display, just as with the Case search.

Provider Request for Authorization Termination

Providers can request to terminate an authorization by clicking a box in CCPI or by checking a box on a submitted Attendance Report Form (ARF), which is then entered in CCPI by an agency worker. When this occurs, an "R" will appear next to the authorization on the *List of Authorizations for a Case* page shown in the screen shot below.

List of Authorizations for a Case [Printable \](#)

List of Authorizations for a Case

Authorization Period

Begin Date * 
When you enter the Begin Date only, authorizations with an End Date that is greater than the Begin Date will be displayed.

End Date 
When you enter both a Begin and End Date, authorizations that span any part of the time period entered will display.

Include deleted authorizations

Case Details

Case Number 1150816813	AG Status Open	Primary Person Rodney Backwaters
Admin Agency Dane County (13)	Review Date 4/30/2016	Address 1311 Perimeter Rd Mount Horeb WI 53572-1892 Dane County
Auth Worker ID XCTU96	SMRF Date 10/31/2015	

List of Authorizations for the Case as of 04/12/15

Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL IND	TRM	
Provider # / Name: 3800036563 - Randy's Group Care, Inc Location # / Name: 001 - Randy's Group Care-In-Out Mode Phone #: (414) 555-6666 New Authorization												
Sammy Backwaters	02/07/11	LGRP	REG	E	R	07/12/15	10/24/15	30	N	N	R	 Comments(00)
Sammy Backwaters	02/07/11	LGRP	REG	E	R	06/28/15	07/11/15	40	N	N		 Comments(00)
Sammy Backwaters	02/07/11	LGRP	REG	E	R	05/03/15	05/30/15	40	N	N		 Comments(00)

* Indicates the authorization is in pending status. If not confirmed by end of the day, authorizations will be deleted. Click [here](#) to go to confirmation page.

Termination Indicators: T - Authorization ended/deleted due to termination
 R - Request for authorization termination

The provider requested to terminate an authorization. The authorization will end the upcoming Saturday and a "T" will then be displayed.

The authorization will end the upcoming Saturday and a "T" will be displayed in the Termination Column for the authorization in place of the "R". This information also appears on the *List of Authorizations for a Location* page.

Rate Calculation Details

The rate calculations detail page provides an overview of the rate calculations.

This information can be accessed by clicking on the child on the *List of Authorizations for a Case* page as shown below.

List of Authorizations for a Case
[Printable \](#)

List of Authorizations for a Case

Authorization Period

Begin Date *

When you enter the Begin Date only, authorizations with an End Date that is greater than the Begin Date will be displayed.

End Date

When you enter both a Begin and End Date, authorizations that span any part of the time period entered will display.

Include deleted authorizations

Case Details

Case Number 7150772579	AG Status Closed	Primary Person Peppermint Stick
Admin Agency Dane County (13)	Review Date N/A	Address 128 Wisconsin Lodi WI 53704 Dane County
Auth Worker ID XCTR35	SMRF Date N/A	

List of Authorizations for the Case as of 03/02/14

Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL	TRM	IND
Provider # / Name: 1800039231 - Ana D'care Location # / Name: 001 - Ana 001 Name Change Phone #:												
New Authorization												
Candy Stick	03/04/10	PSCH	REG	E	V	03/02/14	04/26/14	32	N	N		Comments(00)
Cinnamon Stick	03/04/08	PSCH	REG	E	V	03/02/14	04/26/14	32	N	N		Comments(00)

Then by clicking on the weekly rate corresponding to the authorization rate begin and end dates in the *List of Authorizations for the Child for the Case* page.

List of Authorizations for the Child for the Case [Printable](#)

List of Authorizations for the Child for the Case

Case Details

Case Number 7150772579	AG Status Closed	Primary Person Peppermint Stick
Admin Agency Dane County (13)	Review Date N/A	Address 128 Wisconsin Lodi WI 53704 Dane County
Auth Worker ID XCTR35	SMRF Date N/A	

Child Details

Child's Name Candy Stick	DOB 03/04/2010
PIN 7584874428	SSN 258-88-7104

List of Authorizations for the Child for the Case as of 03/02/14

AUTH #	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	AUTH BEGIN DATE	AUTH END DATE	HRS	REL	SPL IND	TRM
Provider # / Name: 1800039231 - Ana D'care										
Location # / Name: 001 - Ana 001 Name Change										
Phone #:										
6800297346	PSCH	REG	E	V	03/02/14	04/26/14	32	N	N	

Rate Details

Rate Begin Dt	Rate End Dt	Weekly Rate	Hourly Rate
04/06/14	04/26/14	13.20	
03/02/14	04/05/14	46.00	

This will show you how the rate was calculated.

