

# SOUTH COUNTRY HEALTH ALLIANCE PROVIDER NETWORK NEWS

Volume 18, Issue 1  
Winter 2025

## What's Inside

- 2 Important Update for Chiropractic Services
- 2 Resume Medicare 2% Sequestration
- 2 2026 Health Plan Update
- 3 2026 Wellness Rewards
- 4 Our Model of Care
- 4 Updated Provider Manual Chapters
- 5 South Country Prenatal Care
- 6 Transportation – Inclement Weather
- 6 Medical Record Documentation Matters
- 6 Well-child Visits and Immunizations
- 7 Quality Improvement Projects
- 7 HEDIS® Audit Coming Soon!
- 8 Medical Service Authorization Review Timeframe Reduction
- 8 CAH Rate Submission Requirements
- 9 Accurate Provider Information Needed

## Thank you, Providers

South Country Health Alliance (South Country) would like to take this time to thank providers for their support, service, and dedication to our members throughout the year. You are helping us make a difference in many lives. We wish you the very best for 2026!

## EIDBI Provider Supervision Attestation Requirement

### New Clinical Supervision Standards

**Effective January 1, 2026**



Beginning January 1, 2026, the Early Intensive Developmental and Behavioral Intervention (EIDBI) agency (i.e. QSP, Level 1 or Level 2 provider) must provide at least one hour of clinical supervision for every 16 hours of direct treatment, unless otherwise specified in the person's Individual Treatment Plan (ITP).

#### Observation and direction requirements

- Observation and direction must be provided at least once per month for each person receiving services.
- Cannot provide more than two consecutive months of observation and direction via telehealth for each person receiving services.

#### Action Required

1. Review your current clinical supervision practices to ensure compliance with the 1:16 supervision ratio;
2. Use updated ITP forms that include a section on clinical supervision requirements;
3. Ensure the EIDBI Clinical Supervision Frequency section is completed on every ITP; and
4. If the above supervision ratio is not met, providers must include an alternate supervision plan within each ITP.

#### Documentation Audit

The Department of Human Services requires South Country to audit ITPs and other clinical information as necessary to ensure the supervision requirements are met. South Country expects providers to document the supervision plan on the ITP and will reach out to providers as needed for any missing information. South Country values your partnership in responding promptly to these follow-up requests.

## Your First Point of Contact

### Provider Contact Center

Hours: Monday - Friday,  
8:00 a.m. - noon and 1:00 p.m. - 4:30 p.m.  
(Central Time)

Phone: 1-888-633-4055 (toll free)

## Subscribe Today

Click the envelope icon to receive the Provider Network Newsletter and other provider communications by email.



## Important Update for Chiropractic Services

We are informing you of a significant change that may impact treatment for adults enrolled in Minnesota Medical Assistance programs.

The State of Minnesota has enacted legislation affecting Medical Assistance coverage for chiropractic care. Effective January 1, 2026, chiropractic services will no longer be a covered benefit for adults aged 21 and older under Minnesota Medical Assistance and MinnesotaCare.

Please note:

- This change applies only to adults enrolled in Minnesota Medical Assistance and MinnesotaCare.
- Members with Medicare coverage may continue to receive chiropractic services under benefits and eligibility guidelines specific to Medicare.

We want to ensure that you are aware of this update so you can plan accordingly for your patients' future care needs.

If you have any questions or need support, please reach our Provider Contact Center at 1-888-633-4055.

## Resume Medicare 2% Sequestration

During the Covid-19 pandemic, South Country suspended the 2% Medicare sequestration per Section 3709 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. CMS resumed sequestration on July 1, 2022; however South Country did not resume sequestration at that time. This communication is to provide a reminder notice that South Country have resumed the 2% Medicare sequestration reductions on **January 1, 2026**.

Sequestration is a term used to describe an automatic reduction of spending by the federal government to meet budget goals. Medicare sequestration imposes a 2% reduction in all Medicare-related claims, as calculated by the Office of Management and Budget. This reduction affects providers who file claims and receive payments from Medicare, impacting providers and services that accept Medicare reimbursements. This includes healthcare providers and services billing Part A and Part B and Medicare Part C and Part D plan sponsors.

South Country providers will start noticing this 2% reduction on their Medicare claims beginning with dates of service on or after January 1, 2026. For any questions related to this notice or more information about the Medicare sequestration, please contact the Provider Contact Center at 888-633-4055.

