

# PCA Provider Agency Enrollment Criteria and Forms

Revised: [January 23, 2024](#)

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## How to Enroll

Your initial personal care provider organization (PCPO) or personal care assistance (PCA) Choice or fiscal management service (FMS) application to enroll with Minnesota Health Care Programs (MHCP) must include all items listed in this section.

Owners, managing employees and qualified professionals are required to attend PCA agency training before completing the enrollment process. Any additional business sites or locations must also submit a complete application.

## PCPO and PCA Choice Enrollment

PCPO and PCA Choice providers must follow these steps:

1. Attend the training [PCA Steps for Success](#).
2. Pay the [application fee](#)
3. Register to access the [Minnesota Provider Screening and Enrollment \(MPSE\) portal](#) and complete your enrollment online using the [MPSE portal](#).

In the **Enrollment Records** section, you will click **Add a New Enrollment Record** at the bottom of the page. This will take you to the **Enrollment Record Information** page where you will use the drop-down list labeled **Enrollment Record Type** to select Personal Care Provider Organization (PCPO)- 38-O. Additionally, when you get to the section titled **Services**, make sure to add PCA Choice or Personal Care Provider Organizations (PCPO) or both.

or

Complete the following and fax to Provider Eligibility and Compliance (PEC) at **651-431-7465** along with any required documents.

- [PCPO or PCA Choice Provider Enrollment Application \(DHS-4022\) \(PDF\)](#)
- [Disclosure of Ownership and Control Interest of an Entity \(DHS-5259\) \(PDF\)](#)
- [Qualified Professional \(QP\) Acknowledgement \(DHS-4022C\) \(PDF\)](#)
- [Direct Deposit Authorization for Electronic Funds Transfer \(EFT\)](#)
- [MHCP Provider Agreement \(DHS-4138\) \(PDF\)](#) and one or both of the following:
  - [Provider Agreement Addendum – PCPO \(DHS-4022A\) \(PDF\)](#)
  - [Provider Agreement Addendum – PCA Choice Provider \(DHS-4022B\) \(PDF\)](#)
- Copy of certificate of registration with the Office of the Secretary of State of Minnesota
- Copy of PCA Steps for Success certificate for owners, managing employees, and qualified professionals
- [PCA Agency Assurance Statement \(DHS-6005\) \(PDF\)](#)
- [Designation of PCA Billing Person \(DHS-6000\) \(PDF\)](#)
- Copy of certificate of liability insurance. Copy of your general liability insurance certificate naming "Provider Eligibility and Compliance" as a certificate holder on the document, with the following address listed: PO Box 64987, St. Paul, MN. 55164-0987.
- Copy of Workers' Compensation insurance (not required for Medicare-certified or Class A licensed agencies)

- Copy of fidelity bond in the amount of \$20,000
- Copy of [PCA Agency Surety Bond \(DHS-6033\) \(PDF\)](#). The surety bond must be in the amount of \$50,000 for first time enrolling providers

**Please note:** Medicare-certified home health agencies may submit the [Organization – Provider Enrollment Application \(DHS-4016A\) \(PDF\)](#) if also doing services other than PCA. If providing PCA services through the enrolled home health agency, the agency must also follow steps 2-3 of the enrollment process listed on this page.

4. Review and keep a copy of the [MHCP Data Privacy Notice \(DHS-6287\) \(PDF\)](#).

### **FMS Enrollment**

FMS providers must follow these steps:

1. DHS determines if FMS providers meet the qualifications through a Request for Proposal (RFP) process at a frequency determined by DHS. The provider must submit a copy of the signed contract to Provider Eligibility and Compliance. Find additional information about this process in the [financial management services](#) section of the Consumer Directed Community Support (CDCS) Manual.
2. Pay the [application fee](#).
3. Register to access the [Minnesota Provider Screening and Enrollment \(MPSE\) portal](#) and complete your enrollment online using the [MPSE portal](#).

**or**

Complete the following and fax to Provider Eligibility and Compliance (PEC) at **651-431-7465** along with any required documents.

- Signed contract from DHS
- [FMS Provider Enrollment Application \(DHS-6925\) \(PDF\)](#)
- [Disclosure of Ownership and Control Interest of an Entity \(DHS-5259\) \(PDF\)](#)
- [Electronic Funds Transfer Supplier ID Notification \(DHS-3725\) \(EFT\)](#)
- [MHCP Provider Agreement \(DHS-4138\) \(PDF\)](#) along with [FMS Provider Agreement Addendum for CFSS, CDCS and CSG Services \(DHS-7002\) \(PDF\)](#)
- [FMS Organization Surety Bond \(DHS-7686\) \(PDF\)](#)
- Copy of certificate of liability insurance. Copy of your general liability insurance certificate naming "Provider Eligibility and Compliance" as a certificate holder on the document, with the following address listed: PO Box 64987, St. Paul, MN. 55164-0987.
- Copy of Workers' Compensation insurance (not required for Medicare-certified or Class A licensed agencies)
- Copy of fidelity bond in the amount of \$20,000

4. Review and keep a copy of the [MHCP Data Privacy Notice \(DHS-6287\) \(PDF\)](#).

### **Processing Timeline**

We process forms in order of date received. Whether enrolling using the MPSE portal or by fax, allow 30 days for processing. If we need more information to complete your enrollment, we will send a request for more information letter via U.S. mail (or in your MN-ITS mailbox, if you have an account) telling you what you need to do to complete your enrollment.

### **Revalidation**

MHCP is required to follow the Centers for Medicare & Medicaid Services federal provider screening regulations.

MHCP will notify you when you are due for revalidation. When you are notified, you must submit a revalidation request through the MPSE portal or fax all required forms and documents listed under [How to Enroll to Provider Eligibility and Compliance](#) at 651-431-7462.

We recommend using the MPSE portal and following the instructions in the [Revalidation](#) section of the MPSE user manual to revalidate your record. Log in to your MN-ITS account on the [MN-ITS: Home](#) webpage and choose the Minnesota Provider Screening and Enrollment (MPSE) portal link. If you have not registered your MN-ITS account, your login information is on your original Welcome Letter. Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you do not have your Welcome Letter.

Refer to [Revalidation](#) in [Provider Screening Requirements](#) under Provider Basics in the MHCP Provider Manual for important information, including timelines, the revalidation process and impacts to your enrollment. Providers who do not meet the revalidation timelines will have their enrollment terminated.

### **Reporting Changes**

You must report any changes made on a provider record to MHCP Provider Eligibility and Compliance.

Report changes in ownership 30 days in before they become effective and submit new copies of all enrollment documents, a new screening fee payment, and a signed copy of the [Provider Entity Sale or Transfer Addendum \(DHS-5550\) \(PDF\)](#).

Refer to [Changes to Enrollment](#) in the [Enroll with MHCP](#) section of the MHCP Provider Manual for details.