

**Wisconsin Shares Copayment Schedule**

**The Assistance Group's (AG's) Percentage of the Federal Poverty Level (FPL)**  
 The copayment (copay) calculation uses the assistance group's monthly income and assistance group size to determine the FPL percentage. If the assistance group's income is between two lines, it uses the lower amount.

	-----Gross Monthly Assistance Group Income-----									
	ASSISTANCE GROUP SIZE									
	2	3	4	5	6	7	8	9	10 or more	
65% FPL	\$1,172	\$1,480	\$1,788	\$2,095	\$2,403	\$2,711	\$3,018	\$3,326	\$3,634	
70% FPL	\$1,262	\$1,594	\$1,925	\$2,256	\$2,588	\$2,919	\$3,250	\$3,582	\$3,913	
75% FPL	\$1,353	\$1,708	\$2,063	\$2,418	\$2,773	\$3,128	\$3,483	\$3,838	\$4,193	
80% FPL	\$1,443	\$1,821	\$2,200	\$2,579	\$2,957	\$3,336	\$3,715	\$4,093		
85% FPL	\$1,533	\$1,935	\$2,338	\$2,740	\$3,142	\$3,545	\$3,947	\$4,349	\$4,752	
90% FPL	\$1,623	\$2,049	\$2,475	\$2,901	\$3,327	\$3,753	\$4,179	\$4,605	\$5,031	
95% FPL	\$1,713	\$2,163	\$2,613	\$3,062	\$3,512	\$3,962	\$4,411	\$4,861	\$5,311	
100% FPL	\$1,803	\$2,277	\$2,750	\$3,223	\$3,697	\$4,170	\$4,643	\$5,117	\$5,590	
105% FPL	\$1,894	\$2,391	\$2,888	\$3,385	\$3,882	\$4,379	\$4,876	\$5,373	\$5,870	
110% FPL	\$1,984	\$2,504	\$3,025	\$3,546	\$4,066	\$4,587	\$5,108	\$5,628	\$6,149	
115% FPL	\$2,074	\$2,618	\$3,163	\$3,707	\$4,251	\$4,796	\$5,340	\$5,884	\$6,429	
120% FPL	\$2,164	\$2,732	\$3,300	\$3,868	\$4,436	\$5,004	\$5,572	\$6,140	\$6,708	
125% FPL	\$2,254	\$2,846	\$3,438	\$4,029	\$4,621	\$5,213	\$5,804	\$6,396	\$6,988	
130% FPL	\$2,344	\$2,960	\$3,575	\$4,190	\$4,806	\$5,421	\$6,036	\$6,652	\$7,267	
135% FPL	\$2,435	\$3,074	\$3,713	\$4,352	\$4,991	\$5,630	\$6,269	\$6,908	\$7,547	
140% FPL	\$2,525	\$3,187	\$3,850	\$4,513	\$5,175	\$5,838	\$6,501	\$7,163	\$7,826	
145% FPL	\$2,615	\$3,301	\$3,988	\$4,674	\$5,360	\$6,047	\$6,733	\$7,419	\$8,106	
150% FPL	\$2,705	\$3,415	\$4,125	\$4,835	\$5,545	\$6,255	\$6,965	\$7,675	\$8,385	
155% FPL	\$2,795	\$3,529	\$4,263	\$4,996	\$5,730	\$6,464	\$7,197	\$7,931	\$8,665	
160% FPL	\$2,885	\$3,643	\$4,400	\$5,157	\$5,915	\$6,672	\$7,429	\$8,187	\$8,944	
165% FPL	\$2,976	\$3,757	\$4,538	\$5,319	\$6,100	\$6,881	\$7,662	\$8,443	\$9,224	
170% FPL	\$3,066	\$3,870	\$4,675	\$5,480	\$6,284	\$7,089	\$7,894	\$8,698	\$9,503	
175% FPL	\$3,156	\$3,984	\$4,813	\$5,641	\$6,469	\$7,298	\$8,126	\$8,954	\$9,783	
180% FPL	\$3,246	\$4,098	\$4,950	\$5,802	\$6,654	\$7,506	\$8,358	\$9,210	\$10,062	
185% FPL	\$3,336	\$4,212	\$5,088	\$5,963	\$6,839	\$7,715	\$8,590	\$9,466	\$10,342	
190% FPL	\$3,426	\$4,326	\$5,225	\$6,124	\$7,024	\$7,923	\$8,822	\$9,722	\$10,621	
195% FPL	\$3,517	\$4,440	\$5,363	\$6,286	\$7,209	\$8,132	\$9,055	\$9,978	\$10,901	
200% FPL	\$3,607	\$4,553	\$5,500	\$6,447	\$7,393	\$8,340	\$9,287	\$10,233	\$11,180	
	----- +200% of the Federal Poverty Level -----									

If an assistance group's income is above 200% FPL, the AG Copay is increased by \$1 for every \$5 that the income exceeds 200% FPL

**The Copay per Hour**  
 The copay calculation uses the number of children with Wisconsin Shares authorizations to find the Copay per Hour for the AG's FPL.