## 2026 Health Plan Update

The Minnesota Department of Human Services has announced important changes to Minnesota Health Care Programs (MHCP) health plan options for 2026.

### What's Changing?

Beginning **January 1, 2026**, **South Country Health Alliance (South Country) will be the only health plan option for Families and Children** (also known as PMAP) in the South Country service area. This includes the following counties: **Brown, Dodge, Goodhue, Sibley, Steele, Wabasha, and Waseca**.

### What You Need to Do

Please **verify member eligibility and health plan enrollment** beginning **January 1, 2026** to ensure accurate coverage.

For questions or assistance, contact **South Country's Provider Contact Center at 1-888-633-4055**.

### What's Not Changing?

- South Country will remain the single plan for **Special Needs BasicCare (SNBC)** in these counties.
- **MinnesotaCare** will still offer **two plan options** in all counties.
- **MSC+ and MSHO** will continue to have **multiple plan options** in all counties.

## 2026 Wellness Rewards

South Country has wellness rewards where members can earn a gift card after receiving their screening and completing the voucher. South Country wants to increase the percentage of our members going in for health prevention and screenings as recommended by their provider.

**Prenatal Care \$75 Reward:** Complete 4 prenatal visits during your pregnancy.

**Postpartum Care \$75 Reward:** Complete a postpartum visit within 12 weeks of giving birth.

**Infant Well-Care Visits \$75 Reward:** Complete at least 6 infant well-care visits before 15 months of age.

**Lead Test \$25 Rewards:** Complete a lead test between 9-18 months and 18-30 months of age for up to 2 rewards.

**Well-Child Visits \$25 Reward:** Complete 2 child well-care visits between 15 and 30 months of age.

**Child & Adolescent Well-Care Visit \$25 Reward:** Complete an annual child and adolescent well-care visit (C&TC exam) for children 3-21 years of age.

**Childhood Immunizations \$50 Reward:** Complete all provider recommended immunizations by 2 years of age.

**Immunizations for Adolescents \$50 Reward:** Complete all provider recommended immunizations by 13 years of age.

**Chlamydia Test \$25 Reward:** Complete a chlamydia test.

**Cervical Cancer Screening \$25 Reward:** Members age 21 to 65 (or as recommended by your provider) complete a cervical cancer screening.

**Mammogram \$25 Reward:** Members age 40 and older (or as recommended by your provider) who complete a mammogram.

**Colorectal Cancer Screening \$25 Reward:** Members age 45 and older (or as recommended by your provider) complete a colorectal cancer screening.

**Diabetes Blood Glucose (HbA1c) Test \$25 Reward:** Members enrolled on AbilityCare, SharedCare, SingleCare, SeniorCare Complete (MSHO), or MSC+ with a diagnosis of Type 1 or Type 2 Diabetes Mellitus on date of service of blood glucose (HbA1c) test.

**Dental Visit \$25 Reward:** Members enrolled on AbilityCare, SharedCare, SingleCare, SeniorCare Complete (MSHO) or MSC+ and complete at least 1 dental visit.

### Other benefits you may have available:

**Delfina Program:** Members who are currently pregnant or up to one year postpartum are eligible to use the Delfina App. This app includes virtual support from doulas, registered dieticians, mental health therapists, lactation counselors, as well as offers virtual group classes for members to join! <https://www.delfina.com/south-country-health-alliance>

**Be Active™:** Receive up to a \$20 credit for Families and Children (PMAP), SingleCare, SharedCare, MinnesotaCare and Minnesota Senior Care Plus (MSC+) members. Up to \$40 credit for SeniorCare Complete (MSHO) and AbilityCare members towards your monthly health club membership fees.

**Be Buckled™:** South Country provides one car seat per child, per lifetime.

**Early Childhood Family Education (ECFE):** Classes for families with newborn to kindergarten age children are free to South Country members. Sibling care is not covered.

**Free Breast Pump:** South Country will cover the cost of a breast pump for new moms.

**Community Education:** South Country will cover up to \$15 of the registration fee for up to 5 Community Education classes a year.

Some restrictions apply. Visit <https://www.mnscha.org/members/wellness-programs/> or call Member Services for full details. Rewards limited to one reward per year per service unless otherwise specified.