Rate Calculation Details

Case Details	
Case Number	7150772579
Family Size	3
Authorization Period	03/02/14 - 04/26/14
Rate Effective Dt	3/2/2014
Adjusted Family Copay	10
Full Weekly Amount	125
Primary Person	Peppermint Stick
Income	1032
Authorization #	7800297347
Full Family Copay	10
Actual Family Copay	10
Agency Payment	115

Rate Calculation Details		
Name	Candy Stick	Cinnamon Stick
DOB	3/4/2010	3/4/2008
Provider	1800039231	1800039231
Location	001	001
Category	LGRP	LGRP
County	13	13
Accreditation	N	N
Serving Relative	N	N
Auth Rate Type	V	V
Auth Type	E	E
Copay Type	REG	REG
Authorized Hours	32	32
Maximum Payable Hours	32	32
Hourly Rate	5.76	5.14
Beginning Reimbursement	184.32	164.48
Weekly Ceiling	201.75	180
Provider Price	50**	75**
Lowest Weekly	50	75
Adjusted Sum of Lowest Weekly	125	125
% Full Cost	40.00	60.00
Adjusted Agency Payment	115.00	115.00
Calculated Weekly Payment	46.00	69.00
Maximum Payable Hours		
Calculated Rate	46.00	69.00
*Effective Rate	46	69

CSAW calculates the copayment

Override Rate Type

\$46 + \$69 = \$115

**** Indicates worker entered rate.**

* The Effective Rate is the amount that the provider will be paid and the amount communicated to the provider in notices. The Effective Rate may be different from the Calculated Rate. If the Calculated Rate amount does not change from the previous Effective Rate by more than \$3.00/wk for enrollment authorizations or \$0.05/hr for attendance based authorizations, the previous Effective Rate will continue to be used.

Note: Rate calculations do not always reflect the actual issuance paid to the provider. There are multiple variables for actual paid issuance including if the authorization was an enrollment or attendance based and YoungStar adjustments.

Key fields on the Rate Calculation Details page.

Case Details Section	
Case number	System assigned 10-digit case number. There can be only one case number by SSN (One individual can be in multiple cases).
Primary Person	Name of the primary person of the case; also known as an Eligible Adult.
Family Size	The number of individuals in the assistance group used to calculate the Federal Poverty Level.
Income	Income of the assistance group used to calculate the Federal Poverty Level and the copayment amount.
Authorization Period	Indicates the dates the authorization begins and ends.
Authorization number	System assigned authorization number. Each authorization has a unique number.
Rate Effective Date	The effective date of the authorized rate.
Full Family Co-payment	The weekly copay amount for the all children in subsidized care.
Adjusted Co-pay	Copay amount for the family, after adjusting for reduced copay types.
Actual Family Co-pay	The Actual copayment after adjusting for part-time authorizations.
Full Weekly Amount	When calculating authorizations for licensed providers, the system compares the Beginning Reimbursement Rate, the agency maximum weekly ceiling and the provider's private-pay price and chooses the lower of the three. The lowest amount is the Full Weekly Amount
Agency Payment	The actual amount that the subsidy will pay to the provider. This example is an attendance based authorization so the provider will be paid the hourly rate for actual hours attended. Enrollment based authorizations are paid a flat weekly amount as long as the child attends one hour.

Rate Calculation Details Section	
Name	Name of the authorized child
DOB	Date of Birth of the child
Provider Number	10-digit provider number to whom the child is authorized
Location Number	3-digit location number of the site where the child is attending.
Category	Regulatory status of the authorized provider: LGRP - licensed group LFAM - licensed family PROC - provisionally certified REGC - regularly certified IHPC – In home provisionally certified IHRC – In home regular certified
County	County number of the case county

