



2026 Annual Training Requirement: Home & Community-Based Services (HCBS)

Transforming the Health of Our Community One Person at a Time

Annual HCBS Training Requirement

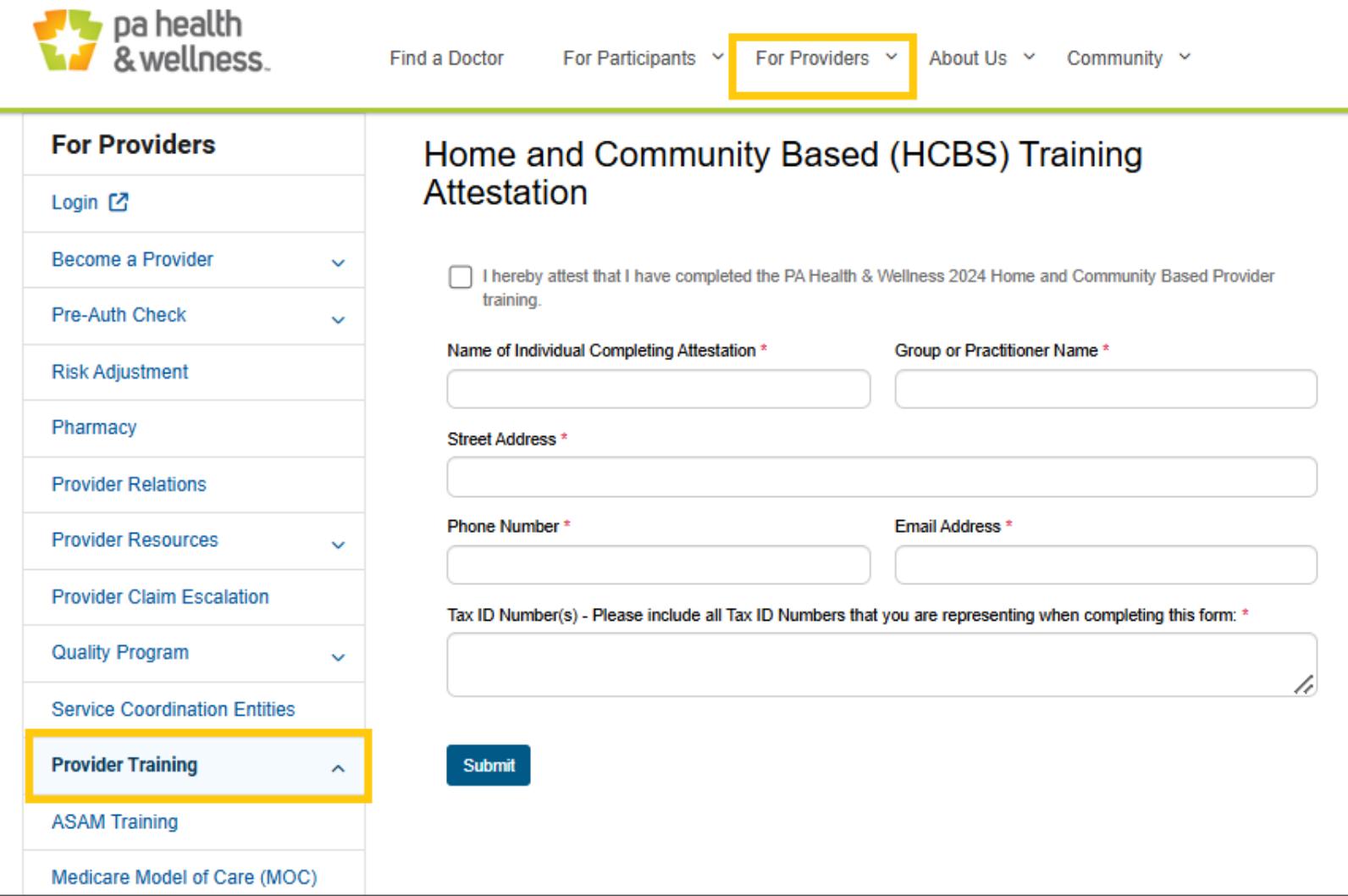
HCBS Provider Types 59 required to complete this training annually:

Adult Daily Living	Home Adaptations	Personal Emergency Response System (PERS)
Assistive Technology	Home Delivered Meals	Pest Eradication
Behavior Therapy Services	Home Health Aid Services	Physical Therapy
Benefits Counseling	Job Coaching	Residential Habilitation
Career Assessment	Job Finding	Respite
Cognitive Rehabilitation Therapy Services	Non-Medical Transportation	Specialized Medical Equipment and Supplies
Community Integration	Nursing Services	Speech and Language Therapy
Community Transition Services	Nutritional Consultation Services	Structured Day Habilitation
Counseling Services	Occupational Therapy	Telecare
Employment Skills Development	Personal Assistance Services	Vehicle Modifications
Financial Management Services		

Compliance with this Training Requirement will be tracked per Tax ID #: At least one person from each organization (Tax ID#) must complete this training annually. Attestation must be completed to receive credit for completion.

HCBS Annual Training Attestation

<https://www.pahealthwellness.com/providers/provider-training/hcbs-training-attestation.html>



The screenshot shows the PA Health & Wellness website with a navigation bar at the top. The 'For Providers' menu item is highlighted with a yellow box. On the left, a sidebar titled 'For Providers' lists various links, with 'Provider Training' also highlighted with a yellow box. The main content area is titled 'Home and Community Based (HCBS) Training Attestation'. It contains a checkbox for attesting to completion of training, and fields for Name, Street Address, Phone Number, Email Address, and Tax ID Number(s). A 'Submit' button is at the bottom.

pa health & wellness.

