



Fiscal Agent Program ---Employer/Member

Referral Processing Contacts

Do not schedule your employee to start working until you receive a phone call with a start date.

Please call us! We will help you fill these forms out and answer any questions you may have.

Beth Flansburg

Phone Extension: 279

Email: beth.flansburg@lkchoice.com

Jenny Jeidy

Phone Extension: 219

Email: jennifer.jeidy@lkchoice.com

Jessica Brewer

Phone Extension: 281

Email: jessica.brewer@lkchoice.com

Tricia Hummel

Phone Extension: 250

Email: tricia.hummel@lkchoice.com

- Please complete forms using your full legal name on your Social Security Card.
- **Form 2678 needs to be mailed in.** All other forms can be emailed or faxed.
- If you have a Guardian, your Guardian must sign all documents, if you have a POA then you or your POA can sign all documents.

Note(s):

Please call with any questions or just to go over the forms in this packet!

Thank you

Main # **1-608-326-0434**

Toll Free Phone # **1-844-534-7225**

Toll Free Fax # **1-844-634-7225**

Email payroll@lkchoice.com

106 S Beaumont Road

Prairie du Chien, WI 53821

Website Portal: www.lkchoice.com



Fiscal Agent Program

Payroll Processing Contacts

<p align="center"><u>Inclusa</u> <u>Employers Last Name starting with A – M</u></p> <p align="center"><u>Michelle Caya</u> Phone Extension: 203</p>	<p align="center"><u>Inclusa</u> <u>Employers Last Name starting with N – Z</u></p> <p align="center">Justina Kephart Phone Extension: 264</p>
<p align="center"><u>Lakeland Care</u></p> <p align="center">Jackie Simerson Phone Extension: 210</p>	<p align="center"><u>Care WI</u></p> <p align="center">Tammy Hare Phone Extension: 206</p>
<p align="center"><u>La Crosse Co, Marinette Co, & Outagamie Co & Winnebago</u></p> <p align="center">Jayne Miles Phone Extension: 205</p>	<p align="center"><u>Menominee ITOW, My Choice, & Adams, Bayfield</u></p> <p align="center">Annie Nance Phone Extension: 265</p>
<p align="center"><u>LSS, Iron Co. Unified, Care WI Web, ICARE</u></p> <p align="center">Deb Milewsky Phone Extension: 230</p>	<p align="center"><u>Electronic Visit Verification (EVV)</u></p> <p align="center">Vicky Caya Phone Extension: 280</p>

Items to remember when completing timesheet:

- Work weeks run from Sunday to Saturday and so does your authorized hours, miles, or services
- Hours should be reported in quarter hours. Ex: 12:00, 12:15, 12:30, and 12:45
- Stay within your authorized hours, miles, or services. If unsure of what your authorized hours are or what your service code is, please call your Payroll Specialist.
- Write clearly and in dark blue or black ink only and enter only one shift per line
- When working past midnight, start a new line for the new workday
- Don't write over numbers already written on timesheet. If you make an error place a line through it, initial, and write clearly next to it or on a new line.
- Have the Member/Legal Rep and Employee sign off on the timesheet after all days of service have been worked for that pay period. Date the signatures for the same date as the signatures were written.
- Put total number of hours worked on each individual timesheet
- Check your correct Funding Source at the bottom of all timesheets. If unsure of Funding Source contact your Payroll Specialist.

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2022 Time Reports & Pay Schedule Information

A Time Report is a *payroll time sheet* submitted to LKiChoice on a scheduled basis by providers/employees of the Self-Directed Supports/Fiscal Agent Programs.

