

PCA Renewals and Operational Updates in the Portal



Angela Mack
Licensing, Certification, CLIA Section Manager
March 11, 2026

Welcome & Housekeeping

- This forum is being recorded and will be available on the DHS PCA webpage
- Please submit any questions in the 'Q&A' box
- All Participants are 'Muted'

Objectives

- Process to Submit Annual Renewal/Report and Fee Payment
- Process to Submit Branch Office Annual Renewals
- Operational Updates (Name, Address, Counties)
- Closures
- Communications to DQA

DHS DQA Provider Portal (‘Portal’)?

- Online licensure and certification system for healthcare providers which includes PCA’s
- PCA certification functions that are regulated by DQA will be processed through the Portal
- Medicaid contracts are a separate process administered by Wisconsin Medicaid

Portal Functionality

- PCA Annual Reports (known as Renewals in the Portal)
- Certification amendments (e.g. Administrator change, Address, Operational updates)
- Branch Office renewals and amendments
- Application Submission

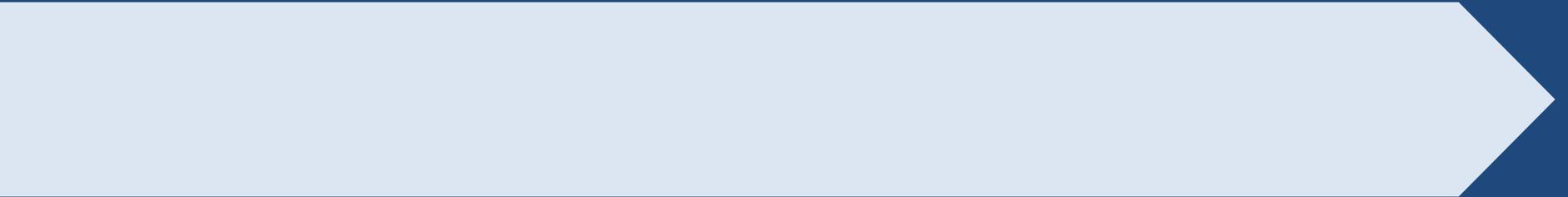
NOTE: The Portal was effective December 15th, 2025

Previous Training Forum

- Previous PCA training forum on February 9, 2026 covered how existing PCA's could associate to their existing account in the Portal and Features of the Portal
- You can access this recorded training and the PowerPoint slides at the DHS PCA Provider webpage:

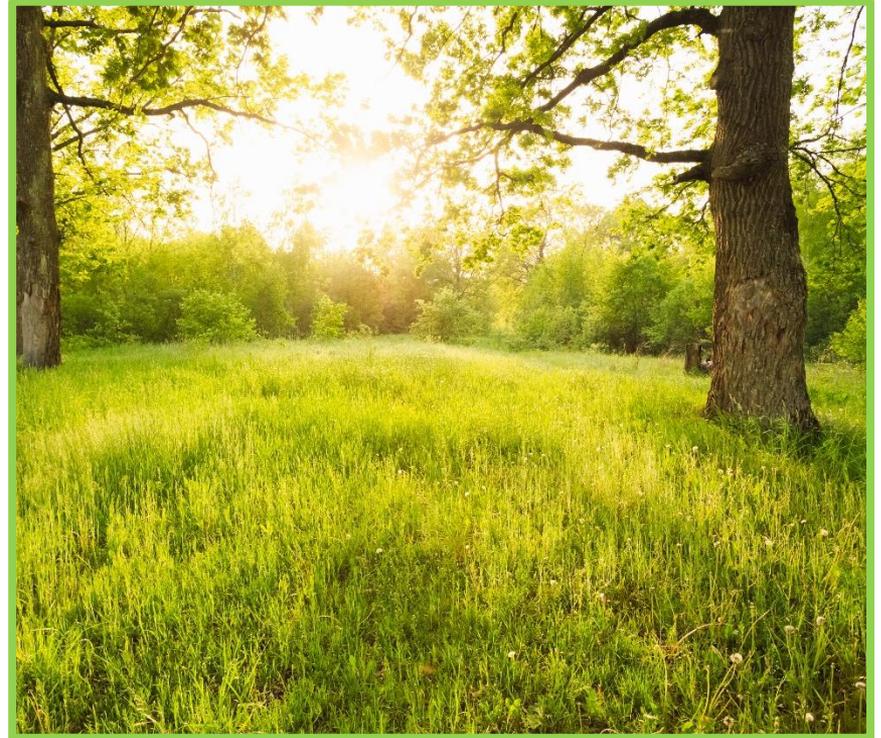
<https://www.dhs.wisconsin.gov/regulations/pca/pca-forum.htm>