Find a Doctor For Participants **For Providers** About Us Community

For Providers

Login 

Become a Provider 

Pre-Auth Check 

Risk Adjustment

Pharmacy

Provider Relations

Provider Resources 

Provider Claim Escalation

Quality Program 

Service Coordination Entities

Provider Training 

ASAM Training

Medicare Model of Care (MOC)

Home and Community Based (HCBS) Training Attestation

I hereby attest that I have completed the PA Health & Wellness 2024 Home and Community Based Provider training.

Name of Individual Completing Attestation *

Group or Practitioner Name *

Street Address *

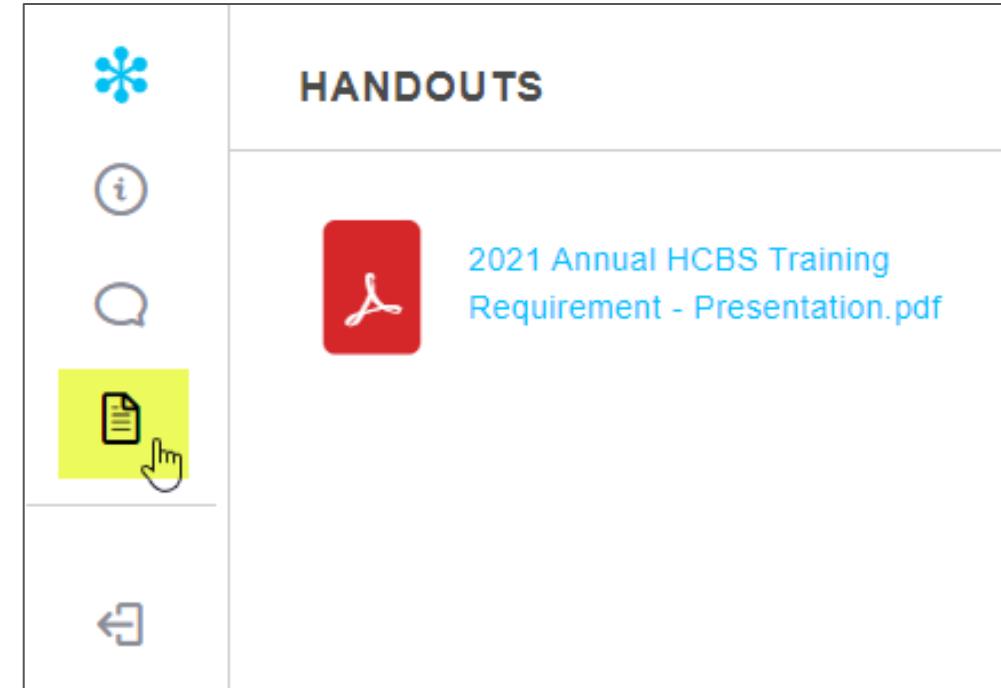
Phone Number * Email Address *

Tax ID Number(s) - Please include all Tax ID Numbers that you are representing when completing this form: *

Submit

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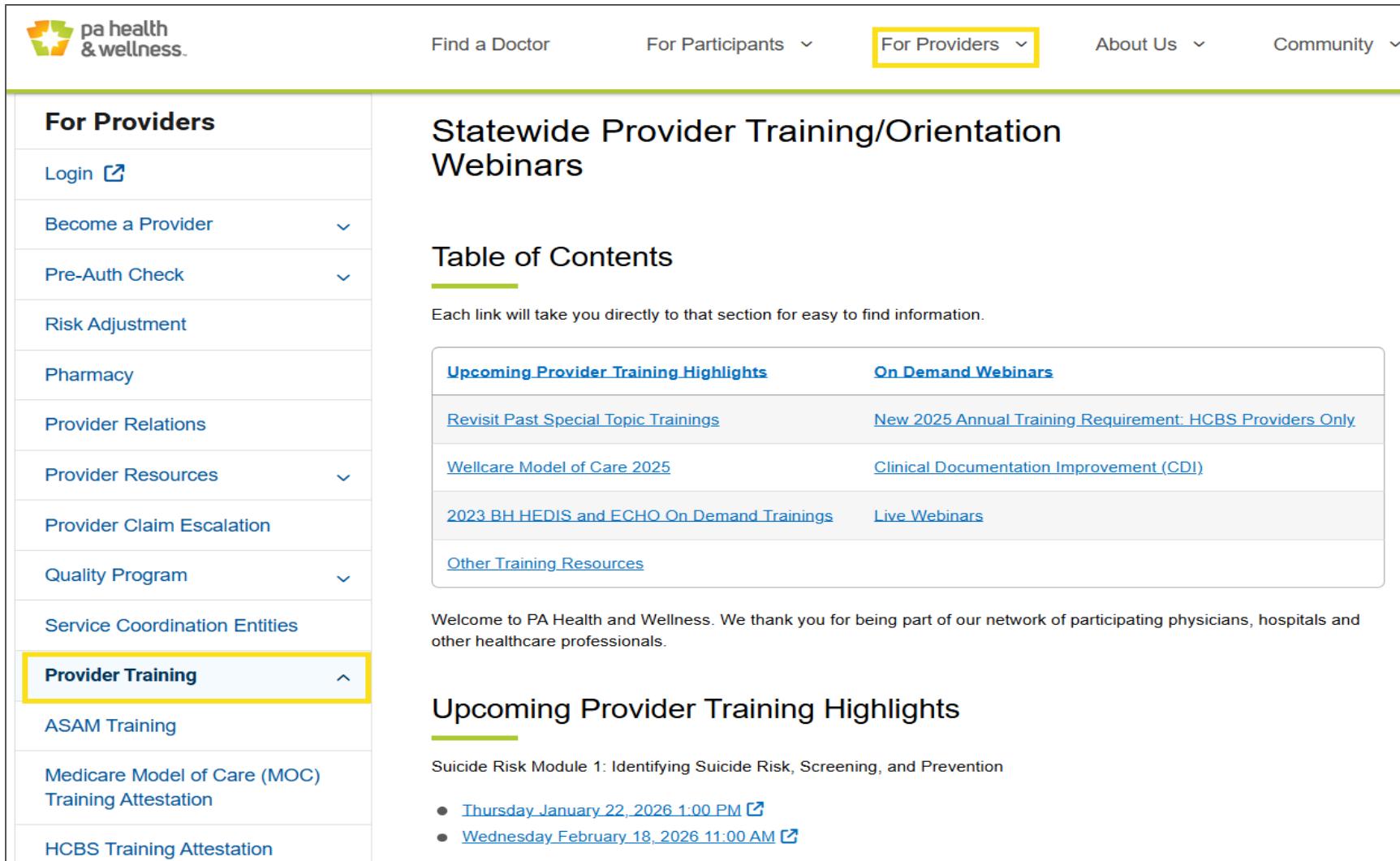


