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Clearinghouse Results Website Overview

In response to the requirements passed during the 2012 Legislative session, the Agency for Health Care Administration (Agency) created the Care Provider Background Screening Clearinghouse (Clearinghouse) Website for use by all specified agencies. The enhanced website allows users to initiate a screening, search for screening results, connect to specified agencies screenings, select a Livescan service provider and connect to the service provider’s website to schedule appointments. Utilizing the Clearinghouse website to initiate screening requests provides the following benefits:

- Ability to share results of criminal history checks among specified agencies.
- Ability to view subsequent arrest information for employees with retained fingerprints (*only available to current employers of the individual*).
- Ability to track screenings from the time the screening request is initiated in the Clearinghouse until a determination is made.
- Provides email notification to the user regarding status updates to requests initiated.
- Ability to search for Livescan Service Providers by certain criteria (county, name, etc.). Provides information and ability to connect to the fingerprint service provider’s website to make appointments.
- Provides TCR# needed for sending an applicant to be rescreened for rejected prints.
- Posts Public Record version of state criminal history record (RAP sheet) for review by the provider requesting the original screening.
- Allows user to connect to a screening request in process for notification when results are available (reduces duplicative screening).
- Creates a “status” report and a “completed screening listing” report of screenings requested by the user eliminating the need to search for each screening result individually.
- Maintain an employee roster by entering hire and separation dates for each employee. This facilitates a notification to the employer if the eligibility status of an employee changes.
  - According to section 435.12(2) (c) an employer of persons subject to screening by a specified agency must register with the clearinghouse and maintain the employment status of all employees within the clearinghouse. Initial employment status and any changes in status must be reported within **10 business days**.
- Redesigned Individual Profile page that includes:
  - Eligibility Results
  - Photograph, if the individual is in the Clearinghouse
  - Department of Health Professional Licensure Status
  - View screenings in process
  - State criminal history report viewable for the provider initiating the screening
  - Employment History
Background Screening Home Page

To gain access to the Clearinghouse results website you must first register on the Portal and receive access. Please see the Clearinghouse User Registration Guide for registration and log in instructions at http://ahca.myflorida.com/backgroundscreening.

To access the Clearinghouse results website through the Portal please log in at https://apps.ahca.myflorida.com/SingleSignOnPortal. On the Portal Landing select Background Screening Clearinghouse – Agency for Health Care Administration.

On the Background Screening Clearinghouse Program – AHCA – Access Page you will see your approval status. If you are approved please select the Background Screening Clearinghouse link to access the Clearinghouse results website.
If you have requested and been granted access to the Clearinghouse results website on behalf of multiple specified agencies, you will be prompted to select the agency for this session before viewing the home page.

A welcome message and your provider information will appear on the BGS Home page. This page will also display **important bulletin messages** and information when appropriate.

Moving throughout the website is accomplished by clicking navigation tabs at the top of the page. These tabs will appear on all pages. The navigation tabs allow you to search, initiate screenings, review your screenings in process and screening results, look up Livescan service providers, review your employee roster, and log out. To switch the specified agency for use on the website, you may select ‘Switch Agency View’ from any screen in the system. This will return you to the ‘Select Agency For This Session’ screen.
Search for Screening Results

The Search page allows you to review the eligibility status of an individual if they have undergone a screening or if they have a screening in process in the Clearinghouse. If the individual is not found, a screening may be initiated from this page. If the individual is found, their Profile page will appear.

**Note:** If you know an individual has not been screened, you may click the ‘Initiate Screening’ tab located on the navigation bar.

- Enter the individual’s:
  - Social Security Number **AND**
  - Last Name **OR**
  - Date of Birth
- Select ‘Search’

![Search Criteria Form](image-url)
**Initiate New Screening**

To initiate a new screening for an individual, select the 'Initiate Screening' button.
Enter Profile Information

- Enter all required information, as designated by the red asterisks (*)
  - Enter the **mailing address** of the **individual being screened**
  - Please note that the height and weight limits are set by the Florida Department of Law Enforcement. If an applicant falls outside of the established limits please select the closest match.

- Ensure all information is accurate and select the ‘Next’ button

Initiate Screening

Enter Profile

To initiate a screening please enter the information below. Fields with an (*) are required.
Search Medicare/Medicaid Exclusions (OIG List)

Individuals who do not have a prior screening must be manually checked in the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) upon initial screening. Once an individual has a record in the BGS system an automated review of the OIG LEIE will occur when the list is updated every 30 days.

When you select the ‘OIG Search’ button you will be redirected to the OIG’s website. Follow the instructions to search for the individual and complete the OIG LEIE search. Close the OIG website and return to the BGS OIG Search page.

