

Department of Children and Families

Division of Early Care and Education

Wisconsin Shares Copayment Schedule

Update to Table DCF 201.08 Based on the 2018 Federal Poverty Guidelines

Effective March 1, 2018

Wisconsin Shares Copayment Schedule

Use the family's monthly income and family size to determine the FPL percentage. If the family's income is between two lines use the higher amount.

Each family has a base copayment and an additional per-child amount.

	Gross Monthly Family Income										
	2	3	4	5	6	7	8	9	10 or more		
70% FPL	\$960	\$1,212	\$1,464	\$1,716	\$1,968	\$2,220	\$2,472	\$2,724	\$2,976		
75% FPL	\$1,029	\$1,299	\$1,569	\$1,839	\$2,109	\$2,379	\$2,649	\$2,919	\$3,189		
80% FPL	\$1,097	\$1,385	\$1,673	\$1,961	\$2,249	\$2,537	\$2,825	\$3,113	\$3,401		
85% FPL	\$1,166	\$1,472	\$1,778	\$2,084	\$2,390	\$2,696	\$3,002	\$3,308	\$3,614		
90% FPL	\$1,235	\$1,559	\$1,883	\$2,207	\$2,531	\$2,855	\$3,179	\$3,503	\$3,827		
95% FPL	\$1,303	\$1,645	\$1,987	\$2,329	\$2,671	\$3,013	\$3,355	\$3,697	\$4,039		
100% FPL	\$1,372	\$1,732	\$2,092	\$2,452	\$2,812	\$3,172	\$3,532	\$3,892	\$4,252		
105% FPL	\$1,440	\$1,818	\$2,196	\$2,574	\$2,952	\$3,330	\$3,708	\$4,086	\$4,464		
110% FPL	\$1,509	\$1,905	\$2,301	\$2,697	\$3,093	\$3,489	\$3,885	\$4,281	\$4,677		
115% FPL	\$1,577	\$1,991	\$2,405	\$2,819	\$3,233	\$3,647	\$4,061	\$4,475	\$4,889		
120% FPL	\$1,646	\$2,078	\$2,510	\$2,942	\$3,374	\$3,806	\$4,238	\$4,670	\$5,102		
125% FPL	\$1,715	\$2,165	\$2,615	\$3,065	\$3,515	\$3,965	\$4,415	\$4,865	\$5,315		
130% FPL	\$1,783	\$2,251	\$2,719	\$3,187	\$3,655	\$4,123	\$4,591	\$5,059	\$5,527		
135% FPL	\$1,852	\$2,338	\$2,824	\$3,310	\$3,796	\$4,282	\$4,768	\$5,254	\$5,740		
140% FPL	\$1,920	\$2,424	\$2,928	\$3,432	\$3,936	\$4,440	\$4,944	\$5,448	\$5,952		
145% FPL	\$1,989	\$2,511	\$3,033	\$3,555	\$4,077	\$4,599	\$5,121	\$5,643	\$6,165		
150% FPL	\$2,058	\$2,598	\$3,138	\$3,678	\$4,218	\$4,758	\$5,298	\$5,838	\$6,378		
155% FPL	\$2,126	\$2,684	\$3,242	\$3,800	\$4,358	\$4,916	\$5,474	\$6,032	\$6,590		
160% FPL	\$2,195	\$2,771	\$3,347	\$3,923	\$4,499	\$5,075	\$5,651	\$6,227	\$6,803		
165% FPL	\$2,263	\$2,857	\$3,451	\$4,045	\$4,639	\$5,233	\$5,827	\$6,421	\$7,015		
170% FPL	\$2,332	\$2,944	\$3,556	\$4,168	\$4,780	\$5,392	\$6,004	\$6,616	\$7,228		
175% FPL	\$2,400	\$3,030	\$3,660	\$4,290	\$4,920	\$5,550	\$6,180	\$6,810	\$7,440		
180% FPL	\$2,469	\$3,117	\$3,765	\$4,413	\$5,061	\$5,709	\$6,357	\$7,005	\$7,653		
185% FPL	\$2,538	\$3,204	\$3,870	\$4,536	\$5,202	\$5,868	\$6,534	\$7,200	\$7,866		
190% FPL	\$2,606	\$3,290	\$3,974	\$4,658	\$5,342	\$6,026	\$6,710	\$7,394	\$8,078		
195% FPL	\$2,675	\$3,377	\$4,079	\$4,781	\$5,483	\$6,185	\$6,887	\$7,589	\$8,291		
200% FPL	\$2,743	\$3,463	\$4,183	\$4,903	\$5,623	\$6,343	\$7,063	\$7,783	\$8,503		
				+200% of the Federal Poverty Level							

Monthly Copayment	Base	Per Child	The Base Copayment amount is adjusted based on the monthly child care hours for the family.		
			From Monthly Hours	To Monthly Hours	% Copay
\$0	\$26		0	20	10
\$3	\$28		21	40	25
\$9	\$30		41	80	50*
			81	999	100
\$26	\$31				
\$42	\$33				
\$60	\$35				
\$69	\$37				
\$84	\$39				
\$94	\$41				
\$101	\$43				
\$112	\$44				
\$123	\$46				
\$141	\$48				
\$165	\$50				
\$175	\$52				
\$181	\$54				
\$191	\$56				
\$198	\$57				
\$208	\$59				
\$215	\$61				
\$222	\$63				
\$228	\$65				
\$237	\$67				
\$244	\$69				
\$250	\$70				
\$257	\$72				
\$263	\$74				

The Per Child Copayment amount is further adjusted based on the monthly hours for the individual child.	From Monthly Hours		To Monthly Hours	% Copay
	0	15	10	
16	30	20		
31	45	30		
46	60	40		
61	75	50		
76	90	60		
91	105	70		
106	120	80		
121	135	90		
136	999	100		

**For example:** A one-parent family at 100 percent FPL with two children in care for 45 hours per week would have a base copay of \$69 and a total per-child copay of \$74.

**Base Copay:** \$69  
45 Hours/Week x 2 Children > 81 Monthly Hours  
100 % Copay = \$69

**Per Child Copay:** \$37  
45 Hours/Week > 136 Monthly Hours  
100 % Copay = \$37 ( x 2 Children)

**Total Per Child Copay:** \$74

\$69 + \$74 = \$143  
**Total Monthly Copay:** \$143

Copayment types: **REG** = based on family size, FPL, and number of children in care, this code is used for working parents, W-2 participants, and FSET participants. **KIN** = \$0 copay, is used for families with court-ordered kinship or guardianship care. **NCK** = based on 70% FPL, is used for families that have no court order but are caring for a relative child. **FOS** = \$0 copay, Foster families. **LNF** = \$0 copay, used for participants of the Learnfare program. **VWE** = based on 70% FPL and is used for W-2 participants in their first two months of unsubsidized employment. **THS** = based on 70% FPL and family size and is used for teen parents that are attending high school. The base copayment is prorated based upon the monthly authorized hours of child care for the family and the per child copayment is based upon the monthly authorized hours of child care for the individual child. Monthly hours are rounded up to the nearest whole hour when determining the copayment.  
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