Agenda:

1. CHC Overview and Verifying Eligibility
2. Service Coordination, PCSP and Needs Assessment
3. Electronic Visit Verification (EVV)
4. Referral for Mental Health and Drug, Alcohol and Substance Abuse Services
5. PHW Utilization Review and Prior Authorizations
6. Medical Necessity
7. Administrative Processes
8. Dual Eligibility for Medicare and Medicaid
9. FWA – Self Audit
10. PHW Policies Against Discrimination
11. Accessibility Requirements
12. Cultural, Linguistic and Disability Competency
13. Information around Alzheimer's Disease and related dementias
14. PHW Complaints & Grievances Process
15. Critical Incidents
16. Performance Improvement Plans
17. Provider & Quality Management Related Issues
18. Disaster Planning

Annual Training Schedule: www.pahealthwellness.com

Providertraining@pahealthwellness.com



The screenshot shows the 'pa health & wellness' website with a navigation bar at the top. The 'For Providers' menu item is highlighted with a yellow box. The main content area is titled 'Statewide Provider Training/Orientation Webinars' and includes a 'Table of Contents' section with links to various training highlights and resources. A welcome message and an 'Upcoming Provider Training Highlights' section are also present.

For Providers

- Login 
- Become a Provider 
- Pre-Auth Check 
- Risk Adjustment
- Pharmacy
- Provider Relations
- Provider Resources 
- Provider Claim Escalation
- Quality Program 
- Service Coordination Entities
- Provider Training** 
- ASAM Training
- Medicare Model of Care (MOC) Training Attestation
- HCBS Training Attestation

Statewide Provider Training/Orientation Webinars

Table of Contents

Each link will take you directly to that section for easy to find information.

Upcoming Provider Training Highlights	On Demand Webinars
Revisit Past Special Topic Trainings	New 2025 Annual Training Requirement: HCBS Providers Only
Wellcare Model of Care 2025	Clinical Documentation Improvement (CDI)
2023 BH HEDIS and ECHO On Demand Trainings	Live Webinars
Other Training Resources	