How to Complete the Annual Renewal and Submit Payment



Renewals

- Annual Reports are called 'Renewals' in the Portal.
- Renewals and renewal fees are an annual regulatory requirement for PCAs.
- All Renewals are electronic through the Portal. (No more paper reports).
- Renewals are set to be available on March 1st and Due April 30th, 2026.



Renewals (cont)

- If you do not submit your Renewal and fees through the Portal by April 30th, 2026, the Portal will automatically terminate/close your provider and notification will be sent to Medicaid to terminate your Medicaid contract.
- This will affect your ability to receive reimbursement if you do not renew.

Renewal Demonstration

- From the 'Provider Overview' page select 'Manage Provider'
- Select 'Open' by your agency in the grid



Angela Renewal
ID#: 000043097
bierens+123@glolutions.com
(559) 445-3636

- Overview
- Personal Information
- Manage Provider**
- Review Projects
- Manage Firm
- Background Checks
- Communication Center
- Ask a Question

My Account ▾

The Manage Provider Page allows you to manage and create providers.

Existing Providers: Select the 'Search Provider' button and complete the required information on the next screen. This functionality allows you to associate yourself to an existing provider.

New Providers and Change of Ownership (CHOW): Select the 'New Provider' button and complete the required information on the next screen.

Create Application: Once you have created a new Provider, click 'open' in the grid below on that provider. From there, move to the 'Provider Applications' page (found on the left side of the screen).

Background Checks, Renewals, Manage Key Personnel, Manage Branch Offices, Plan Review Projects, Print Certificates/Licenses and access to the Communication Center: These functions for providers can be found when opening the provider in the grid (see Create Application).

	Provider Name	Provider Number	Provider Status	Due Date	Expiration Date
Open	Personal Care Services	106	Open		

Select 'Provider Renewals' or 'Branch Renewals' in the left-hand side navigation menu

My Account ▾



Personal Care Services
Provider #: 186
Status: Open

Provider Overview

- Provider Information
- Communication Center
- Provider Applications
- Provider Renewals
- Print Certificates/Licenses
- Manage Authorized Representatives
- Manage Branch Office
- Branch Renewals
- Provider Pay Invoices
- Projects
- Inspection Corrections
- Manage Employee
- Manage Key Personnel
- Entity Background Check
- Certification Amendments

Welcome to the Wisconsin Department of Health Services Division of Quality Assurance Provider Portal

From here you can apply for a license/certificate, renew, update your Provider information, and more. Select from your menu choices in the navigation pane on the left side of the page.

License Number

186

Contact Information

Physical Address

6114 W CAPITOL DR SUITE 203
MILWAUKEE, WI 53216

Mailing Address

Classification

Current Capacity

Current Client Group Served

License Business Name and FEIN

FAMILY CARE SERVICES, 461089183

Licensee Individual Owner Name

Angela , Renewal

Ownership and Tax Type

Individual Ownership and Tax Type

Licensee Representative Name

Licensee Physical Address

Licensee Mailing Address

Licensee Email and Phone

- Select 'Open' in the grid by the Pending Renewal
- If you select 'Do Not Renew' that will terminate/close your provider and notification will be sent to Medicaid to terminate your Medicaid contract. This means your agency is no longer in operation.



Personal Care Services
Provider #: 186
Status: Open

- Provider Overview
- Provider Information
- Communication Center
- Provider Applications
- Provider Renewals**
- Print Certificates/Licenses
- Manage Authorized Representatives
- Manage Branch Office
- Branch Renewals
- Provider Pay Invoices
- Projects
- Inspection Corrections
- Manage Employee
- Manage Key Personnel
- Entity Background Check
- Certification Amendments

Provider Renewals

Within this page you will find all of the licenses and or certifications that are up for renewal for the Provider. Select the 'Open' button next to the license/ certification you would like to renew.