Accreditation	A “Y” is displayed if the provider is accredited. “N” if provider is not accredited. Note: The weekly county max is raised by 10% for accredited providers that are located outside of Wisconsin.
Serving Relatives	If a “Y” is displayed, the provider is related to all children in care and if it is set at “Y” for a REGC provider, the system will pay that provider at PROC rate.
Auth Rate Type	R - regular rate B - Must be used for a part-time authorization for children 7 or older if the authorization is for less than 21 hours per week. The part-time rate type can be used for younger children if the provider’s part-time rate is in CSAW. All authorizations for fewer than 25 hours must use part-time rates if there is a part-time rate in CSAW. C - Certified, use this rate type for certified providers and for In-Home providers providing care less than 15 hours per week. V – Override, use this rate type when there is a discount, when you the child has special needs and requires a higher rate, and when you are writing an authorization for In-Home child care and care will be provided 15 or more hours per week.
Auth Type	Values are: A - attendance based E - enrollment based.
Co-pay Type	The values are: FOS - foster child KIN - kinship care NCK - non-court ordered kinship LNF - Learnfare REG - Regular THS - teen high school WWE - W-2 employment position ended, unsubsidized employment began.
Hours	Number of hours the child is authorized to attend a site.
Hourly Rate	County maximum hourly rate by age group is displayed here.
Beginning Reimbursement	Hourly Rate multiplied by number of authorized hours.
Weekly Ceiling	The county/tribal maximum weekly ceiling (attendance based authorizations to licensed providers are increased by 10%)
Provider Price	The provider’s private rate for the age group. Applies to licensed, and public school programs only.
Lowest Weekly	The system compares the county weekly ceiling, provider’s private price, and beginning reimbursement rates and chooses the lowest of the three. If the provider is certified, the system uses 75% of the licensed family weekly ceiling and if the provider is provisionally certified the system uses 50% of the licensed family weekly ceiling.
Adjusted Sum of Lowest Weekly	If there is only one child authorized for a case, the Lowest Weekly rate is displayed here. If there is more than one child, the sum of

	Lowest Weekly amounts for all children are summarized here.
% Full Cost	For a case with one child only, 100% will display here. If there is more than one child, the system assigns a percentage based on the amount on the lowest weekly lines for each child.
Adjusted Agency Payment	Calculated weekly payment will be displayed here if there is only one child in a case. If there are multiple children, sum of Calculated Weekly Payments is displayed here.
Calculated Weekly Payment	The final weekly amount (Lowest weekly amount – co-payment)
Calculated Rate	The calculated rate is the rate calculated based on the all the current criteria used to calculate the authorization amount (provider price, co-pay, accredited/not accredited, etc). If the new calculated rate change is less than \$3/wk or \$.05/hr - the old rate (based on old criteria) will be used. The rate that will actually be used is the Effective Rate.
Effective Rate	The Effective Rate is the amount that the provider will be paid and the amount communicated to the provider in notices. The Effective Rate may be different from the Calculated Rate. If the Calculated Rate amount does not change from the previous Effective Rate by more than \$3.00/wk for enrollment authorizations or \$0.05/hr for attendance based authorizations, the previous Effective Rate will continue to be used

Retro Authorizations and Differential Co-Payments

In retro-authorizations co-payments are distributed differently than with regular authorizations. This is called a differential co-payment. A differential co-payment is used by CSAW for all retro-authorizations (authorizations that are written for a previous attendance period).

In retro-authorizations the co-payment distribution is as follows:

- The first child authorization entered into CSAW has the full co-payment amount based on the FPL, as if they are the only child in care on the case.
- Each additional child authorization entered receives a co-pay that equals the difference between having one child and two children in care.

For example, the Co-pay Schedule for one child in care at 145% FPL is \$51; the first child authorization co-pay is \$51. When the second child authorization is added, the co-pay needs to \$64 for two children in care. The difference between \$51 and \$64 is \$13. ($\$51 + \$13 = \64); the second child's co-pay is \$13, divided by two, because the child has a part-time authorization. $\$51$ (child one) + $\$3.50$ (child two) = $\$54.50$ Actual Family Co-pay.

Although the total family co-payment obligation remains the same in both retro and non-retro authorizations periods of the number of hours of the authorization and the family income remain the same, the co-payment distribution applied to each child's authorization is different. Differential co-payment applications are one of the reasons why reimbursement rates may fluctuate when there hasn't been an increase in the county maximum or the provider rates, or a child's birthday, or a change in the level of the co-payment.