---

### South Country Health Alliance Member Services

1-866-567-7242

TTY users call 1-800-627-3529 or 711

Hours of Service: 8 am to 4:30 pm, Monday - Friday

---

## Our Model of Care

South Country's Model of Care is our plan to address the unique needs of each member in AbilityCare (SNBC) and SeniorCare Complete (MSHO), our two integrated Medicare Advantage Special Needs Plans for individuals eligible for both Medicare and Medicaid. It is important that our providers understand the Model of Care so we can actively work together to ensure superior care and service and improve the quality of life for our members.

### About Our Members

The average age of our AbilityCare members is 50, with enrollment split almost evenly between males and females. Forty-one percent of our SeniorCare Complete members are 80 years old or older, and 70% of our SeniorCare Complete members are female.

Members from both plans have complex physical, cognitive and mental health diagnoses that are chronic in nature. However, in most cases, these health issues are managed through engagement and support of the right providers and services.

### Care Coordination

Our Model of Care centers around working closely with members at every level to set them up for success. Each member is assigned a care coordinator who conducts a health risk assessment (initially upon enrollment and annually unless a member is unable to be reached or refuses). After an assessment is completed with a member, a care plan is developed. Care coordinators assist members in selecting a primary care clinic or practitioner. Care coordinators live and work in our members' communities and are experts in identifying and working with local providers and resources.

Care coordinators work with various health care providers, including primary care, dental, specialty, home care, and more, as well as community human service providers (e.g., food shelves, veteran's services, etc.) so members can receive care at the right time without duplication of services.

This close management of resources and relationships results in improved health outcomes for members and improved efficiency for providers.

Local care coordination also ensures access to all the member's benefits, including Medicare, Medicaid, home and community-based waivers and other county services.

### Interdisciplinary Care Team:

The interdisciplinary care team (ICT) in each county acts as another important part of the Model of Care. The ICT is a collaborative group consisting of South Country staff, care coordinators and providers. Some of the goals of the ICT include:

- Sharing clinical information to ensure members receive appropriate and timely care;
- Sharing completed member care plans directly with providers to improve understanding of member preferences; and
- Monitoring transitions in care (e.g., emergency room visits and hospitalizations) to improve discharge planning, decrease length of stays, decrease readmissions and improve members' overall care.

### Measurable Goals, Outcomes and Evaluation

Our Model of Care includes annual measures that are monitored and analyzed to help improve the quality of life for our members. Results are documented and preserved as evidence of the effectiveness of the Model of Care and reviewed for opportunities to improve processes and strategy where needed. These results are communicated to stakeholders and regulatory agencies.

The Centers for Medicare and Medicaid Services (CMS) requires that we provide Model of Care training and information to providers. Thank you for participating in our network and the services you provide our members.

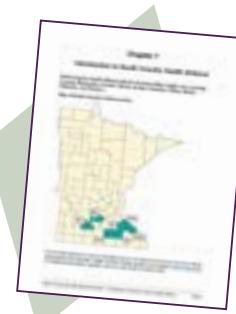
For more information about our Model of Care, please visit the Model of Care chapter in our [Provider Manual on our website](#).

## Updated Provider Manual Chapters

Remember to check out our Provider Manual chapters located on our website at:

<https://www.mnscha.org/providers/provider-manual/> for any updates.

The Provider Manual chapters are updated regularly throughout the year; check out the [Summary of Provider Manual Changes](#) to see what has been updated in the chapters.



## South Country Prenatal Care

Timely prenatal visit notifications are vital for South Country to provide support and education for our rural members. Early, consistent prenatal care improves outcomes and lets us connect members to key services like prenatal care, nutrition, transportation, and care coordination—especially important in areas with limited healthcare access.

### Why Category-II CPT Codes Matter—Even If They Aren't Paid

At South Country, we rely on timely and accurate data to identify pregnant members and connect them with vital support. While Category-II CPT codes are not reimbursed, their inclusion in claims plays a crucial role in reducing administrative burden and accelerating care coordination. When these codes are submitted, we can identify pregnancies earlier—eliminating the need for medical record requests and allowing us to reach out to members sooner. Early identification means we can provide help with:

1. Scheduling prenatal visits and helping coordinate rides to and from appointments – this in turn increases compliance to appointments.
2. Connecting pregnant and postpartum mothers with the Delfina program for personalized support. Delfina is free to all South Country mothers who are pregnant up to one year postpartum. Delfina offers:
  - a. Tele-doula;
  - b. Virtual mental health, registered dietitian and lactation support;
  - c. A community of virtual classes like: mom time, breastfeeding, and more;
  - d. Access to a full library of prenatal and postpartum reading resources;
  - e. Ability to log weight, mood, and symptoms; and
  - f. The opportunity to earn a water bottle, diaper bag and more for engaging!
3. Free breast pump program.
4. Local childbirth education resources.
5. Contact from our wellness support team to guide each

member through the list of resources they are eligible for.