If the Provider is closed select the 'Do Not Renew' button on the license/certification that you do not wish to renew. A pop-up screen will occur and here you will input the reason why the provider/ license is to close and the date.

Once you have completed the renewal if you wish to print a confirmation report for the renewal you finished select the 'Link' button on the license/certification renewal you completed.

[Export to Excel](#)

	Status	License Type	License Number	Confirmation Report
Open	Pending Renewal	Personal Care Agency Certificate	186	Do Not Renew
Open	Pending Renewal	Branch Office Certificate	186	Do Not Renew

1 of 1 [10](#) items per page 1 - 2 of 2 items

PCA Annual Renewal

- There are a series of questions that must be answered.
- After all questions are answered you must submit the required fee.
- Failure to submit the fee and/or answer the questions will result in termination/closure of the provider and notification to Medicaid to terminate your Medicaid account.

[Return to Dashboard](#)

[My Account](#) ▾



Personal Care Services
Personal Care Agency Certificate
License Number: 186
Status: Pending Renewal

Requirements

[Manage Authorized Representatives](#)
[Background Check](#)
[Pay Fees](#)

Incomplete Requirements

INTRODUCTION

During this renewal there may be times when you need to navigate away from this page. Please read all instructions carefully on how to navigate to the appropriate pages. If you need to make the following Amendments to the Certificate, select the Certificate Amendment page located on the left of the screen. Once you are on the Certificate Amendment Page select New amendment request at the top right hand corner of the screen. You will then complete the requirements for the Amendments from that page. The Amendments that are applicable to the Certificate are Provider Name Change, Physical Address Change, and Operational Change.

PROVIDER DETAILS

PCA RENEWAL QUESTIONS

AGENCY SERVICES

CLIENTS RECEIVING CARE

REVENUE INFORMATION

Under Review

Completed Requirements

Branch Office Renewals

- Select 'Branch Renewals' in the left-hand side navigation menu
- Select 'Edit' in the grid by the Pending Renewal
- Follow the instructions on the screen to attest if no Branch updates are needed or the detailed instructions if updates are needed

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Personal Care Services
Provider #: 000
Status: Open

My Account

Branch Renewals

Within this page you will find all of the licensed Branch Office's that are up for renewal for the Provider.

▼ Branch Renewals with no Branch Updates Needed:

1. Select 'Edit'.
2. Check 'Renewal Attestation' box.
3. Select 'Update'.

▼ Branch Renewals with Branch Updates Needed:

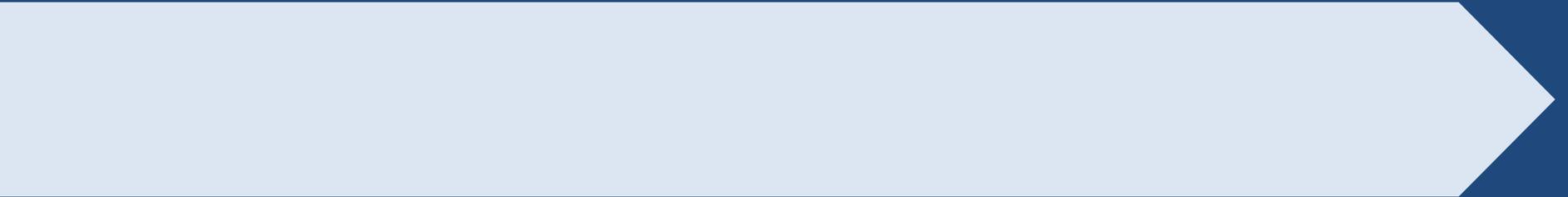
1. Navigate to the 'Manage Branch Office' in the left-side navigation menu.
2. Follow instructions to submit updates or to close a branch office.
3. Navigate back to 'Branch Renewals' once updates or closure have been submitted.
4. Complete attestation:
 - a. Select 'Edit'.
 - b. Check 'Renewal Attestation' box.
 - c. Select 'Update'.

Personal Care Agency (PCA) Note: The Branch Office Renewal Attestation must be completed on an annual basis along with the PCA renewal.

