

What's Inside

Page Article

- | | |
|---|---|
| 2 | Clinical Practice Guidelines |
| 2 | MHCP Member Billing Requirements and Balance Billing |
| 3 | Oral Health Meeting Flyer |
| 4 | New Codes & Prior Authorization Requirement |
| 4 | Updated Provider Manual Chapters |
| 4 | Electronic Visit Verification Compliance and Enforcement |
| 5 | Minnesota Critical Access Hospitals Rate Sheets Requirement |
| 5 | Clinic Complaint Reporting Process |
| 6 | Accurate Provider Information Needed |

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.



New Location Closure Form Now Available

South Country Health Alliance (South Country) has developed a new [Location Closure Form](#) to simplify the process for providers notifying us of practice site closures.

Providers are required to complete this form prior to closing any location that has provided services to South Country members. Submitting the form in advance helps ensure that medical records remain securely maintained, accessible for audits, and compliant with CMS and DHS requirements.

The Location Closure Form is available on our website under:

For Contracted Providers:

Providers → [Forms](#) → Contracted Providers → [Location Closure Form](#)

For Non-Contracted Providers:

Providers → [Forms](#) → Non-Contracted Providers → [Location Closure Form](#)

Thank You for Your HEDIS Efforts

The HealthCare Effectiveness Data and Information Set (HEDIS) medical record data abstraction process has been completed for 2026 (HEDIS Measurement Year 2025). South Country thanks you for your assistance in completing this process in a timely and efficient manner. We continually utilize HEDIS outcomes and rates to support South Country's current improvement projects and company-wide initiatives.

We welcome your feedback. If you have questions, comments, or concerns, please notify Melissa (Milly) Stanton, quality program coordinator at 507-431-3012, mstanton@mnscha.org. Also, please reach out to us if you are making changes to chart request locations, medical record contacts, or significant changes to electronic medical record systems.

In the coming months, South Country may reach out to your clinic or nursing home medical records teams as we begin preparing for 2027.

Thank you for your partnership!

Sincerely,

South Country Health Alliance HEDIS Team

Clinical Practice Guidelines

South Country provides access to clinical practice guidelines for clinicians that are adopted from multiple nationally recognized sources. Examples include the United States Preventive Services Task Force, the American Academy of Pediatrics, the American Diabetes Association, the American College of Cardiology, the American Heart Association and the Global Initiative for Asthma. South Country updates its clinical practice guidelines yearly or more often as needed. The links to these guidelines are formatted for easy access and can readily be found on the [South Country website](#).

There you will find links to resources on such topics as

- Preventive services for various age groups;
- Pediatric preventive services periodicity schedule;
- Health supervision for children and adolescents with Down syndrome;
- Standards of care in diabetes;
- Pharmacologic approaches to glycemic treatment;
- Asthma management and prevention;
- Hypertension diagnosis and treatment;
- APA clinical practice guideline for the treatment of depression across three age cohorts;
- Clinical practice guideline for the diagnosis, evaluation, and treatment of attention deficit/hyperactivity disorder in children and adolescents;
- Screening, Brief Intervention, and Referral to Treatment (SBIRT) for unhealthy alcohol and drug use; and
- Chiropractic guidelines.

To view all of the Provider Manual chapters, go to [Provider Manual – South Country Health Alliance](#).

South Country/MHCP Member Billing Requirements and Balance Billing

South Country Health Alliance (South Country) has recently seen an increase in questions related to billing members. South Country members are Minnesota Health Care Programs (MHCP) members; therefore, providers must follow MHCP member billing requirements and South Country Provider Manual guidance. The following reminders are being shared to support consistent billing practices and compliance.

Billing South Country / MHCP Members

South Country / MHCP members must not be billed for covered services. Providers may only request and collect member payments in limited cost-sharing situations, such as applicable copayments. This applies even when a claim denies due to timely filing, billing errors, or nonpayment from the health plan. Providers may not request or accept payment from South Country / MHCP members for covered services.

Balance Billing

Balance billing South Country / MHCP members is not allowed. Providers must accept South Country / MHCP payment, plus any applicable copay, as payment in full and may not bill members for any remaining balance. This applies regardless of claim outcome or payment status.

Non-Covered Services

A member may only be billed for a non-covered service when a signed [Advance Recipient Notice \(ARN\)](#), or equivalent documentation, is obtained before the service is provided and the member has been informed of possible financial responsibility. If this documentation is not obtained, the member cannot be billed, and the provider is responsible for the cost.

Please refer to the South Country Provider Manual: [Chapter 4 Provider Billing](#) and the MHCP Provider Manual section, [Billing the Member \(Recipient\)](#), for additional guidance.

Oral Health Meeting Flyer



OWATONNA AREA ORAL HEALTH MEETING

*August 14, 2026
9:00 a.m. — 12:30 p.m.*

Torey's Restaurant & Bar
208 N Cedar Ave
Owatonna, MN 55060
or virtually on Zoom

Featuring these counties:



Oral health data, medical-dental integration, local as well as statewide resources, and programs regionally and in Minnesota.