Check the affirmation box to confirm the search was conducted and select ‘Initiate Screening’ to continue or ‘Cancel’ if you do not wish to proceed with the screening.

Note: Health care providers that receive federal funding that employs an individual on the LEIE may be subject to civil monetary penalties (CMP). Individuals on the Exclusion List are not eligible for employment with providers of Medicare and/or Medicaid services.

---

Check OIG List

To employ or contract with this individual you must complete an online search of the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) and a Level 2 criminal history screening. The OIG LEIE website lists individuals and entities excluded from Federally-funded health care programs pursuant to sections 1128 and 1156 of the Social Security Act. There is no fee associated with conducting a search on the OIG LEIE website.

Anyone who receives federal funding and hires an individual or entity on the LEIE may be subject to civil monetary penalties (CMP). Individuals listed on the Exclusion list are not eligible for employment with providers that provide Medicare and Medicaid services.

I OIG Search

Select the affirmation statement to confirm you performed a OIG LEIE search.

☐ I affirm the OIG List of Excluded Individuals/Entities (LEIE) was searched for the individual listed above.

If you would like to end this review, select Return to Search.

If you would like to hire this individual without completing a new screening select Profile Page to enter employment information and print a copy of the individual's Background Screening Results page for your records.

If you would like to initiate a new screening for the individual, select the "Next" button to continue.

Next
The National Nurse Aide Registry is a web service that allows providers to check multiple state Nurse Aide Registries at once. The states currently participating in the NNAR are Florida, Georgia, New Mexico, Ohio, Oregon, Utah, Washington D.C., and West Virginia. When you initiate a new screening, resubmission or agency review, a NNAR search will be performed and display as a separate step in the initiation process.

If a match of the applicant is found on a participating state’s registry, to confirm the results, use the provided hyperlink on the registry research page to perform a manual search of the registry. **The registry check and its results are provided for informational purposes only and have no bearing on Agency eligibility determinations.**

Select **Initiate Screening** to continue.

<table>
<thead>
<tr>
<th>National Nurse Aid Registry</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TEST, AGENCY</strong></td>
</tr>
<tr>
<td><strong>Multi-State Nurse Aide Registry Search Results</strong></td>
</tr>
<tr>
<td>These are auto-match results based on personal identification information provided by the applicant of states that participate in the National Nurse Aid Registry program. Current participating states are: FLORIDA, GEORGIA, NEW MEXICO, OHIO, OREGON, UTAH, WASHINGTON D.C., and WEST VIRGINIA.</td>
</tr>
<tr>
<td>If a match of the applicant is found on a participating states’ registry, to confirm the results, use the provided link on the registry research page to perform a manual search of the registry. This registry check and its results are provided for informational purposes only and have no bearing or detriment on Agency eligibility determinations.</td>
</tr>
</tbody>
</table>

**Match Results**

No matches found.

If you would like to end this review, select **Return to Search**.

If you would like to hire this individual without completing a new screening select **Profile Page** to enter employment information and print a copy of the individual’s Background Screening Results page for your records.

If you would like to initiate a new screening for the individual select the "Initiate Screening" button.
Select Position, Confirm Privacy Policy, and Set ORI

To ensure the appropriate criteria is applied during the screening review, the position type and reason for screening the individual must be entered.

- Select the **provider** that the individual has applied to work for from the drop down list
  - Please note the provider drop down will only display if you are accessing the website on behalf of multiple providers.
- Select the **position** that the individual is applying for from the drop down list
- Select the ‘**Privacy Policy**’ link to view and print the privacy policy. Check the affirmation box to confirm that the applicant has signed and agreed to the Privacy Policy.

The ORI number for the request will be determined based on the PROVIDER name used to submit the request. The ORI number is used to determine the screening purpose.

**If you are not registered as a Florida Medicaid Provider (enrollment or re-enrollment) or a Medicaid Health Plan, you will NOT be able to request a review for Medicaid Provider Enrollment purposes.**
**Select Livescan Provider and Make Appointment**

In accordance with section 408.809(3), Florida Statutes, all Level 2 screenings must be submitted electronically. You may search for and select a Livescan Service Provider below.

If you have access to a photo enabled and Clearinghouse compliant service provider (other than a private vendor) **you may skip this section by selecting ‘Submit’**.

Enter a name and/or city and/or county to locate a Livescan provider in your area. You may also select ‘Search’ to view the entire list.
Make Appointment

After you have selected the Livescan service provider you would like to use, select the ‘Make Appt’ button to schedule an appointment with that service provider. While the website will be unique for each service provider, they will all provide the ability to enter the social security number to prepopulate all demographic information for the applicant, reducing duplicative data entry.