6. Touch base with a public health RN when the mother is interested in in-home visits before and after pregnancy.
7. Women, Infants, and Children (WIC) benefits.
8. Other benefits:
  - a. Prenatal Care Voucher: <https://www.mnscha.org/wp-content/uploads/7453.pdf>
  - b. Postpartum Care Voucher: <https://www.mnscha.org/wp-content/uploads/7452.pdf>
  - c. Be Buckled Free Car Seat Program: <https://www.mnscha.org/wp-content/uploads/7562.pdf>
  - d. Free Breast Pump: <https://www.mnscha.org/wp-content/uploads/7564.pdf>
  - e. Pregnancy and Childbirth Classes
  - f. And we don't stop there! We also provide resources and rewards after their baby is born:
  - g. Baby's 1st Year Calendar: <https://www.mnscha.org/wp-content/uploads/6485.pdf>
  - h. Infant Well-Care Visits Voucher: <https://www.mnscha.org/wp-content/uploads/6433-E.pdf>
  - i. Well-Child Visits (C&TC Exams) Voucher: <https://www.mnscha.org/wp-content/uploads/7454.pdf>
  - j. Childhood Immunizations Voucher: <https://www.mnscha.org/wp-content/uploads/7443.pdf>
9. See all the Wellness Benefits South Country offers for our pregnant members: <https://www.mnscha.org/wp-content/uploads/7565.pdf>
  - a. <https://www.mnscha.org/members/embracing-life-online/>

### So how can you help get these resources into our members' hands sooner?? Billing a Category-II-CPT Code

When billing either a global or standalone maternity service, we request that you also include a Category-II-CPT Code as a no-charge line item for both prenatal and postpartum care. Initial prenatal care must occur within the first trimester and postpartum care should occur on or between 7 and 84 days after delivery. Below is a list of the CPT-Category-II Codes to use:

CPT-Cat-II Codes	Definition
0500F	Initial prenatal care visit (report at first prenatal encounter with health care professional providing obstetrical care. Report also date of visit and, in a separate field, the date of the last menstrual period [LMP].)
0501F	Prenatal flow sheet documented in medical record by first prenatal visit (documentation includes at minimum blood pressure, weight, urine protein, uterine size, fetal heart tones, and estimated date of delivery). Report also: date of visit and, in a separate field, the date of the last menstrual period [LMP]. Note: If reporting 0501F prenatal flow sheet, it is not necessary to report 0500F initial prenatal care visit.)
0502F	Subsequent prenatal care visit (Prenatal) [Excludes: patients who are seen for a condition unrelated to pregnancy or prenatal care (eg, an upper respiratory infection; patients seen for consultation only, not for continuing care)]
0503F	Postpartum care visit (Prenatal)

# Transportation – Inclement Weather

Providers **must** make every effort to complete all the transportation services rendered and return members they took to an appointment before inclement weather limits their ability to transport the member safely. Providers may decline transporting members when they feel that it is unsafe to travel due to inclement weather. The safety of the members is top priority and should be considered when deciding whether to transport or to provide a specific level of service during times of inclement weather. Special consideration must be given to urgent requests such as but is not limited to dialysis, electro-current therapy, chemotherapy, and radiation.

The provider must notify the member(s) and South Country RideConnect immediately if they are unable to complete transportation services due to inclement weather.

# Medical Record Documentation Matters

Accurate and complete documentation is one of the most effective tools you have to support high-quality patient care and ensure appropriate reimbursement. Your clinical notes should clearly reflect why care was needed and what care was provided, helping to establish medical necessity and reduce the risk of compliance issues. Thorough documentation also strengthens communication across the care team, promoting continuity and consistency in treatment. Ultimately, well-documented records protect both your patients and your practice.