After you complete work on the following day ... (Pay Period)	Ensure that your Time Report(s) are at the Prairie du Chien Office by ... (Time Report Due Date)	So that you are PAID on the following date via Direct Deposit: (Pay Date)
12/16/2021 to 12/31/2021	01/05/2022	01/14/2022
01/01/2022 to 01/15/2022	01/20/2022	01/28/2022
01/16/2022 to 01/31/2022	02/04/2022	02/15/2022
02/01/2022 to 02/15/2022	02/18/2022	02/28/2022
02/16/2022 to 02/28/2022	03/04/2022	03/15/2022
03/01/2022 to 03/15/2022	03/18/2022	03/30/2022
03/16/2022 to 03/31/2022	04/05/2022	04/15/2022
04/01/2022 to 04/15/2022	04/20/2022	04/29/2022
04/16/2022 to 04/30/2022	05/05/2022	05/13/2022
05/01/2022 to 05/15/2022	05/19/2022	05/27/2022
05/16/2022 to 05/31/2022	06/03/2022	06/15/2022
06/01/2022 to 06/15/2022	06/20/2022	06/30/2022
06/16/2022 to 06/30/2022	07/05/2022	07/15/2022
07/01/2022 to 07/15/2022	07/20/2022	07/29/2022
07/16/2022 to 07/31/2022	08/05/2022	08/15/2022
08/01/2022 to 08/15/2022	08/19/2022	08/30/2022
08/16/2022 to 08/31/2022	09/06/2022	09/15/2022
09/01/2022 to 09/15/2022	09/20/2022	09/30/2022
09/16/2022 to 09/30/2022	10/05/2022	10/14/2022
10/01/2022 to 10/15/2022	10/20/2022	10/28/2022
10/16/2022 to 10/31/2022	11/04/2022	11/15/2022
11/01/2022 to 11/15/2022	11/18/2022	11/30/2022
11/16/2022 to 11/30/2022	12/05/2022	12/15/2022
12/01/2022 to 12/15/2022	12/20/2022	12/30/2022

Payment dates for hours worked and if timely submission of your time report:

- between the 1st and the 15th of a month, payment will be the 30th day of the same month
- between the 16th and the 31st of a month, payment will be the 15th day of the following (next) month

LATE TIME REPORTS: Time Reports received *after* the date indicated in the column titled "Time Report Due Date" will be processed in the next pay period. **No Exceptions.**

FORMS & SUBMISSION – Questions call 608-326-0434

- Forms are available on our Fiscal Agent Services website: www.lkichoice.com
- Faxing your Time Report: (844) 634-7225 – Must call 608-326-0434 to assure fax is received.
- Mailing your Time Report: 106 S Beaumont Road, Prairie du Chien, WI 53821
- Emailing your Time Report: payroll@lkichoice.com



106 S. Beaumont Rd.
Prairie du Chien WI 53821
Fax: 844-634-7225
Phone: 608-326-0434

Know Your Civil Rights

Non-eligibility for services is not discrimination

It is important to differentiate between denial of benefits (lawful or unlawful) and exclusion from services. Persons who are denied benefits or who are excluded from services because they do not meet the basic eligibility conditions for the receipt of these services are not protected by civil rights laws against this denial or exclusion. For example, in order to be eligible for FoodShare Wisconsin, a person's income must be below a certain level, and certain other basic eligibility conditions must be met. Civil rights laws have no effect on these basic eligibility conditions.



Steps for eligibility or program complaints

1. Ask to speak to a supervisor of your county services provider to see if you can resolve the situation. If not, talk to the county complaint coordinator. If you cannot find a mutually acceptable resolution, your county should refer you to the appropriate DHS Regional Area Administration:
 - Northeastern: 920-448-5333 in Green Bay
 - Northern: 715-365-2507 in Rhinelander
 - Southeastern: 262-521-5113 in Waukesha
 - Southern: 262-521-5113 in Madison
 - Western: 715-836-3892 in Eau Claire
2. You must file for a fair hearing with the Wisconsin Division of Hearings and Appeals www.doa.wi.gov/Pages/AboutDOA/HearingsAndAppeals.aspx for FoodShare Wisconsin, Medicaid/BadgerCare, county mental health, AODA and developmentally disabled county services complaints.