Once you schedule an appointment with the service provider, close the ‘Make Appt’ window to return to the Clearinghouse results website. To complete the screening request select ‘Submit’.

Please contact the service provider with any questions about their ‘Make Appt’ page.

![Image of Initiate Screening page]

Text:

In accordance with section 408.809 (3), Florida Statutes, all Level 2 screenings must be submitted electronically. You may search and select a LiveScan service provider below. If you have access to LiveScan services other than a private vendor you may skip this section by selecting “Next”.

Select LiveScan Service Provider

Enter at least one of the following criteria to search for a specific LiveScan service provider or locate a service provider in your area.

- LiveScan Service Provider: [Field]
- City: [Field]
- County: [Field]

Search

LiveScan List

The information listed below is updated continuously as it is reported to AHCA by the LiveScan service provider. The information is subject to change at any time without notice. We recommend you contact the vendor service provider directly or visit their website to confirm the information is still correct. To schedule an appointment, you may contact the service provider directly or select the online link under the Appointment column.

<table>
<thead>
<tr>
<th>LiveScan Service Provider</th>
<th>Address</th>
<th>City</th>
<th>County</th>
<th>Phone</th>
<th>Appointment</th>
<th>Cost</th>
<th>Hours</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Test Livescan Location</td>
<td>123 Lane City, Fl. 33333</td>
<td>City</td>
<td>County</td>
<td>(555) 555-5555</td>
<td>Walk-in Appointments</td>
<td></td>
<td></td>
<td>Make Appt</td>
</tr>
</tbody>
</table>

[Button: Print All]
[Button: Cancel]
[Button: Back]
[Button: Submit]
Print Livescan Request Form

Once the screening request is submitted, a Livescan Request Form will be generated for the applicant to take to their screening appointment. The request form contains important information, including the following:

1. The **ORI number** required for electronic fingerprint submission
2. The **Screening Request ID** used by Livescan service providers to link the screening results to the screening request
3. **Appointment information** (if an appointment was scheduled during the Livescan step)

Select ‘Home’ if you are done, or ‘Initiate New Screening’ to initiate a screening for another individual.
Sample Livescan Request Form

<table>
<thead>
<tr>
<th>Applicant Information</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicant's Name:</td>
<td>AGENCY TEST</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CITY, Florida 33333</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date of Birth: 1/1/1990</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Place of Birth: Florida</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LiveScan Service Provider Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>You must present this form and a current valid government-issued photo identification to be fingerprinted (i.e. driver's license, State ID or military identification card.)</td>
<td></td>
</tr>
</tbody>
</table>

An appointment has been scheduled for you by the health care provider listed below to have your fingerprints taken at:

**Test Livescan Location**
123 Lane
City, FL 33333
(555) 555-555

Appointment Date: 4/1/2014
Appointment Time: 12:00 AM

If you are unable to make this appointment, contact the requesting health care provider to reschedule.

<table>
<thead>
<tr>
<th>Requesting Health Care and/or Service Provider</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>FLORIDA HOSPITAL</td>
<td></td>
</tr>
<tr>
<td>601 E ROLLINS ST</td>
<td>License Number: 4369</td>
</tr>
<tr>
<td>ORLANDO, FL</td>
<td>Phone Number: (407) 303-5600</td>
</tr>
</tbody>
</table>

Please return this form to the requesting health care and/or service provider once your prints are taken.
Profile Page

The individual’s profile page provides information useful in making hiring decisions. This page contains the screening eligibility status and the Department of Health professional licensure status if applicable.

Other features include the ability to

- Edit demographic information, including mailing address
- Connect to a screening that is already in process for the individual
- Receive email notifications when the screening is complete
- Add employment history
- View Public Rap Sheets for initiated screenings
- View subsequent Arrest and/or Registration files for employees

This page also provides an employment history for the individual as reported by any health care or service provider regulated by a specified agency in the Clearinghouse.
### Person Profile

**First Name:** AGENCY  
**Middle Name:**  
**Last Name:** TEST  
**Address Line 1:** 123 LANE  
**Address Line 2:**  
**City:** CITY  
**State:** Florida  
**ZIP:** 33333  
**County:**  
**Prior States:**  
**Sex:** MALE  
**Race:** WHITE  
**Hair Color:** Brown  
**Eye Color:** Hazel  
**Height:** 5'05"  
**Weight:** lbs.