Export to PDF

	Branch Name	Branch ID	Tier	Status	Renewal Attestation
Edit	ADAM'S FRIENDSHIP HIGH SCHOOL	8570752	PCA	Pending Renewal	<input type="checkbox"/>

Operational Updates: Address, Name, Hours, Counties



Operational Updates

On your individual account page select 'Manage Provider'



- Overview
- Personal Information
- Manage Provider
- Review Projects
- Manage Firm
- Background Checks
- Communication Center
- Ask a Question

My Account ▾

Wisconsin Department of Health Services Division of Quality Assurance Provider Portal

Before you are able to select navigation items besides the Personal Information page, you are required to input your personal information. Please navigate to the Personal Information page and enter any required information. Once you have done so you can navigate to other pages.

If you are applying for a new Provider Application choose the Manage Provider option from the menu. Follow the instructions on that page to create a Provider or search for one.

If you are completing a background check select the Background Checks option from the menu.

If you have Projects that are ongoing, and you need to check the status select the Review Projects option from the menu.

If you need to add a Firm or create a Firm select the Manage Firm option from the menu.

Contact Information

bierens+123@glsolutions.com
(559) 445-3636
(559) 445-3636

Mailing Address

207-S10491 Jennifer Dr
Muskego, WI 53150

Physical Address

207-S10491 Jennifer Dr
Muskego, WI 53150

FAQ's/Instructional Videos

Navigating Your Dashboards

- [Firm Dashboard](#)
- [Communication Center](#)
- [How to submit background checks](#)

Next to your PCA in the grid select 'Open'



WISCONSIN DEPARTMENT
of HEALTH SERVICES



Angela Renewal
ID#: 0000043097
bierens+123@glsolutions.com
(559) 445-3636

Overview

Personal Information

Manage Provider

Review Projects

Manage Firm

Background Checks

Communication Center

Ask a Question

My Account ▾

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Background Checks, Renewals, Manage Key Personnel, Manage Branch Offices, Plan Review Projects, Print Certificates/Licenses and access to the Communication Center: These functions for providers can be found when opening the provider in the grid (see Create Application).

	Provider Name	Provider Number	Provider Status	Due Date	Expiration Date
Open	Personal Care Services	186	Open		

1 of 1 items per page 20 Items per page 1 - 1 of 1 items

Protecting and promoting the health and safety of the people of Wisconsin

Connect with DHS



On the left-hand side navigation menu, select 'Certification Amendments'



My Account ▾

 **Personal Care Services**
Provider #: 186
Status: Open

- Provider Overview**
- Provider Information
- Communication Center 1
- Provider Applications
- Provider Renewals
- Print Certificates/Licenses
- Manage Authorized Representatives
- Manage Branch Office
- Branch Renewals
- Provider Pay Invoices
- Projects
- Inspection Actions
- Manage Entities
- Manage Entities
- Entity Background Check
- Certification Amendments**

Welcome to the Wisconsin Department of Health Services Division of Quality Assurance Provider Portal

From here you can apply for a license/certificate, renew, update your Provider information, and more. Select from your menu choices in the navigation pane on the left side of the page.

License Number

186

Contact Information

Physical Address

6114 W CAPITOL DR SUITE 203
MILWAUKEE, WI 53216

Mailing Address

Classification

Current Capacity

Current Client Group Served

FAQ's/Instructional Videos

Application Processes

- [Adult Day Care Center Application Instructional Video](#)
- [Branch Office Application Instructional Video](#)
- [Certification Amendment Application Instructional Video](#)

Licensee Business Name and FEIN

FAMILY CARE SERVICES, 461089183

Licensee Individual Owner Name

Angela , Renewal

Ownership and Tax Type

Individual Ownership and Tax Type

Licensee Representative Name

Licensee Physical Address

Licensee Mailing Address

Licensee Email and Phone

Active Licenses

Type

Personal Care Agency Certificate

Classification

Due Date

Select 'New Amendment Request' above the grid



- Provider Overview
- Provider Information
- Communication Center
- Provider Applications
- Provider Renewals
- Print Certificates/Licenses
- Manage Authorized Representatives
- Manage Branch Office
- Branch Renewals
- Provider Pay Invoices
- Projects
- Inspection Corrections
- Manage Employee
- Manage Key Personnel
- Entity Background Check
- Certification Amendments**

My Account ▾

Certification Amendments

To begin the Certification Amendment process, please select the **New Amendment Request** button in the top right corner. On the resulting screen, select the certification you wish to amend, as well as the types of amendments you are applying for. Then, click **Save**.