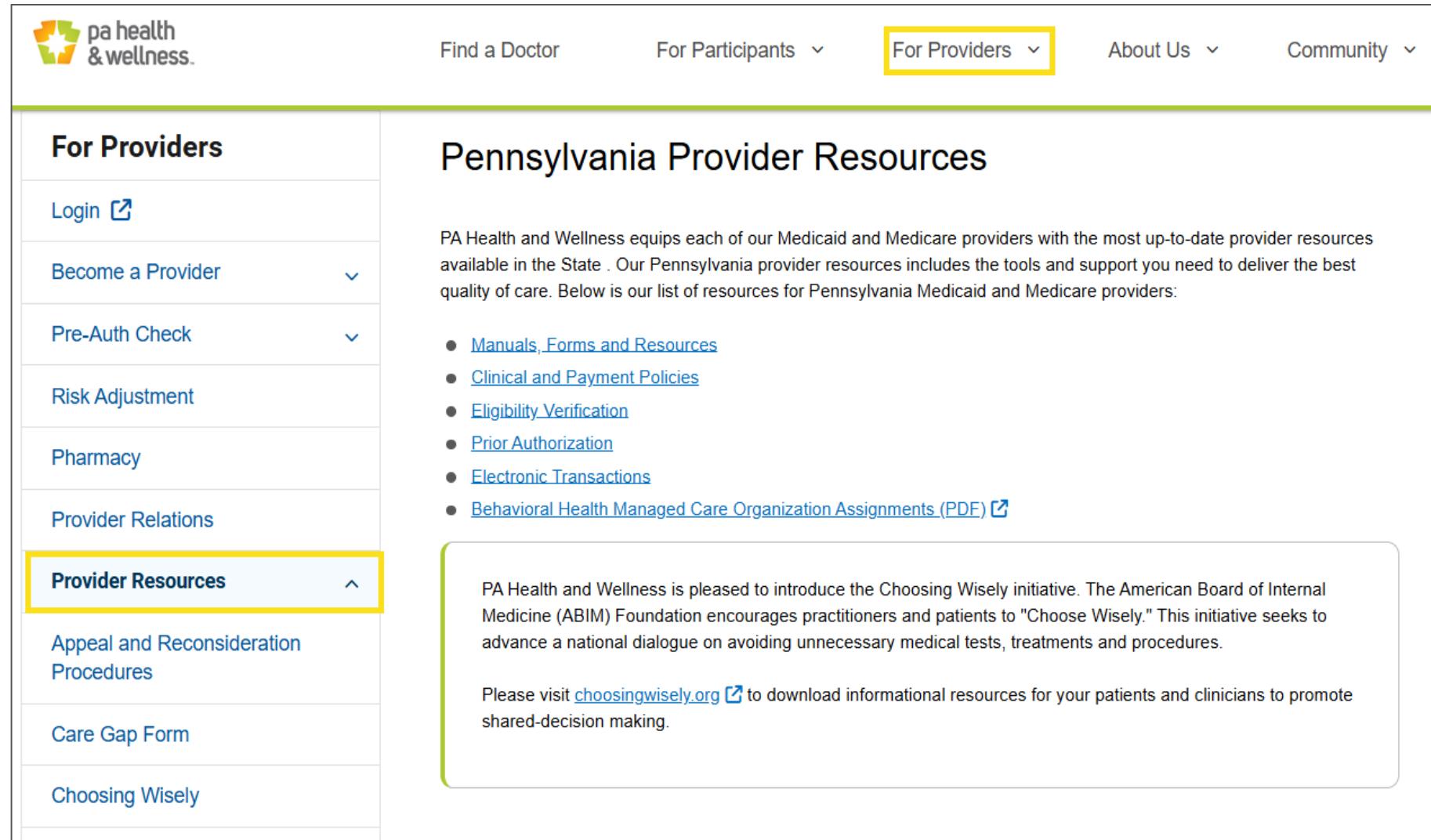
Welcome to PA Health and Wellness. We thank you for being part of our network of participating physicians, hospitals and other healthcare professionals.

Upcoming Provider Training Highlights

Suicide Risk Module 1: Identifying Suicide Risk, Screening, and Prevention

- [Thursday January 22, 2026 1:00 PM !\[\]\(e4e88b6a7edbea288a42dec204de976d_img.jpg\)](#)
- [Wednesday February 18, 2026 11:00 AM !\[\]\(b9af56f51a895a6022f70a41d80f0562_img.jpg\)](#)

Provider Manuals: www.pahealthwellness.com



The screenshot shows the 'For Providers' section of the pa health & wellness website. The navigation bar includes links for 'Find a Doctor', 'For Participants', 'For Providers' (which is highlighted with a yellow box), 'About Us', and 'Community'. The left sidebar lists various provider resources: 'Login', 'Become a Provider', 'Pre-Auth Check', 'Risk Adjustment', 'Pharmacy', 'Provider Relations', 'Provider Resources' (which is highlighted with a yellow box), 'Appeal and Reconsideration Procedures', 'Care Gap Form', and 'Choosing Wisely'. The main content area is titled 'Pennsylvania Provider Resources' and describes the tools and support available for providers. It lists several resources: 'Manuals, Forms and Resources', 'Clinical and Payment Policies', 'Eligibility Verification', 'Prior Authorization', 'Electronic Transactions', and 'Behavioral Health Managed Care Organization Assignments (PDF)' (with a link icon). A callout box highlights the 'Choosing Wisely' initiative, stating: 'PA Health and Wellness is pleased to introduce the Choosing Wisely initiative. The American Board of Internal Medicine (ABIM) Foundation encourages practitioners and patients to "Choose Wisely." This initiative seeks to advance a national dialogue on avoiding unnecessary medical tests, treatments and procedures. Please visit choosingwisely.org to download informational resources for your patients and clinicians to promote shared-decision making.'

pa health & wellness

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Appeal and Reconsideration Procedures