**SSN:** XXX-XX-2008  
**Date of Birth:** 12/24/1972  
**Place of Birth:** Georgia

### Screens in Process

<table>
<thead>
<tr>
<th>Screening</th>
<th>Provider</th>
<th>Submitted</th>
<th>Status</th>
<th>Action</th>
</tr>
</thead>
</table>
| 211184    |          | 03/17/2014| Determination Made | 03/17/2014  
Reprint Privacy Policy Remove

- Connected screenings

### Agency for Health Care Administration Eligibility

<table>
<thead>
<tr>
<th>Type</th>
<th>Item</th>
<th>Status</th>
<th>Screening Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Medicaid / Medicare Participating Provider</td>
<td>Eligible</td>
<td>4/10/2014</td>
</tr>
<tr>
<td>Employment</td>
<td>Non-Medicaid / Medicare Participating Provider</td>
<td>Eligible</td>
<td>4/10/2014</td>
</tr>
<tr>
<td>Position</td>
<td>Medicaid Provider Enrollment</td>
<td>N/A</td>
<td>4/10/2014</td>
</tr>
<tr>
<td>Position</td>
<td>AHCA Provider/Facility Licensure</td>
<td>Eligible</td>
<td>4/10/2014</td>
</tr>
</tbody>
</table>

### Department of Health Licensure Status

<table>
<thead>
<tr>
<th>Profession</th>
<th>License #</th>
<th>Original Date</th>
<th>Expiration Date</th>
<th>License Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>LICENSED PRACTICAL NURSE</td>
<td>933711</td>
<td>6/12/1985</td>
<td>7/13/2007</td>
<td>NULL AND VOID</td>
</tr>
<tr>
<td>PHYSICAL THERAPIST</td>
<td>8199</td>
<td>9/14/1992</td>
<td>11/30/2015</td>
<td>CLEAR</td>
</tr>
</tbody>
</table>

### Employment/Contract History

<table>
<thead>
<tr>
<th>Provider</th>
<th>Position</th>
<th>Provisional Hire/Contract Date</th>
<th>Permanent Hire/Contract Date</th>
<th>End Date</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Employee - Administrator</td>
<td>03/19/2014</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Chief Financial Officer</td>
<td>03/17/2014</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Employee - Administrator</td>
<td>03/17/2014</td>
<td></td>
<td></td>
<td>Edit</td>
</tr>
</tbody>
</table>

[Add Employment/Contract Record]
To edit the demographic information for an applicant select the 'Edit' button on the profile page, below the photo. You may edit and update all information except for the following:

- Social Security Number
- Last Name
- Date of Birth

Please note that the height and weight limits are set by the Florida Department of Law Enforcement. If an applicant falls outside of the established limits please select the closest match.

Please contact the Background Screening Unit to update any of the items listed above.
Person Profile – Screenings in Process

A list of screening requests in process will be displayed on the person profile page. This section allows providers to:

- Initiate a New Screening (if the applicant is NOT in the Clearinghouse)
- Connect to a Screening
- Initiate an Agency Review
- Connect to an Agency Review
- Initiate a Resubmission (if the applicant has retained prints)
- Connect to a Resubmission

Information on initiating requests can be found in later sections of this document.

Connecting to a screening, agency review, or resubmission will allow providers to receive notifications and updates on an applicant’s screening status without the need to request and pay for a new screening.
Person Profile – Clearinghouse Status

The applicant’s current Clearinghouse status and retained prints expiration date are listed below the screenings in process section.

Retained Prints Expiration Date:
- Fingerprints are retained for a period of 5 years by the Florida Department of Law Enforcement (FDLE).
- If the applicant does not have retained prints with FDLE the status will read ‘Prints Not Retained’.

Clearinghouse Screening Available:
- Yes – The applicant has a screening in the Clearinghouse that can be shared
- No – The applicant does not have a screening in the Clearinghouse that can be shared
- Awaiting Privacy Policy – The applicant has a screening with retained prints and a photograph but is missing the required privacy policy to be entered into the Clearinghouse.
  - Select ‘View Privacy Policy’ to print a copy of the policy for the applicant to sign.
  - Select ‘Confirm Privacy Policy’ to submit the required information.
    - The document does not need to be forwarded to the agency for review.
Person Profile – Public Rap Sheets and Arrest/Registration Notifications

The public record version of criminal history reports (or public rap sheets) is available to the provider that initiated the screening on the Clearinghouse results website.

Copies of subsequent arrest or registration notifications from the Florida Department of Law Enforcement are available to current employers of the applicant. The provider must have a current employment history record entered in the Clearinghouse results website for the applicant to view this information.

The public rap sheet and subsequent arrest or registration notifications can be found on the person profile page, below the screenings in process section.
Person Profile – Eligibility Determinations and DOH Licensure

The current eligibility determination and Department of Health licensure status for an applicant can be found in the eligibility and licensure sections of the person profile page.