To learn more, South Country Health Alliance encourages you to watch a short video from the Centers of Medicare & Medicaid Services (CMS) about how documentation helps support patient care, claim processing, medical review. CMS has also created a Documentation Matters toolkit that includes addition videos, fact sheets, and resource guides.

Provider Minute: The Importance of Proper Documentation <https://www.youtube.com/watch?v=hG9fefmKUR0>

# Well-child Visits and Immunizations

The key talking points below may help when communicating with families about the importance of well-child visits and immunizations. Other resources and details can be accessed at the [Minnesota Department of Health Well-child Visits and Immunization webpage](#).

Healthy children are more likely to grow up to be healthy adults. Regular checkups, called well-child visits, give parents and health care providers an opportunity to check growth and development, identify any concerns, and treat them early to prevent bigger problems later on.

Many children have missed these important checkups where they get routine immunizations, putting them and the community at risk for certain disease outbreaks.

Keep your kids on track with the recommended immunization schedule developed to protect infants and children by providing immunity early in life before they are exposed to potentially life-threatening diseases. It's never too late to get your kids caught-up on the vaccines they need to stay healthy.

You can give the [Keep Your Kids on Track handout](#) to families to promote well-child visits and getting kids back on track with recommended vaccines. The handout is now available in additional languages: Hmong, Russian, Somali, Spanish, and Vietnamese.

## Quality Improvement Projects

As a part of South Country's quality improvement projects, we have focused studies, performance improvement projects (PIPs) and chronic care improvement projects (CCIPs) in 2026.

### **Focused studies:**

Focused studies are improvement projects where we "focus" our efforts to improve the health outcome of a specific set of members.

Cervical cancer prevention screening – In this focused study we are working to get members 21-64 years of age or as recommended by a provider, in to see their primary care physician for routine prevention screenings for cervical cancer and to improve on the early detection of cervical cancer.

Chlamydia screening – In this focused study we are working to get members 16-24 years of age who were identified as sexually active to complete a test for chlamydia screening annually and to consult their primary care physician for other recommended routine prevention screenings.

### **Performance improvement projects:**

South Country is engaged in two PIPs. The first PIP focuses on addressing the comorbidities of diabetes and depression for the seniors in Minnesota Senior Health Options (MSHO) & Minnesota Senior Care Plus (MSC+) products and the Special Needs Basic Care (SNBC) populations.

The second PIP is aimed to promote a "Healthy Start" for Minnesota children in the Prepaid Medical Assistance Program (PMAP) and MinnesotaCare populations by focusing on and improving services provided to pregnant people and infants.

### **Chronic care improvement projects:**

Cancer screenings for members — These projects work to increase the number of members who are up to date on their colorectal and breast cancer screenings for early detection and to increase the percentage of our members going in for health screenings as recommended by their providers and physicians.

South Country collaborates with providers and various external stakeholders on various projects and initiatives and is always open to new collaborative ideas and approaches to support our members' health and wellness. In 2026, we would like to continue adding new engagement with communities and providers in the performance improvement projects and request that you email [Quality@mnscha.org](mailto:Quality@mnscha.org) or call Justin Smith, Manager of Quality Improvement at 507-431-6387 to discuss opportunities to work together.

---

## HEDIS® Audit Coming Soon!

At the beginning of each year, like many health plans, South Country conducts their annual HealthCare Effectiveness Data and Information Set (HEDIS®) audit. As part of this audit, we request medical records from many providers, which supports your patients receiving the best quality of care. We are committed to ensuring this process is smooth and efficient. If your medical records contact or process to request medical records has changed in 2025, please contact Milly Stanton at [mstanton@mnscha.org](mailto:mstanton@mnscha.org) or call 507-431-3012. We thank you for your continued cooperation and patience; you have an important impact on our annual HEDIS® audit and the members we serve.

## Medical Service Authorization Review Timeframe Reduction

We are informing you of an important change that will affect the **medical service** authorization process beginning **January 1, 2026**. In accordance with updated regulatory requirements, health plans will now have **five business days** to complete medical service authorization reviews.