Automated Processes

Automated Process to End Authorizations

There are a few situations that will result in an authorization ending through the automated process:

- When a provider's YoungStar rating changes to 1 Star all authorizations will automatically end the Saturday immediately following the rating change.
- If a provider's YoungStar contract expires and there is no new signed contract, all authorizations will end the Saturday after the *grace period*. See DECE BCCA Technical Memo 2012-07 for more information about the grace period.
- If an end date is added to a provider's license or certification all authorizations will end the Saturday immediately following the end-date. The end-date is added to licensed and certified providers' records in WISCCRS by regulatory agency staff when there is a suspension, revocation, or denial of the license or certification.
- If a provider's license or certification is revoked, denied, or suspended all authorizations will end the Saturday immediately following the action.
- If a provider's authorizations are suspended all authorizations will end the Saturday immediately following the suspension.
- When a child has lost eligibility; turned 13 years old, is no longer in the home; or a child with a special need turns 19 years old the authorization will end the Saturday immediately following the loss of eligibility.
- When a child's age is outside of the Ages Served that has been approved by licensing or certification, the authorization will end the immediately following Saturday.
- When a case transfers from one county to another the authorization will automatically end the second Saturday after the county transfer is completed in CWW (except in the WREA IM consortium where a pilot is currently being conducted).

Whenever authorizations are ended and no continuing authorization is created for the child, the system sends notices to both parent and provider. If there is a continuing authorization written for the child starting immediately after the end date, the notice will not list the ending of the authorizations; instead, it will be a new authorization notice.

When authorizations end to due to loss of eligibility or when new authorizations are created with reduced hours (due to underutilization of enrollment-based auths) CSAW will send notices two weeks before the authorization end date.

Other Automated Processes related to Authorizations

CSAW will automatically modify all authorizations including “override” rate authorizations when the following changes affect the payment rate by \$3 per week for enrollment authorizations and 5¢ per hour for attendance based authorizations:

- The family’s household income/FPL changes which results in a copayment change.
- The provider has submitted new rates and they are entered into CSAW.
- A copayment mass change is done.
- A Federal Poverty Level mass change is done.
- A maximum rate mass change is done.

Manual Process to end Authorizations

To manually end an authorization select the *End/Delete Authorizations* link in the left-side navigation menu; the Case Search page will display. Enter the case number for the authorization that must be ended. The *End/Delete Authorization* page for the case will display.

Child's Name	Dob	Catg	Copay Type	Auth Type	Rate Type	Begin Date	End Date	Hrs	Rel	Spl	Ind	Delete?	Delete Reason
Alex Spring	6/1/2008	LFAM	REG	A	R	1/27/2013	4/27/2013	25	N	N		<input type="checkbox"/>	

In the End Date field, enter the desired end-date. The end date must be for a period in which no attendance has been entered. If attendance has already been entered for the authorization, the system will not let you delete it. In this case, the authorization must be end-dated instead.

If the authorization needs to be deleted, click the check box in the *Delete* column and choose a *Delete Reason* code: *Agency Error*, or *Other*.

Press the *Submit* button when you have completed your entries; a warning message will display to ensure that this action is not accidental.



The *List of Authorizations for a Case* page will display.

From the *List of Authorizations for a Case* page. Select the *Modify* button on the right side of the page to access the *Modify Authorization* page. You can also delete/end date an authorization from the *Modify Authorization* page.

List of Recent Authorizations

List of Recent Authorizations												
Case Details												
Case Number	8150738185					Agency	40					
AG Status	Open					Primary Person	Jada Spring					
Auth Worker ID	XCTD03					Review Date	1/31/2014					
						SMRF Date	7/31/2013					
List of Recent Authorizations for the Case												
Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL	AUTH #	IND
Provider # / Name: 2800039412 - Abc Child Care Location # / Name: 001 - Anna's Kid Care, 4-Star, LFAM												New Authorization
Alex Spring	06/01/08	LFAM	REG	A	R	01/27/13	04/27/13	25	N	N	2800297192	

Modify Authorization

Modify Authorization												
Authorization Details												
Case Number	8150738185					Agency	40					
AG Status	Open					Primary Person	Jada Spring					
Child's Name	Alex Spring					DOB	6/1/2008					
PIN	8584801855					SSN	854-74-1041					
Provider #	2800039412					Location #	001					
Provider Name	Abc Child Care					Location Name	Anna's Kid Care, 4-Star, LFAM					
						Address	Ann St Annapolis WI 45454					
Auth #	2800297192					Phone #	(454) 545-4545					
CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL	NDS	DELETE ?	DELETE REASON	
LFAM	REG	A	R	01/27/13	4/27/2013 	25	N	N		<input type="checkbox"/>	<input type="text"/>	

The Modify Authorization page is very similar to the *End/Delete Authorization* page and functions the same way. On the *Modify Authorization* page, check the *Delete* box and choose a *Delete Reason* from the pull-down menu.