The Agency for Health Care Administration’s eligibility results are displayed by type according to the reason for screening.

<table>
<thead>
<tr>
<th>Category</th>
<th>Eligibility</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Medicaid / Medicare Participating Provider</td>
<td>Status of an individual employed or applying to work in a facility that receives Medicaid or Medicare funds.</td>
</tr>
<tr>
<td>Employment</td>
<td>Non-Medicaid / Medicare Participating Provider</td>
<td>Status of an individual employed or applying to work in a facility that does not receive Medicaid or Medicare funds.</td>
</tr>
<tr>
<td>Position</td>
<td>Medicaid Provider Enrollment</td>
<td>Status of an individual provider or principal of a provider entity that is enrolled or is applying to enroll as a Medicaid provider. Principals of the provider entity include any officer, director, billing agent, managing employee, or affiliated person, or any partner or shareholder who has an ownership interest equal to 5 percent or more in the provider.</td>
</tr>
<tr>
<td>Position</td>
<td>AHCA Provider/Facility Licensure</td>
<td>Status of an individual who may hold a position as CFO, Administrator, Controlling Interest, or Owner/Operator in a facility that is licensed or is applying for licensure as an AHCA provider.</td>
</tr>
</tbody>
</table>

Please note that you MUST be registered as a Florida Medicaid Provider or Medicaid Health Plan to request a review for Medicaid Provider Enrollment purposes.

Definitions of eligibility determinations can be found by hovering over the question mark next to ‘Agency for Health Care Administration Eligibility’ or selecting the ‘Explanation of Results’ button at the bottom of the profile page.
Person Profile – Employment/Contract History and View/Print Version of Results

All employment history records entered on the Clearinghouse results website for the applicant will display in the ‘Employment/Contract History’ section of the person profile page. All records, regardless of the specified agency of the provider, will be displayed. The provider name will only display to users with access to the website on behalf of the provider.

The employment history records must be completed if users with access to the provider’s record are to receive updates such as subsequent arrest notifications. Refer to the ‘Add/Edit Employment/Contract Record’ below for instructions on updating employment records.

A printable version of the person profile page and results can be accessed by selecting the ‘View/Print Version’ button below the ‘Employment/Contract History’ section. This will open a new window with a printable version of the information.
Add Employment/Contract Record

According to section 435.12(2) (c) an employer of persons subject to screening by a specified agency must register with the clearinghouse and maintain the employment status of all employees within the clearinghouse. Initial employment status and any changes in status must be reported within 10 business days.

- To add employment history, open the individual’s Profile Page and select ‘Add Employment/Contract Record’
- Enter the required information and select ‘Save’. This will bring you back to the profile page.
- The new employment record will display in the Employment/Contract History section.

#### Employment/Contract History

<table>
<thead>
<tr>
<th>Provider</th>
<th>Position</th>
<th>Provisional Hire/Contract Date</th>
<th>Permanent Hire/Contract Date</th>
<th>End Date</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Employee - Financial Officer</td>
<td>03/12/2014</td>
<td></td>
<td></td>
<td>Edit</td>
</tr>
</tbody>
</table>

#### Add Employment/Contract Record

**Applicant Name:** NURSE  
**SSN:** XXX-XX-6789  
**Date of Birth:** 1/1/1990  
**Race:** BLACK  
**Sex:** FEMALE

* Provider:  
* Position:  
* Permanent Hire/Contract Date:  

* Required

[Add Employment/Contract Record]

#### Employment/Contract History

<table>
<thead>
<tr>
<th>Provider</th>
<th>Position</th>
<th>Provisional Hire/Contract Date</th>
<th>Permanent Hire/Contract Date</th>
<th>End Date</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Chief Financial Officer</td>
<td>03/17/2014</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

 `<provider>`

[Add Employment/Contract Record]
Section 435.06(2)(d) provides that an applicant may be hired provisionally for training and orientation purposes before the screening process is completed. You may add a provisional hire date for an applicant with a current ‘Screening in Process’ status in the Clearinghouse by selecting the ‘Add Employment/Contract Record’ button located at the bottom of the applicant’s profile page.

**Add Employment/Contract Record**

![Image of Add Employment/Contract Record form](image_url)

**Edit Employment Record**

You may edit an employee record from the ‘Employment/Contract History’ section on the profile page, or from the Employee/Contractor Roster tab. From either page, select the ‘Edit’ link under the action column for the applicant record you wish to update and enter the required information and select ‘Save’.