This shortened timeframe underscores the importance of receiving complete and accurate information with each authorization request. To ensure we meet the shortened review window, we kindly ask that you submit complete requests with all clinical documentation up front to help avoid delays. We are taking several steps to streamline the process:

- **Authorization lookup tool coming early 2026:** We are committed to launching a new user-friendly tool that will allow you to quickly determine whether an authorization is required and access the coverage criteria associated with specific services. In addition to this tool, we will continue to maintain and publish a prior authorization grid for your reference.
- **Driving faster turnaround times:** By year-end, we will have eliminated prior authorization requirements for hundreds of codes—dramatically cutting administrative steps and accelerating review process. Each code removed means more time saved for providers, reviewers and, of course, our members.
- **Send it all, skip the stall:** While we ask for complete requests with all required documentation upfront, we understand that additional information may sometimes be necessary. We value your partnership in responding promptly to these follow-up requests, as your timely responses are critical to avoiding delays in coverage decisions.

We appreciate your collaboration and commitment to delivering timely, high-quality care to our members. If you have any questions or need support, please don't hesitate to reach out to our Provider Contact Center at 1-888-633-4055.

---

## CAH Rate Submission Requirements

Recently, some Medicare Administrative Contractors have changed the format of critical access rate notifications sent to providers and are no longer sending the Summary of Interim Rate Changes. As a result of this change, South Country Health Alliance now requires providers to submit the Revised Payment and Retroactive Lump Sum Adjustment page(s) along with the Critical Access Hospital (CAH) Interim Rate Review page(s) in order to ensure accurate rate programming.

Providers are required to submit their CAH rate updates and changes to South Country annually or within thirty (30) days of the date received, whichever is earlier, at the following:

Email: [schaclaims@primewest.org](mailto:schaclaims@primewest.org)

Fax: 1-320-762-5956

If you have questions, please call the Provider Contact Center at 888-633-4055.

## Accurate Provider Information Needed

It is critical that we have accurate provider information in our system and that our directories contain correct information about your organization. CMS requires that we confirm this information directly with our contracted providers each quarter. Please communicate to us if your organization has had any changes to:

- Contracted entity/practitioner name;
- Contracted entity address;
- Billing address/information;
- Contact information for contracting, billing or credentialing;
- Ownership;
- Tax ID or NPI/UMPI number;
- Telephone/fax numbers;
- Addition or removal of a contracted entity or practitioner;
- Addition or removal of services offered;
- Directory email address;
- Web address;
- Organization hours; and
- Accepting new Medicare/Medicaid patients (yes or no).

### New forms to ensure accurate provider information!

Use the following forms to notify South Country of any changes:

- List changes on the Contracted Entity Change Update Form #5073.
- If you have added or terminated a location, use the Contracted Entity Location Add/Remove Form #5079.
- If you are changing any services at a particular location, use the Change of Services web form.

These forms are located on our South Country website, under Providers/Forms/Contracted Providers, at [www.mnscha.org/](http://www.mnscha.org/).

Forward these changes to us via email at [providerinfo@mnscha.org](mailto:providerinfo@mnscha.org), fax to South Country at 507-444-7774 or mail to South Country Health Alliance, Attn: Contracting, 6380 West Frontage Road, Medford, MN 55049. If you have any questions on this process, please reach out to our **Provider Contact Center at 1-888-633-4055**.

South Country provides our members with a current list of providers on our website with the [South Country Provider Online Directory](#) or other downloadable, printable directories.

**Thank you for your assistance!**

Our friendly provider network team would love to hear from you.

Tell us how we are doing - please take a minute or two to complete our [Satisfaction Survey](#).

## Provider Resources

Provider Network News is a publication of South Country Health Alliance. For submission information or reprint permission, contact:

South Country Health Alliance  
6380 West Frontage Road  
Medford, MN 55049

South Country Health Alliance  
Provider Manual, [Chapter 3](#)  
[Provider Network Resources](#)

Email: [ProviderInfo@mnscha.org](mailto:ProviderInfo@mnscha.org)

Visit us online at [www.mnscha.org](http://www.mnscha.org).

Click the Providers tab to find all the forms, instructions and other resources and information you need.

## REPORTING: Fraud, Waste and Abuse

It is everyone's responsibility to report suspected fraud, waste and abuse.

You can report it by sending an email to the South Country compliance department at [compliance@mnscha.org](mailto:compliance@mnscha.org), by calling anonymously through our Report it hotline at 1-877-778-5463, or by visiting [www.reportit.net](http://www.reportit.net).  
Username: SCHA, Password: Owatonna

## Did You Know?

The DHS website provides updates to personal care attendant (PCA) providers specifically for training requirements, both for individuals and for agency administration staff. [Visit the DHS PCA Provider Training webpage.](#)