Press the *Modify* button to return to the *List of Authorizations for a Case* page.

If attendance has already been entered for the authorization, the system will not let you delete it. In this case, the authorization must be end-dated instead.

To end an authorization, change the end date to a desired date. The end date cannot be a date within a period in which attendance has already been entered.

To view deleted authorizations check the box to *Include deleted authorizations*.

List of Authorizations for a Case

List of Authorizations for a Case

Authorization Period

Begin Date * 12/26/2012

When you enter the Begin Date only, authorizations with an End Date that is greater than the Begin Date will be displayed.

End Date

When you enter both a Begin and End Date, authorizations that span any part of the time period entered will display.

Include deleted authorizations

Search >

Deleted authorizations will display in the Case Authorizations page with a red x mark to indicate that the authorization was deleted.

Case Details

Case Number 5700547350	Agency 13
AG Status Open	Primary Person Judy Jones
Auth Worker ID XCTR34	Review Date 10/31/2013
	SMRF Date 4/30/2013

List of Authorizations for the Case as of 11/11/12

Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL IND	TRM
Provider # / Name: 8800039458 - Patty Cake Day Care Location # / Name: 001 - Patty Cake 1 New Authorization Phone #: (608) 231-2632											
× Baby Jones	01/25/12	LGRP	REG	A	O	10/28/12	05/04/13	25	N	N	
× Baby Jones	01/25/12	LGRP	FOS	A	R	01/06/13	02/23/13	20	N	N	
× Baby Jones	01/25/12	LGRP	REG	A	R	01/27/13	02/23/13	22	N	N	
× Baby Jones	01/25/12	LGRP	REG	A	O	01/06/13	01/26/13	22	N	N	
Baby Jones	01/25/12	LGRP	REG	A	O	11/25/12	01/26/13	22	N	N	
Baby Jones	01/25/12	LGRP	REG	A	O	10/28/12	01/05/13	22	N	N	

~~×~~ Indicates deleted Authorization.

Case Utilization

You may review the usage of authorized hours from the *Case Utilization* page. Up to 10 weeks of attendance can be displayed, you can select any 10 week period of time.

To access this page, click on the *Case Utilization* link in the left-side navigation menu after the case has been identified.

Case Utilization Listing

Case Utilization Listing

Search Query Usage

Attendance Begin Date * 11/25/2012

Attendance End Date * 1/5/2013

Search >

Case Details

Case # 5700547350 Agency Dane County

Primary Person Judy Jones

Search Results - Case Utilization for the Period of: 11/25/2012 - 1/5/2013

Provider #	Locn #	Child's Name	Authorization Begin Date	Authorization End Date	Auth Type Attendance	Attendance Begin Date	Authorized Hours	Attended Hours	Authorization Worker
8800039458	001	Baby Jones	10/28/12	01/05/13	Attendance	12/30/12	22	22	XCTR34
8800039458	001	Baby Jones	11/25/12	01/26/13	Attendance	12/30/12	22	22	XCTR34
8800039458	001	Baby Jones	10/28/12	01/05/13	Attendance	12/23/12	22	25	XCTR34
8800039458	001	Baby Jones	11/25/12	01/26/13	Attendance	12/23/12	22	22	XCTR34

Under Utilization in Enrollment-Based Authorizations

The system analyzes reported attendance over three attendance reporting periods and when an enrollment authorization is identified as under-utilized by 60% the system will automatically reduce the authorization and generate a notice to the parent and provider the following Monday.

When utilization over a 6 week period falls below 60% of the authorized weekly hours the system will automatically calculate and write a new authorization for 90% of the week with highest attendance.

An Example of a reduction:

John has a 50-hour enrollment-based authorization to ABC Child Care. His attendance during a 6 week period is as follows:

Week 1 - Total authorized hours = 50, Total attended hours = 20

Week 2 - Total authorized hours = 50, Total attended hours = 0

Week 3 - Total authorized hours = 50, Attendance has not been marked.