**Edit Employment/Contract Record**

![Image of Edit Employment/Contract Record form](image_url)
To quickly enter an ‘End Date’ for an employment record from the Employee/Contractor Roster tab, select the calendar icon in the ‘End Date’ column. Enter the required information and select ‘Save’.
Screenings in Process Tab

The Screenings in Process tab provides a listing of all screening requests you have initiated or connected to and the current status. A request will remain on the list for 7 days once a determination is made.

- View an individual’s profile page by selecting the last name of the individual
- Filter the list by using the search options and selecting ‘Apply’
- Sort the records by selecting any column header
- If you no longer wish to receive email notifications for an individual, select the ‘Remove’ link under the Action column
  - The screening will be removed for your list however the screening will continue to be processed
**Screening Results Tab**

The Screening Results tab provides a listing of all screening requests you have initiated or connected to with the final determination.

- View an individual’s profile page by selecting the last name of the individual
  - To add employment history you must open the individual’s profile page
- Filter the list by using the filter options and selecting ‘Apply’
- Sort the records by selecting any column header
- If you no longer wish to receive email notifications for an individual, select the ‘Remove’ link under the Action column
  - The screening will be removed for your list however the screening will remain in the database

The page will default with an empty screenings list. You MUST select a Screening Purposes to view results.
**Livescan Tab**

You may select the Livescan tab on the navigation bar to search for photo enabled and Clearinghouse compliant Livescan service providers. This list contains information as reported by the Livescan vendors and service providers to the Clearinghouse. To schedule an appointment please initiate a new screening.

- To filter your search use the search criteria and select ‘Search’
Employee/Contractor Roster

The Employee/Contractor Roster tab provides a listing of your employees and contractors as entered through the Employment/Contract History section of the individual’s profile page. The list defaults to current employees only.

- View an individual’s profile page by selecting the last name of the individual
- Filter the list by using the search options and selecting ‘Apply’
- Sort the records by selecting any column header
- To edit an employment record select the ‘Edit’ button in the action column
**Initiate Agency Review**

If an individual has been screened by another specified agency and entered into the Clearinghouse, a provider may request an agency review at no cost. This will allow the specified agency to make an eligibility determination for employment purposes. Benefits of requesting an agency review include the following:

- Agency Review requests are **FREE** for the provider and individual
- The applicant or employee does NOT need to visit a Livescan location and submit new fingerprints
- The provider will receive a copy of the public rap sheet after initiating an agency review

To initiate an agency review for an individual, select the **Initiate Agency Review** button.
Search Medicare/Medicaid Exclusions (OIG List)

Individuals who do not have a prior screening must be manually checked in the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) upon initial screening. Once an individual has a record in the BGS system an automated review of the OIG LEIE will occur when the list is updated every 30 days.

When you select the ‘OIG Search’ button you will be redirected to the OIG’s website. Follow the instructions to search for the individual and complete the OIG LEIE search. Close the OIG website and return to the BGS OIG Search page.

Check the affirmation box to confirm the search was conducted and select ‘Initiate Screening’ to continue or ‘Cancel’ if you do not wish to proceed with the screening.

Note: Health care providers that receive federal funding that employs an individual on the LEIE may be subject to civil monetary penalties (CMP). Individuals on the Exclusion List are not eligible for employment with providers of Medicare and/or Medicaid services.

Check OIG List

TEST, AGENCY

To employ or contract with this individual you must complete an online search of the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) and a Level 2 criminal history screening. The OIG LEIE website lists individuals and entities excluded from Federally-funded health care programs pursuant to sections 1128 and 1156 of the Social Security Act. There is no fee associated with conducting a search on the OIG LEIE website.

Anyone who receives federal funding and hires an individual or entity on the LEIE may be subject to civil monetary penalties (CMP). Individuals listed on the Exclusion list are not eligible for employment with providers that provide Medicare and Medicaid services.

OIG Search

Select the affirmation statement to confirm you performed a OIG LEIE search.

☐ I affirm the OIG List of Excluded Individuals/Entities (LEIE) was searched for the individual listed above.

If you would like to end this review, select Return to Search.

If you would like to hire this individual without completing a new screening select Profile Page to enter employment information and print a copy of the individual’s Background Screening Results page for your records.

If you would like to initiate a new screening for the individual, select the “Next” button to continue.
National Nurse Aide Registry (NNAR) Search

The National Nurse Aide Registry is a web service that allows providers to check multiple state Nurse Aide Registries at once. The states currently participating in the NNAR are Florida, Georgia, New Mexico, Ohio, Oregon, Utah, Washington D.C., and West Virginia. When you initiate a new screening, resubmission or agency review, a NNAR search will be performed and display as a separate step in the initiation process.