Care Gap Form

Choosing Wisely

Pennsylvania Provider Resources

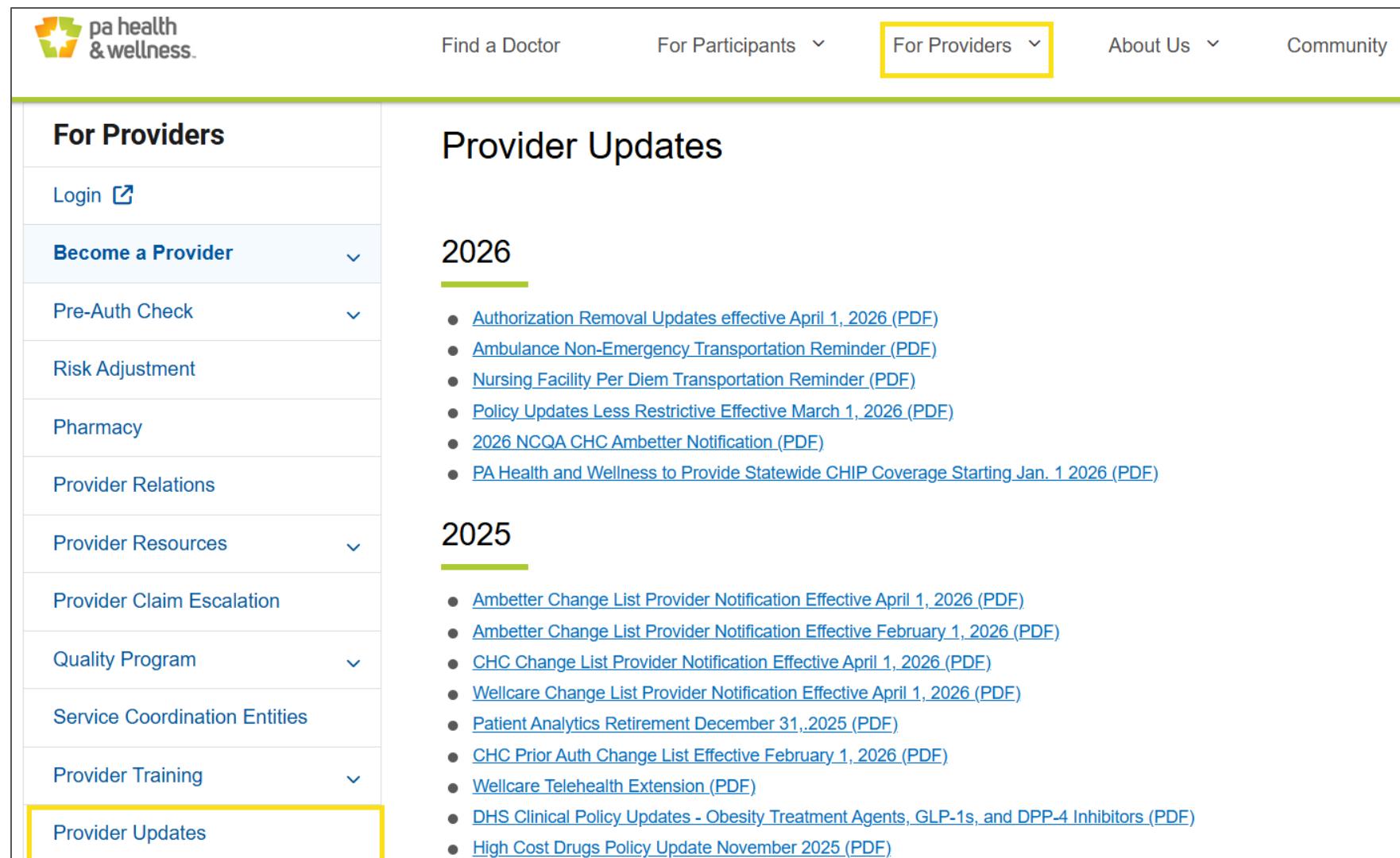
PA Health and Wellness equips each of our Medicaid and Medicare providers with the most up-to-date provider resources available in the State. Our Pennsylvania provider resources includes the tools and support you need to deliver the best quality of care. Below is our list of resources for Pennsylvania Medicaid and Medicare providers:

- [Manuals, Forms and Resources](#)
- [Clinical and Payment Policies](#)
- [Eligibility Verification](#)
- [Prior Authorization](#)
- [Electronic Transactions](#)
- [Behavioral Health Managed Care Organization Assignments \(PDF\)](#) 

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Please visit choosingwisely.org to download informational resources for your patients and clinicians to promote shared-decision making.

Provider Updates: www.pahealthwellness.com



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For Providers

[Login](#)

[Become a Provider](#)

[Pre-Auth Check](#)

[Risk Adjustment](#)

[Pharmacy](#)

[Provider Relations](#)

[Provider Resources](#)

[Provider Claim Escalation](#)

[Quality Program](#)

[Service Coordination Entities](#)

[Provider Training](#)

[Provider Updates](#)

Provider Updates

2026

- [Authorization Removal Updates effective April 1, 2026 \(PDF\)](#)
- [Ambulance Non-Emergency Transportation Reminder \(PDF\)](#)
- [Nursing Facility Per Diem Transportation Reminder \(PDF\)](#)
- [Policy Updates Less Restrictive Effective March 1, 2026 \(PDF\)](#)
- [2026 NCQA CHC Ambetter Notification \(PDF\)](#)
- [PA Health and Wellness to Provide Statewide CHIP Coverage Starting Jan. 1 2026 \(PDF\)](#)

2025

- [Ambetter Change List Provider Notification Effective April 1, 2026 \(PDF\)](#)
- [Ambetter Change List Provider Notification Effective February 1, 2026 \(PDF\)](#)
- [CHC Change List Provider Notification Effective April 1, 2026 \(PDF\)](#)
- [Wellcare Change List Provider Notification Effective April 1, 2026 \(PDF\)](#)
- [Patient Analytics Retirement December 31, 2025 \(PDF\)](#)
- [CHC Prior Auth Change List Effective February 1, 2026 \(PDF\)](#)
- [Wellcare Telehealth Extension \(PDF\)](#)
- [DHS Clinical Policy Updates - Obesity Treatment Agents, GLP-1s, and DPP-4 Inhibitors \(PDF\)](#)
- [High Cost Drugs Policy Update November 2025 \(PDF\)](#)

Community HealthChoices (CHC)

Community HealthChoices (CHC) is Pennsylvania's mandatory managed care program for dually eligible individuals and individuals with physical disabilities — serving more people in communities, giving them the opportunity to work, spend more time with their families, and experience an overall better quality of life.

CHC uses managed care organizations to coordinate physical health care and long-term services and supports (LTSS) for individuals 21 years of age and older who are dually eligible for Medicare and Medicaid (dual eligible), qualify for Medicaid long-term services and supports (LTSS) because they need the level of care provided by a nursing facility, or both.

Want More Information?