Once the amendment request has been created, select the **Continue** link on the amendment request to begin the certification amendment process. After completing the Amendment Application, select the **Print** button to print the Confirmation Report. The Confirmation Report displays the information you entered during the Amendment Application.

Please note: Personal Care Agencies are not permitted to request a capacity change.

Export to Excel **New Amendment Request**

	Status	Application Type	Amendment Type	Application Number	Start Date	Print Confirmation
Continue	Incomplete	Personal Care Agency Application	Address Change Application	00296	2/12/2026	Print
Continue	Incomplete	Personal Care Agency Application	Operational Update Application	00298	2/19/2026	Print



Complete the information for the type of amendment needed in the pop-up box. Then select 'Save'.

NOTE: PCA's can only select Name, Address, Counties, Operational (Hours) updates.

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Personal Care Services
Provider #: 186
Status: Open

Certification Amendments

Please select the Certification type being amended.

Certification Type:

PCA Notes:
Capacity Change and *Participant Groups* don't apply to PCAs.

ADCC Notes:
If you are undergoing a remodel, select *Capacity Change*.
If you are relocating, select *Address Change*.
Update Counties does not apply to ADCCs.

Mark all applicable amendment types:

Provider Name Change Address Change

Capacity Change (ADCC Only) Operational Hours Update

Participant Groups Change (ADCC Only) Counties Update (PCA Only)

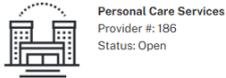
Save **Cancel**

Application Number	Start Date	Print Confirmation
00296	2/12/2026	Print
00298	2/19/2026	Print
00302	2/22/2026	Print
00303	2/22/2026	Print
00304	2/23/2026	Print
00305	2/23/2026	Print

After you request your amendment type(s) the system will navigate back to the Certification Amendments page and you will see your amendment application in the grid. Select the 'Continue' button by your amendment application.



My Account ▾



Personal Care Services
Provider #: 186
Status: Open

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[Export to Excel](#) [New Amendment Request](#)

	Status	Application Type	Amendment Type	Application Number	Start Date	Print Confirmation
Continue	Incomplete	Personal Care Agency Application	Address Change Application	00296	2/12/2026	Print
Continue	Incomplete	Personal Care Agency Application	Operational Update Application	00298	2/19/2026	Print

Select 'Continue' to process your change application. Or if you need to cancel the request, you may select 'Withdraw'.



[Return to Dashboard](#)

[My Account](#) ▾



App #: 00296
Status: Incomplete

Certification Amendment Types

Certification Amendment Pay Invoices

Results

🔍 Search...

	Status	Amendment Type	
Continue	Pending	Certification Address Change Application	Withdraw

Complete the requested amendment under the Incomplete Requirements section and then 'Save'.



[Return to Certification Amendments](#)



Personal Care Services
Certification Address
Change Application
App #: 00302-00157
Status: Pending

Requirements

[My Account](#) ▾

Incomplete Requirements

PROVIDER ADDRESS CHANGE

Please enter the change in Provider's address below

Current Physical Address:

Street 1
6114 W CAPITOL DR SUITE 203

City
MILWAUKEE

Zip
53216

Street 2

State
WI

County
Milwaukee

New Physical Address:

Street 1

City

Zip

Street 2

State

County

[Save](#)

Under Review

Review and complete the attestation.

The screenshot displays the Wisconsin Department of Health Services portal. At the top left is the department's logo and name. A navigation bar includes a 'Return to Certification Amendments' button and a 'My Account' dropdown menu. On the left, a sidebar lists 'Personal Care Services' with details: 'Certification Address', 'Change Application', 'App #: 00302-00157', and 'Status: Pending'. Below this is a 'Requirements' section. The main content area is titled 'Incomplete Requirements' and features a dropdown menu for 'ATTESTATION'. The instruction 'Please confirm the Attestation.' is followed by two paragraphs of text under the heading 'Attestation'. The first paragraph states that the signatory is authorized and accepts responsibility for compliance. The second paragraph is a formal attestation statement with a link to 'Wis. Stat. § 946.32'. A 'Confirmation' checkbox is present but unchecked. A 'Save' button is located below the text. At the bottom, there are sections for 'Under Review' (with a dropdown for 'PROVIDER ADDRESS CHANGE') and 'Completed Requirements'. A footer at the very bottom contains the text 'Protecting and promoting the health and safety of the people of Wisconsin' and 'Connect with DHS'.