If a match of the applicant is found on a participating state’s registry, to confirm the results, use the provided hyperlink on the registry research page to perform a manual search of the registry. **The registry check and its results are provided for informational purposes only and have no bearing on Agency eligibility determinations.**

Select **Initiate Screening** to continue.

---

**National Nurse Aid Registry**

TEST, AGENCY

**Multi-State Nurse Aide Registry Search Results**

These are auto-match results based on personal identification information provided by the applicant of states that participate in the National Nurse Aid Registry program. Current participating states are: FLORIDA, GEORGIA, NEW MEXICO, OHIO, OREGON, UTAH, WASHINGTON D.C., and WEST VIRGINIA.

If a match of the applicant is found on a participating states' registry, to confirm the results, use the provided link on the registry research page to perform a manual search of the registry. This registry check and its results are provided for informational purposes only and have no bearing or detriment on Agency eligibility determinations.

**Match Results**

No matches found.

If you would like to end this review, select **Return to Search**.

If you would like to hire this individual without completing a new screening select **Profile Page** to enter employment information and print a copy of the individual’s Background Screening Results page for your records.

If you would like to initiate a new screening for the individual select the "Initiate Screening" button.
Select Position, Confirm Privacy Policy, and Set ORI

To ensure the appropriate criteria is applied during the screening review, the position type and reason for screening the individual must be entered.

- Select the **provider** that the individual has applied to work for from the drop down list
  - Please note the provider drop down will only display if you are accessing the website on behalf of multiple providers.
- Select the **position** that the individual is applying for from the drop down list
- Select the ‘**Privacy Policy**’ link to view and print the privacy policy. Check the affirmation box to confirm that the applicant has signed and agreed to the Privacy Policy.

The ORI number for the request will be determined based on the PROVIDER name used to submit the request. The ORI number is used to determine the screening purpose.

If you are not registered as a Florida Medicaid Provider (enrollment or re-enrollment) or a Medicaid Health Plan, you will NOT be able to request a review for Medicaid Provider Enrollment purposes.
Agency Review Request Submitted

Once the screening request is submitted, select ‘Home’ if you are done or ‘Initiate New Screening’ to initiate a screening for another individual.

Open the applicant’s profile page to view the status of an agency review request, or connect to an agency review.
Initiate Resubmission

The retention of fingerprints provides a cost savings for applicants that are in the Clearinghouse but have had a lapse in employment greater than 90 days. If there has been a 90 day lapse in employment, these applicants would only require a new national criminal history check – a resubmission of the retained fingerprints. A new state criminal history search will also be conducted, at no additional charge.

To initiate a Resubmission for an individual, select the ‘Initiate Resubmission’ button.
**Search Medicare/Medicaid Exclusions (OIG List)**

Individuals who do not have a prior screening must be manually checked in the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) upon initial screening. Once an individual has a record in the BGS system an automated review of the OIG LEIE will occur when the list is updated every 30 days.

When you select the ‘OIG Search’ button you will be redirected to the OIG’s website. Follow the instructions to search for the individual and complete the OIG LEIE search. Close the OIG website and return to the BGS OIG Search page.

**Check the affirmation box** to confirm the search was conducted and select 'Initiate Screening' to continue or ‘Cancel’ if you do not wish to proceed with the screening.

*Note: Health care providers that receive federal funding that employs an individual on the LEIE may be subject to civil monetary penalties (CMP). Individuals on the Exclusion List are not eligible for employment with providers of Medicare and/or Medicaid services.*

---

**Check OIG List**

**TEST, AGENCY**

To employ or contract with this individual you must complete an online search of the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE) and a Level 2 criminal history screening. The OIG LEIE website lists individuals and entities excluded from Federally-funded health care programs pursuant to sections 1128 and 1156 of the Social Security Act. There is no fee associated with conducting a search on the OIG LEIE website.

Anyone who receives federal funding and hires an individual or entity on the LEIE may be subject to civil monetary penalties (CMP). Individuals listed on the Exclusion list are not eligible for employment with providers that provide Medicare and Medicaid services.

**[OIG Search]**

Select the affirmation statement to confirm you performed a OIG LEIE search.

- [ ] I affirm the OIG List of Excluded Individuals/Entities (LEIE) was searched for the individual listed above.

If you would like to end this review, select **Return to Search**.

If you would like to hire this individual without completing a new screening select **Profile Page** to enter employment information and print a copy of the individual’s Background Screening Results page for your records.