- www.healthchoices.pa.gov
- PA Independent Enrollment Broker (PA IEB): <https://paieb.com/>
- CHC Provider Hotline at 1-800-938-0939

Verifying Community HealthChoices Eligibility

Participant eligibility is subject to change. **Providers should verify Participant eligibility before every service is rendered, using one of the following methods:**

- PA Health & Wellness Secure Provider Portal
- PHW's Automated Participant eligibility (IVR) system or speaking to a PHW Provider Services Representative by calling our toll-free number 1-844-626-6813
- The State's PROMIS[™] system

Verifying Eligibility without PHW ID Card:

- While EVS provides eligibility, it is a separate best practice to verify the patient's identity with another form of ID to prevent fraud such as date of birth and social security number.

*PROMIS[®] and PHW eligibility verification resources will include information of the Participant's CHC-MCO along with any Third Party Liability (TPL) information.

Long-Term Services and Supports (LTSS)

When a PHW CHC Participant (PTP) is nursing facility clinically eligible (NFCE) and qualifies for LTSS, PHW meets with the Participant to assess their needs through a **comprehensive needs assessment**.

As part of the comprehensive needs assessment, the Participant will get a **Service Coordinator** who will work with the Participant to create a **person-centered service plan (PCSP)**, which will include all of the services the Participant needs, whether or not PHW covers the services.

LTSS include services in the community and in nursing homes or other institutions and help Participants live where they want to and also support where they want to work.

Comprehensive Needs Assessment

The comprehensive needs assessment includes a review of physical health, behavioral health, LTSS, caregiver, and other needs. The assessment will also include talking about preferences, goals, housing, and informal supports:

Situation	Timeframe for PHW Assessment
Nursing facility clinically eligible (NFCE) but not getting LTSS at time of enrollment	Within 5 business days from start date
PTP already has a PCSP and is getting LTSS.	Within 180 days from start date of CHC or within 5 days of a clinical eligibility redetermination
PTP requests assessment	Within 15 days of request
Last comprehensive needs assessment was 12 or more months ago	All PTP receiving LTSS must have a new comprehensive needs assessment at least every 12 months
PTP has trigger event	Within 14 days of the trigger event or sooner based on health status/needs

Role of the Service Coordinator (SC)

- The SC works with the Participant to create a PCSP and keep it up to date & get all the services and supports listed in the PCSP.
- SC will help Participants get both LTSS and other covered and non-covered medical, social, housing, educational, and other services and supports listed in the PCSP.

The Provider identified on the PCSP is responsible supervising, coordinating, and providing authorized services. The Provider will also work with Service Coordinator(s) to address necessary services and supports and participate in the PCSP to ensure continuity of the Participants' needs.

To contact a PHW Service Coordinator, please call 1-844-626-6813.

Person Centered Service Plan (PCSP)

The Person Centered Service Plan (PCSP) is a written plan for each Participant receiving LTSS. The PCSP addresses:

- How the Participant's physical, cognitive, and behavioral health needs will be managed
- How the Participant's LTSS needs will be coordinated

PHW will review and approve the PCSP and will notify the LTSS Providers selected that they are approved to provide the services and supports in the PCSP and the amount and type of service they should provide.

Providers cannot provide the LTSS services in a PCSP until they have the approval from PHW.

Electronic Visit Verification (EVV) Compliance

Effective January 1, 2025 –

PHW Minimum EVV Compliance Threshold 85%

- PHW requires Personal Care Service (PCS) and Home Health Care Service (HHCS) Providers to achieve a minimum of 85% EVV compliance rates on a quarterly basis.
 - PA Health and Wellness will collect data and monitor the EVV system for unconfirmed visits and missed services.
 - Providers performing \leq 85% for two consecutive quarters will result in a formal review of noncompliance requiring corrective action.
- Additional information on EVV can be found on our website:
<https://www.pahealthwellness.com/providers/resources/electronic-visit-verification--evv-.html>
- Additional information about the 21st Century CURES Act can be found on the Centers for Medicare & Medicaid Services website: <https://www.medicaid.gov/medicaid/home-community-based-services/guidance/electronic-visit-verification-evv>

Referrals

Appropriate Referral Process for Mental Health, Drug, Alcohol, and Substance Abuse Services for participants can be made by calling:

1-844-626-6813

Mandated Reporting

If you suspect elder abuse or the abuse of an adult with a disability call the Elder Abuse Helpline at:

1-800-490-8505

To report child abuse call:

1-800-932-0313

For more information visit:

<https://www.pa.gov/agencies/dhs/report-abuse/adult-protective-services>

Prior Authorizations & Utilization Review

Submit your Prior Authorization requests online through the Secure Provider Web Portal: Provider.PAHealthWellness.com

Other methods of submitting Prior Authorization requests:

- Call the Medical Management Department at 1-844-626-6813
- Fax prior authorization requests utilizing the Prior Authorization fax forms located here: <https://www.pahealthwellness.com/providers/resources/forms-resources.html>
- PA Health & Wellness clinical staff will request clinical information minimally necessary for clinical decision making.

For questions regarding an authorization, contact PHW by phone, email (authorizations_pa@pahealthwellness.com) or via secure message in HHAeXchange.

Medically Necessary

Medically Necessary (also referred to as Medical Necessity)— compensable under the MA program and meeting any one of the following standards:

That will, or is reasonably expected to, prevent the onset of an illness, injury, condition, or disability

That will or is reasonably expected to reduce or ameliorate the physical, mental or developmental effects of an illness, condition or disability

That will assist the recipient to achieve or maintain maximum functional capacity in performing daily activities, taking into account both the functional capacity of the recipient and those functional capacities are appropriate of recipients of the same age.