When you receive inpatient services for mental illness, alcoholism, drug abuse, or a developmental disability, you have the rights under Wis. Stat. § 51.61(1) and 51.30, Wis. Adm. Code chs. DHS 92 and DHS 124, and 42 CFR 482.13. If you require additional information regarding these rights, please see a staff member of the facility or program providing services and it will be provided to you.

Know Your Civil Rights



Did you know?

Participants in health and social service programs have special protection against discrimination. This is because of federal laws that are enforced through the Wisconsin Department of Health Services (DHS) at the state level. This brochure explains what that special protection is and gives information about some of these laws.



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Office of Legal Counsel
P-80044 (06/2020)

Know Your Civil Rights

What is “discrimination?”

“Discrimination” is a direct action, whether intentional or not, which results in the unequal treatment or causes an adverse impact on categories of people protected by law. Discrimination may result from prejudice, which is adverse judgment or opinion formed about a person beforehand without knowledge or examination of the facts. While “prejudice” generally refers to opinions or thoughts, “discrimination” refers to actions. This means that individuals may not, because of their race, color, national origin, gender, age or disability:

- Be denied any service, financial aid, or other benefit provided under a federally funded program.
- Be subjected to segregation or separate treatment in a federally funded program.
- Be provided any service, financial aid, or benefit that is different or is provided in a different manner from the way that service is provided to others.
- Be denied access to a service because buildings or facilities are not physically accessible to persons with disabilities or because no accommodation was provided to enable effective communication with the service provider.
- Be provided services without a competent interpreter in the primary language of a participant who has limited English proficiency. A limited English proficient (LEP) participant may also request an oral interpretation of vital information if no written translation is available.
- Be legally denied benefits by your service provider because of your religious beliefs or political affiliations. This is of particular note if you are a participant in FoodShare Wisconsin.

Who is a “person with a disability?”

A person with a disability is one who (1) has a physical or mental condition that substantially limits a major life activity, (2) has a record of such a condition, or (3) is regarded as a person with a disability.



What is “reasonable accommodation?”

If you are a person with a disability, you may make a request for a reasonable accommodation that must be given to you free of charge by the service provider. If you are deaf or hard of hearing and require a sign language interpreter, your service provider must offer you, at the very least, an interpreter with minimum national certification requirements (RAD or NAD).

Who is a “limited English proficient (LEP) speaker?”

This is a person who cannot speak English well enough to be able to fully participate in a program or service funded by the state or the federal government. An LEP speaker must be provided an oral interpreter who is linguistically and culturally competent in the LEP speaker’s primary language and in English.

Steps for filing a discrimination complaint

1. The first step is to file a discrimination complaint at your county department of human services. Look for the name of the county’s equal opportunity coordinator or complaint coordinator and contact number on bulletin boards or at the receptionist or information desk.

2. If you are dissatisfied with the county’s resolution, you may file a written or oral discrimination complaint directly with the Wisconsin Department of Health Services against an agency, health care facility, or organization that you think may have discriminated against you for any program associated with DHS.

To file a discrimination complaint at the state level, contact:

Wisconsin Department of Health Services,
Affirmative Action and Civil Rights Office
1 W. Wilson St., Room 651
PO Box 7850
Madison, WI 53707-7850

608-267-4955 (Voice)
711 or 800-947-3529 (TTY)
608-267-1434 (Fax)

Email: dhsarc@dhs.wisconsin.gov

3. You may also file directly at the federal level. Contact:

U.S. Department of Health and Human Services
Centralized Case Management Operations
200 Independence Ave., SW
Suite 509F HHH Bldg.
Washington, DC 20201

800-368-1019 (Voice)
800-537-7697 (TDD)

Email: OCRComplaints@hhs.gov

For FoodShare Wisconsin (Food Stamps), contact:

USDA, Director, Office of Civil Rights
1400 Independence Ave. SW
Washington, DC 20250-9410

866-632-9992 (Toll-free customer service)
800-877-8339 (Local or federal relay)
866-377-8642 (Relay voice users)
800-845-6136 (Spanish)
Fax: 202-690-7442