NUMBER OF CHILDREN WITH AUTHORIZATIONS					
1	2	3	4	5 or more	
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.90	\$0.57	\$0.46	\$0.41	\$0.38	\$0.38
\$0.96	\$0.61	\$0.49	\$0.43	\$0.40	\$0.40
\$1.03	\$0.65	\$0.53	\$0.46	\$0.42	\$0.42
\$1.10	\$0.69	\$0.56	\$0.49	\$0.45	\$0.45
\$1.22	\$0.76	\$0.61	\$0.53	\$0.48	\$0.48
\$1.39	\$0.85	\$0.67	\$0.58	\$0.53	\$0.53
\$1.47	\$0.90	\$0.71	\$0.61	\$0.55	\$0.55
\$1.52	\$0.93	\$0.73	\$0.63	\$0.57	\$0.57
\$1.60	\$0.98	\$0.77	\$0.66	\$0.60	\$0.60
\$1.65	\$1.00	\$0.79	\$0.69	\$0.63	\$0.63
\$1.73	\$1.05	\$0.83	\$0.73	\$0.67	\$0.67
\$1.79	\$1.09	\$0.87	\$0.76	\$0.70	\$0.70
\$1.85	\$1.13	\$0.91	\$0.80	\$0.74	\$0.74
\$1.90	\$1.19	\$0.96	\$0.84	\$0.77	\$0.77
\$1.97	\$1.24	\$1.00	\$0.88	\$0.80	\$0.80
\$2.06	\$1.30	\$1.05	\$0.91	\$0.82	\$0.82
\$2.15	\$1.36	\$1.08	\$0.93	\$0.84	\$0.84
\$2.24	\$1.42	\$1.12	\$0.96	\$0.86	\$0.86
\$2.34	\$1.46	\$1.14	\$0.99	\$0.89	\$0.89
\$2.34	\$1.46	\$1.14	\$0.99	\$0.89	\$0.89

**Total Assistance Group (AG) Copay Hours**  
 This step only considers authorized children with Regular copay types\*. For each month, the copay calculation adds together the number of authorized hours for all children. Each child contributes up to 152 hours per child care provider location. If a child is authorized to more than one location, the total number of hours for that child for all locations is capped at 152. If an assistance group has five children or more, the maximum hours will be 5 times 152 (760).

**The Assistance Group (AG) Copay**  
 For each month, the copay calculation multiplies the Total AG Copay Hours by the Copay per Hour amount.

**The Child's Copay**  
 For each month, the AG Copay is distributed to each child with a Regular copay type\* based on that child's percent of the assistance group's total hours. The total hours for this step are capped at 152 hours per child for each provider location, but not capped at 152 total per child or 760 per assistance group.

**Example:**  
 Please note that these numbers are approximate and both children in the example have the Regular Copay Type\*.  
 The AG's FPL  
 An AG of 3 with a monthly income of \$2,618 is at 115% FPL.  
 The Copay per Hour  
 The assistance group has 2 children with Wisconsin Shares authorizations. Their copay is \$0.65 per hour.  
 Total AG Hours  
 The first child is authorized for 80 hours per month, and the second child is authorized for 170 hours per month. The second child's hours are capped at 152, so the Total AG Hours are 232 hours (80 + 152) for the month.  
 The AG Copay  
 The AG Copay is \$150.80 (232 x \$0.65) for the month.  
 The Child's Copay  
 The assistance group has 232 total copay hours.  
 The first child has 80 hours and will have 34% (80 / 232) of the AG Copay, which is \$51.27 (34% of \$150.80) for the month.  
 The second child has 170 authorized hours, which are capped at 152 hours for the copay. The second child will have 66% (152 / 232) of the AG Copay, which is \$99.53 (66% of \$150.80) for the month.

\* **Copayment types: Regular** = Based on FPL, number of children in care, and number of authorized hours; used for all children who do not qualify for one of the following reduced copayment types. **Kinship** = \$0, used for children in court-ordered placement with a relative. **Non Court Ordered Kinship** = Based on 65% FPL, used for children being cared for by a relative who does not have a court order for their placement. **Foster** = \$0, used for children placed with a foster family, subsidized guardian, or interim caretaker. **Learnfare** = \$0, used for children of teen parents participating in the Learnfare program. **W-2 Employed** = Based on 65% FPL, used for children of former W-2 participants starting unsubsidized employment during the eligibility period. **Teen High School** = Based on 65% FPL, used for children of teen parents who are attending high school. **W2 Participant** = \$0, used for children of parents open for W-2. The monthly copayment is based upon the monthly subsidized hours of child care for the assistance group. Monthly hours are rounded up to the nearest whole hour when determining the copayment.  
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