Will provide the opportunity for a Participant receiving LTSS to have access to the benefits of community living, to achieve person-centered goals, and live and work in the setting of his or her choice.

Administrative Processes

PHW's administrative processes include but are not limited to Coordination of Benefits, timely filing, authorizations, Identification and referral for mental health, drug, alcohol and substance use services, PHW's Lock-In Program, and Encounter Data reporting, and more.

PHW's 2026 "PA Health & Wellness Administrative & Other Processes" webinar will be held later in the year.

<https://www.pahealthwellness.com/providers/provider-training.html>

We also invite you to view a recording of our previous training below:

- Administrative & Other Processes – August 2025:

<https://register.gotowebinar.com/register/5293451850543898202>

Dual Eligibility: Coordination of Benefits

Providers will not have to obtain prior approval from PHW for Medicare covered services.*If PHW becomes the primary payer (non-covered service by primary, primary benefits exhausted, etc.), prior-authorization must be obtained timely from PHW.

Any other insurance, including Medicare, is always primary to Medicaid coverage. PHW, like all Medicaid programs, is always the payer of last resort.

Fraud, Waste and Abuse – Self Audit

- Providers should voluntarily disclose overpayments or improper payments of MA funds.
- The Provider Self Audit Protocol is available on the Department's website at <https://www.dhs.pa.gov/about/Fraud-And-Abuse/Pages/MA-Provider-Self-Audit-Protocol.aspx>
- Providers are expected to make their books, records, etc. timely accessible to the PA Office of Attorney General Medicaid Fraud Control Section, HHS OIG, Comptroller General.

Provider Responsibilities: Non-Discrimination

Network Providers are prohibited from intentionally segregating or discriminating against Participants in any way on the basis of race, color, creed, sex, religion, age, national origin, ancestry, marital status, sexual orientation, gender identity, language, MA status, income status, program participation, health status, disease or pre-existing condition, anticipated need for healthcare or physical or mental disability, except where medically indicated.

PA Health & Wellness will ensure that inclusiveness and fairness are a part of all of our activities. We will be proactive in our efforts to extend our services and programs to our Limited English Proficiency (LEP) Participants.

Provider Responsibilities: Accessibility Requirements

PA Health & Wellness follows the accessibility requirements set forth by applicable regulatory and accrediting agencies.

- PA Health & Wellness monitors compliance with these standards on an annual basis and will use the results of appointment standards monitoring to ensure adequate appointment availability and reduce unnecessary emergency room utilization.

Providers are required to comply with Americans with Disabilities Act (ADA) accessibility guidelines.

- Providers should also make efforts to provide appropriate accommodations such as large print materials and easily accessible doorways.

Provider Responsibilities: Cultural Competency

Cultural Competency within PA Health & Wellness is defined as the willingness and ability of a system to value the importance of culture in the delivery of services to all segments of the population. Cultural Competency is developmental, community focused, and family oriented.

The road to developing a culturally competent practice begins with the recognition and acceptance of the value of meeting the needs of our Participants.

PA Health & Wellness is committed to helping each Provider reach this goal to demonstrate **Cultural Competency, Linguistic Competency, and Disability Competency**. PHW offers sign language and telephonic interpreter services at no cost to the Provider or Participant, call 1-844-626-6813 for more information.

Cultural Competency

PHW's 2026 "Cultural Awareness & Sensitivity" training will be held in April 2026.

We also invite you to view a recording of our previous trainings:

<https://www.pahealthwellness.com/providers/provider-training.html>

Revisit Past Special Topic Trainings

- [Bucks County Direct Care ACT Program Presentation \(February 2025\)](#) ↗
- [Understanding the Basics of Dementia \(October 2025\)](#) ↗
- [Critical Incident \(CI\) Management & Enterprise Incident Management \(EIM\) System Training \(November 2025\)](#) ↗
- [PA Health and Wellness Administrative & Other Processes \(August 2025\)](#) ↗
- [Cultural Awareness & Sensitivity \(April 2025\)](#) ↗
- [Quality Management Processes and Issues and Provider Relations Issues \(October 2025\)](#) ↗

- "Cultural Awareness & Sensitivity" – April 2025 here:

<https://attendee.gotowebinar.com/register/526629139483812702>

Alzheimer's Disease & Related Dementias

What is Dementia?

- Dementia is not one single disease
- Dementia is not a normal part of aging
- “Dementia falls under the umbrella term for loss of brain functioning that impairs thinking, emotions, and behavior.” (Brawley, 2006, pg.18)
- Many are progressive and irreversible

Did You Know?

Dementia literally means "away from mind" and is used to describe a group of symptoms and behaviors (Care for You Inc., n.d.)

What causes Dementia?

- Damage to brain cells
- How the damage occurs differs from one type of dementia to the next

Alzheimer's Disease & Related Dementias

PHW's 2026 "Understanding the Basics of Dementia" webinar will be held later in the year.

<https://www.pahealthwellness.com/providers/provider-training.html>

We also invite you to view a recording of our previous "Understanding the Basics of Dementia" from October 2025:

<https://attendee.gotowebinar.com/register/5212501406460477272>

Complaints & Grievances

PA Health & Wellness recognizes that there are times when participants and providers may not be satisfied with a matter handled by PA Health & Wellness.