WISCONSIN DEPARTMENT
of HEALTH SERVICES

Return to Certification Amendments

My Account

Personal Care Services
Certification Address
Change Application
App #: 00302-00157
Status: Pending

Requirements

Incomplete Requirements

ATTESTATION

Please confirm the Attestation.

Attestation

The signatory of this document is duly authorized by the applicant / owner to sign this agreement on their behalf. The applicant / owner hereby accepts responsibility for knowing and ensuring compliance with all licensing and operational requirements for this facility.

Attestation

I attest, under penalty of law, that the information provided above is truthful and accurate to the best of my knowledge. I understand that knowingly providing false information or omitting information may result in denial of licensure, a fine of up to \$10,000 or imprisonment not to exceed 6 years, or both [Wis. Stat. § 946.32](#)

Confirmation

Save

Under Review

PROVIDER ADDRESS CHANGE

Completed Requirements

Protecting and promoting the health and safety of the people of Wisconsin

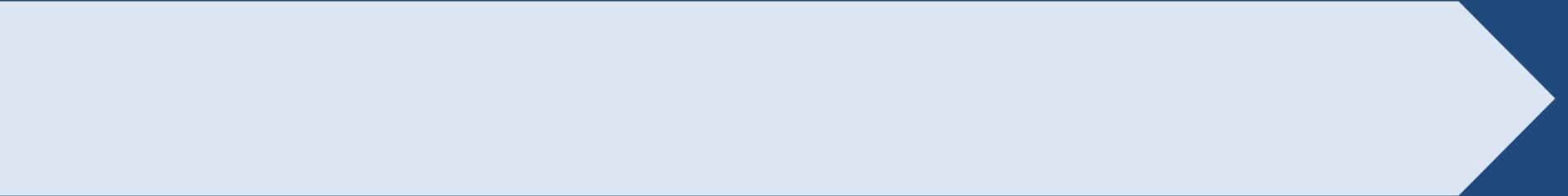
Connect with DHS

DQA Review

The amendment request is now under review by Licensing Staff



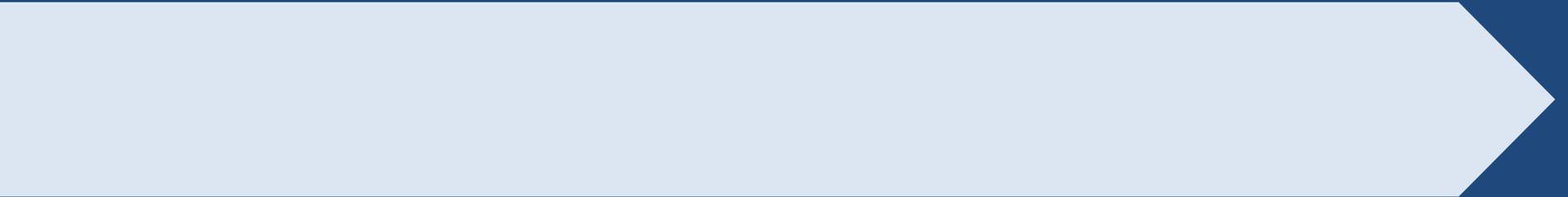
Future Forums



Future PCA Forum Topics

- Manage Key Personnel (Administrator, Substitute Administrator, etc.): **Wednesday April 8th??—Stay tuned for further details**
- New PCA Application Process: To be determined