Week 4 - Total authorized hours = 50, Total attended hours = 40

Week 5 - Total authorized hours = 50, Total attended hours = 10

Week 6 - Total authorized hours = 50, Total attended hours = 0 with approved absence (Parent Vacation).

In the example above, the number of weeks considered as utilized is four (weeks 1, 2, 4 and 5). Since week 3 does not have attendance, the system ignores that week; the system also does not include any week of approved absence into the calculation.

Total authorized hours for weeks 1 + 2 + 4 + 5 = 200 hours

Total attended hours for these weeks is = 70 hours

Total utilization for the above case will be $70 \div 200$ which is less than 60%. The system will adjust the authorized hours to be 90% of the highest attended week. Week 4 has the highest attendance; 40 hours. Ninety percent of 40 is 36; the new authorization will be 36 hours per week.

Education Tracking

This page is used to track months the parent is authorized to utilize subsidized child care while attending school. Enter the number of months that the parent has utilized Wisconsin Shares for education. Use this page to track 24 months of education for **Basic Education Tracking** and 24 months of post-secondary education. This page is for tracking only.

To access this page, click on Education Tracking in the Authorization Management menu. The Individual Search page will display. You may search by individual or by case. Once the search results are displayed, select the desired individual. See the Child Care Manual, Chapter 1 for policy regarding education tracking.

Below is a screen print of this page:

Parent Education Tracking

Parent Education Tracking

Individual Details

Name	Kesha Jones	DOB	09/21/1980
PIN	2584901102	SSN	395-11-8666

Post Secondary Education Tracking

Number of Months Remaining 21.0

From	To	Number of Months	School Schedule on File	Comments
2/1/2015	5/2/2015	3.0	<input type="checkbox"/>	
			<input type="checkbox"/>	

Basic Education Tracking

Number of Months Remaining 24.0

From	To	Number of Months	School Schedule on File	Comments
			<input type="checkbox"/>	

Update >

The *From* and *To* fields are mandatory. Once the data is entered, click the Update button at the bottom of the page. You can go back and update the *From* and *To* fields as needed. The months remaining for education will recalculate based on the updated entry. This page does not prevent authorizations for school when the 24 months have been used, however, a warning message will display when more than 24 months of education have been entered.

Data can be deleted and/or modified on this page. The months remaining will be recalculated based on the deletion/modification. To delete data, place the cursor in the data field and use the delete key delete the data. To modify data, type over with the corrected data. There is no history to this page, only current data is displayed.

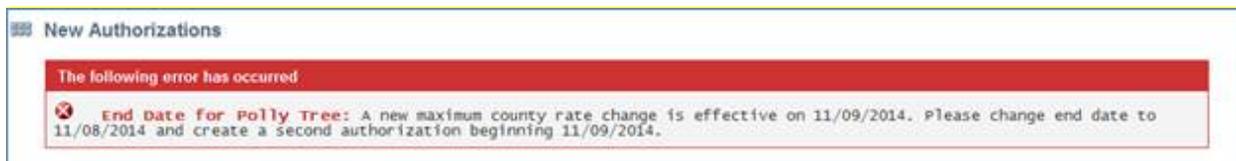
Retro-Authorization

Authorizations may have a begin date up to three months in the past. If an authorization needs to be written for a period more than three months in the past a worker with *retro security privileges* must write the authorization. Each agency has at least one worker with *retro security privileges*.

Retro Authorizations Created After a Rate Increase

All current authorizations will automatically be updated by the system on the day that the rate increase is effective.

When retro authorizations are created after the effective date of a rate increase and span the effective date, two authorizations need to be created. One authorization will need to be created for the time period prior to the effective date of a rate increase and a second authorization will need to be created for the time period on and after the effective date of a rate increase. An error message will be displayed in CSAW if the worker attempts to create one retro authorization that spans the date of the rate increase.



Where to Go for Help

Questions regarding this training material can be directed to Child Care Staff at:

Child Care Help Desk: (608) 264-1657 or by email at childcare@wisconsin.gov.

Questions regarding security should be directed via your security liaison to the DCF Security at: (608) 264-6323.

If you have forgotten your User ID and password, you need to contact the DWD Service Desk at: (608) 266-7252.

DCF is an equal opportunity employer and service provider. If you have a disability and need information in an alternate format, or need it translated to another language, please call 608-422-6080 or 888-692-1382 (TTY). For civil rights questions, call 608-422-6889 or 711 (TTY).