- Participants have the right to file a ***complaint or grievance** related to that matter, and Providers have a right to file a ***dispute or appeal**.

Who can file a Participant complaint or grievance?

- The Participant
- The Participant's designated authorized representative
- The Participant's Provider with written authorization from the participant to file the complaint on their behalf.

***This excludes claims reconsiderations or appeals.**

Complaints & Grievances

PHW Complaint and Grievance Unit

- Phone: **1-844-626-6813**
- Fax: 1-844-873-7451
- Email: **PHWComplaintsandGrievances@PaHealthWellness.com**
- Mailing address:

Attn: Complaints and Grievances Unit

1700 Bent Creek Blvd

Suite 200

Mechanicsburg, PA 17050

For more details and forms related to the complaint, grievance, dispute or appeal process – please visit our website at www.pahealthwellness.com.

What are Critical Incidents?

Critical Incidents are events that compromise the Participant's health or welfare. The following are Critical Incidents:

- **Death** (other than by natural causes)
- **Serious injury** that results in emergency room visits, hospitalizations, or death
- **Hospitalization** except in certain cases, such as hospital stays that were planned in advance
- **Provider or staff misconduct**, including deliberate, willful, unlawful, or dishonest activities
- **Abuse, Neglect, Seclusion, Exploitation, Restraint,**
- **Service interruption**
- **Medication errors**

To assist with Critical Incident entry into the State's Enterprise Incident Management (EIM) system, PA Health & Wellness provides a Critical Incident Helpline:

1-866-535-2545

For more information regarding Critical Incidents, reporting or the State's EIM System, please contact our Complaints & Grievance department by email at:

PHWComplaintsandGrievances@PaHealthWellness.com

Quality Improvement Program (QIP)

Scope: To addresses the quality of clinical care and the quality of services provided to PHW Participants.

Provider's Role: Providers and practitioners are required to cooperate with Quality Improvement (QI) activities and allow PHW to use their performance data.

Focus on Individuals	Whole Health	Active Local Involvement
Priorities	Priorities	Priorities
<ul style="list-style-type: none">• Well-Coordinated, Timely, Accessible Care Delivery• Participant Healthy Decisions• Home and Community Connection• Right Care, Right Place, Right Time• Participant Engagement• Provider Engagement• Participant Satisfaction with Provider and Health Plan	<ul style="list-style-type: none">• Meaningful Use of Data• Prevent and Manage Top Chronic Illnesses• Screen for Unmet Needs• Remove Barriers to Care; Make It Simple to Get Well/Stay Well/Be Well• Coordination of Care Across the Health Care Continuum• LTSS Quality of Life	<ul style="list-style-type: none">• Local Partnerships• Population Health Improvement• Preventive Health and Wellness• Opioid Misuse Prevention and Treatment• Address Social Determinants of Health• Health Equity/Disparity Reduction• Multi-Cultural Health

Quality Improvement Program (QIP) & Performance Improvement Projects (PIPs)

1. PA Health & Wellness reviews and adopts an annual QI Program and Work Plan aligned with PA Health & Wellness' vision and goals.
2. The QI Department implements quality/risk/utilization management approaches to problem identification with the objective of identifying improvement opportunities.
3. PIPs, focused studies, and other QI initiatives are designed and implemented. Current PIPs include Strengthening Care Coordination and Nursing Home Transitions.
4. The Healthcare Effectiveness Data and Information Set (HEDIS)[®] is the primary set of measures used in QI activities.

Provider & Quality Issues

PHW hosts two webinars, late spring and fall, annually to present and discuss issues identified through Provider Relations, Provider Services, or through our Quality Management Process.

We invite you to view a recording of our 2025 training at any time:

“Quality Management Processes and Issues & Provider Relations Issues” – October 2025: <https://attendee.gotowebinar.com/register/9041545152632313945>

*To suggest topics to add to this upcoming webinar please email us at
providertraining@pahealthwellness.com.*

Emergency Disaster Planning

An office disaster management plan is a formal strategy outlining steps for preventing, responding to, and recovering from emergencies, covering risk assessment, clear communication protocols (like emergency contacts and mass notifications), defined roles for a response team, detailed evacuation procedures (routes, assembly points, essential personnel), IT recovery for data/systems, and post-disaster business continuity to restore operations, all documented, approved, and regularly tested.

Where to Find Info

- **Ready.PA.gov:** The official PA emergency preparedness hub for guides, tips, and resources.
- **PA DHS/Aging:** Offers specific guidance for older adults and those with medical needs, emphasizing support networks and shelter info.
- **PEMA:** Pennsylvania Emergency Management Agency manages the state's overall emergency plans (like the Commonwealth Emergency Operations Plan) and works with partners.
- **FEMA:** The federal agency provides tools like the FEMA app for alerts.

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Name of Individual Completing Attestation *

Group or Practitioner Name *

Street Address *

Phone Number * Email Address *

Tax ID Number(s) - Please include all Tax ID Numbers that you are representing when completing this form: *

Submit

Plan Contact Information

Provider Relations: PHWProviderRelations@PAHealthWellness.com

Provider Data Updates: PHWProviderData@PAHealthWellness.com

Provider Training: ProviderTraining@PAHealthWellness.com

Authorizations: Authorizations_PA@PaHealthWellness.com

Complaints & Grievances: PHWComplaintsandGrievances@PaHealthWellness.com

Contracting: PHWContracting@PAHealthWellness.com

Critical Incident Reporting: CIreports@PaHealthWellness.com

Provider Services: 844-626-6813

Thank you for completing your annual training requirement!