Register



Hybrid event hosted by the Minnesota Oral Health Coalition and Let's Smile, Inc.

New Codes & Prior Authorization Requirement

South Country is reminding providers of new codes/services that became active April 1, 2026. The new codes/services have been added to South Country's Prior Authorization list and will require prior authorization (PA) for dates of service on and after July 1, 2026. Please visit [South Country Health Alliance - Authorization](#) for a list of services/codes requiring PA.

What providers need to do:

- For dates of service on/after 7/1/2026, submit a PA request before providing the service(s).
- Confirm member eligibility and benefit coverage at the time of scheduling/service.
- Include supporting clinical documentation (diagnosis, prior treatment history, ordering/servicing provider information, requested units/dates, and any other information needed to assess medical necessity).
- Submit requests through the [South Country Provider Portal](#) or by fax at 1-888-633-4052.

If you have questions about these authorization requirements or need assistance submitting a request, please contact South Country Utilization Management at 1-888-633-4051. For general provider support, please contact the Provider Contact Center (PCC) at 1-888-633-4055.

Thank you for your partnership in providing care to South Country members.

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.



Electronic Visit Verification Compliance and Enforcement

The Minnesota Department of Human Services (DHS) began enforcing electronic visit verification (EVV) compliance thresholds on Jan. 1, 2026.

Beginning July 1, 2026, Minnesota providers must maintain 80% EVV compliance.

Each month, providers receive a compliance report from HHAeXchange that reflects the previous month's performance. DHS also uses this data to monitor compliance. Providers are expected to review the report and make corrections before corrective actions are required. Providers who do not meet compliance thresholds will receive corrective action notices in their PRVLTR folder in their [MN-ITS mailbox](#).

How to Maintain Strong EVV Compliance:

- Monitor compliance across all NPIs and UMPIs associated with your agency;
- Review EVV reports regularly to identify exceptions you can find these in your Provider Portal;
- Correct visit issues before they impact compliance; and
- Support your caregivers with EVV training.

Minnesota Critical Access Hospitals Rate Sheets Requirement

Critical access hospitals (CAHs) are paid at a rate that is designated by Centers for Medicare & Medicaid Services (CMS) and based on each hospital separately. Payment for outpatient, emergency, and ambulatory surgery hospital services provided by a CAH as designated under [MN Stat. sec. 144.1483](#) are made on a reasonable cost basis under the cost finding and allowable costs determined under the Medicare program according to [MN Stat. 256B.75\(b\)](#). Every fiscal year the rates change for the providers, but these rates can also change quarterly or monthly as well.

It is the provider's responsibility to submit the Revised Payment and Retroactive Lump Sum Adjustment page(s) along with the CAH Interim Rate Review page(s) in order to ensure accurate rate programming.

Providers should email or fax all CAH rate updates and changes to South Country on an annual basis or within thirty (30) days of the date received (whichever is earlier) at the following:

Email: <mailto:schaclaims@primewest.org> Fax: 1-320-762-5956

Clinic Complaint Reporting Process

What does your data show for South Country member Quality of Care (QOC) complaints?

With the mid-year behind us and the next quarterly reporting period fast approaching in October, it is an opportune time to review your South Country member QOC complaint (grievance) data and your provider responsibilities related to this.

As a reminder, South Country contracted providers are required to report South Country member QOC complaints data that originates at the provider level to South Country on a quarterly basis (Minnesota Rule 4685.1110 Subpart 9(C)).

Information on this process is outlined in [South Country's Provider Manual](#), Chapter 9 Clinic Complaint Reporting Process.



You may want to consider using this **SAMPLE CHECKLIST** for the upcoming Q3 reporting period.

If you have not submitted any reports to South Country for Q1 and/or Q2 (indicating you have zero complaints for the quarter), have you performed an internal quality review of your data and records to ensure you have not overlooked or missed any South Country member complaints (grievances) that need to be investigated and reported to South Country?

STAFF TRAINING:

Staff who use and need this information have received training on, and are knowledgeable about, South Country's Chapter 9 Clinic Complaint Reporting Process, the applicable State laws and any of your related internal policies, procedures and processes.

STAFF COMPLIANCE:

Staff appropriately follow these policies, procedures and processes.

Complaints received from South Country members are reported to South Country no later than 30 days after the end of each quarter.

REPORTING:

If using South Country's online Form #4458, all fields are complete and accurate.

If using your own facility form to report to South Country, the form includes all the necessary information.

Direct care staff who receive patient complaints are escalating these issues through the appropriate channels (e.g. random or focused quality reviews of patient medical records shows no evidence of patient complaints that have gone unreported, etc.).

DATA VALIDATION:

All quarterly reported data is accurate.

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).

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

Visit us online at 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, by calling anonymously through our Report it hotline at 1-877-778-5463, or by visiting 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.](#)

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/.

Forward these changes to us via email at 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!