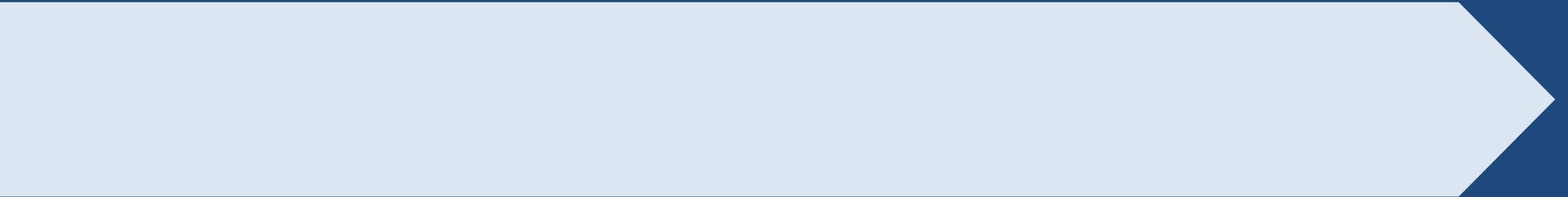
How to Stay Informed



Staying Informed

- Ensure Authorized Representative information is current in the Portal. These individuals receive Portal communications.
- Sign up for DQA Provider Communications:
<https://public.govdelivery.com/accounts/WIDHS/subscriber/new>
- Ensure DQA email communications are not in Spam or Junk folders
- Bookmark DHS PCA Application/Certification Webpage:
<https://www.dhs.wisconsin.gov/regulations/pca/pca-application.htm>

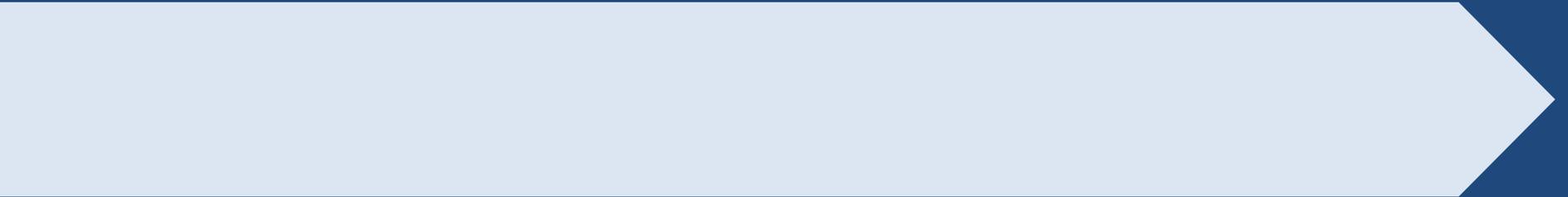
Communications



Communications to DQA

- Through the DHS DQA Provider Portal Communication Center
- The PCA and ADCC Licensing Mailbox:
DHSDQALCCS@dhs.Wisconsin.gov

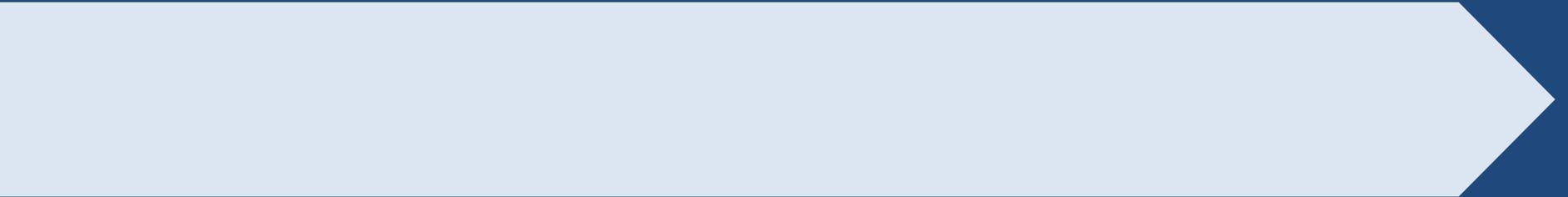
Resources



Resources

- DHS DQA Provider Portal:
<https://www.dhs.wisconsin.gov/provider-portal/index.htm>
- MyWisconsin ID:
<https://www.dhs.wisconsin.gov/provider-portal/mywisconsin-id.htm>
- PCA Application/Certification:
<https://www.dhs.wisconsin.gov/regulations/pca/pca-application.htm>

Questions



Thank you!

DQA Mission: DQA collaborates with healthcare professionals and organizations to promote quality care through licensing and oversight of Wisconsin's facilities and programs.