If you would like to initiate a new screening for the individual, select the "Next" button to continue.
**National Nurse Aide Registry (NNAR) Search**

The National Nurse Aide Registry is a web service that allows providers to check multiple state Nurse Aide Registries at once. The states currently participating in the NNAR are Florida, Georgia, New Mexico, Ohio, Oregon, Utah, Washington D.C., and West Virginia. When you initiate a new screening, resubmission or agency review, a NNAR search will be performed and display as a separate step in the initiation process.

If a match of the applicant is found on a participating state’s registry, to confirm the results, use the provided hyperlink on the registry research page to perform a manual search of the registry. The registry check and its results are provided for informational purposes only and have no bearing on Agency eligibility determinations.

Select **Initiate Screening** to continue.

<table>
<thead>
<tr>
<th>National Nurse Aid Registry</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEST, AGENCY</td>
</tr>
</tbody>
</table>

**Multi-State Nurse Aide Registry Search Results**

These are auto-match results based on personal identification information provided by the applicant of states that participate in the National Nurse Aid Registry program. Current participating states are: FLORIDA, GEORGIA, NEW MEXICO, OHIO, OREGON, UTAH, WASHINGTON D.C., and WEST VIRGINIA.

If a match of the applicant is found on a participating states’ registry, to confirm the results, use the provided link on the registry research page to perform a manual search of the registry. This registry check and its results are provided for informational purposes only and have no bearing or detriment on Agency eligibility determinations.

- **Match Results**
  - No matches found.

If you would like to end this review, select **Return to Search**.

If you would like to hire this individual without completing a new screening select **Profile Page** to enter employment information and print a copy of the individual’s Background Screening Results page for your records.

If you would like to initiate a new screening for the individual select the "Initiate Screening" button.
Select Position, Confirm Privacy Policy, and Set ORI

To ensure the appropriate criteria is applied during the screening review, the position type and reason for screening the individual must be entered.

- Select the **provider** that the individual has applied to work for from the drop down list
  - Please note the provider drop down will only display if you are accessing the website on behalf of multiple providers.
- Select the **position** that the individual is applying for from the drop down list
- Select the ‘**Privacy Policy**' link to view and print the privacy policy. Check the affirmation box to confirm that the applicant has signed and agreed to the Privacy Policy.

The ORI number for the request will be determined based on the PROVIDER name used to submit the request. The ORI number is used to determine the screening purpose.

If you are not registered as a Florida Medicaid Provider (enrollment or re-enrollment) or a Medicaid Health Plan, you will NOT be able to request a review for Medicaid Provider Enrollment purposes.
Initiate Payment – Credit Card

The cost of a resubmission is the current fee for a national criminal history check plus a service fee. Resubmission payment options include:

- Credit Card
  - MasterCard
  - Discover
  - American Express
- E-Checking (skip to page 40 for E-Checking instructions)
  - Personal or Business checking/savings account

To pay for the resubmission:

- Select payment method
- Select Pay Total Amount to continue

Please note that all resubmission payments will be collected by the Agency for Health Care Administration.

Payment - Initiation Page

Clearinghouse Payment

As the parent agency of the Care Provider Background Screening Clearinghouse (Clearinghouse), all payments submitted to the Clearinghouse will be collected and processed by the Agency for Health Care Administration.

<table>
<thead>
<tr>
<th>Transaction Amount</th>
<th>Service Charge</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1234</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Select Payment Method

- Credit Card
- Checking

Pay Total Amount

Terms, Conditions & Fees for Payments: A non-refundable convenience fee of 2.50% will be added to all credit card payments and $0.18 on all e-check (checking) payments. Please allow 2 to 5 business days for the payments to be settled and posted.

Refund Policy: The refund processing of your payment will begin upon receipt of the Application for Refund form. Applications for refund are processed in accordance with Florida Administrative Code 12-29.002 and Florida Administrative Code 68-44.100. We will notify you if, for any reason, we are not able to process the refund. Section 215.20, Florida Statutes, requires all requests for refunds be submitted within 3 years of the initial payment to the State of Florida. Depending upon the user’s method of payment, refunds may be issued using the original method of payment.

Cancel Screening Request
Enter Payment Information – Credit Card

Enter the payment information and select ‘Continue’ to verify payment information and submit the request.

IMPORTANT – Please note that payment information will NOT be saved.

<table>
<thead>
<tr>
<th>Remit Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>* Transaction Amount:</td>
<td>96.50</td>
</tr>
<tr>
<td>* Service Fee:</td>
<td>41</td>
</tr>
<tr>
<td>* Division Name:</td>
<td>CAREER ASSESSMENT</td>
</tr>
<tr>
<td>* Account Number:</td>
<td>72368</td>
</tr>
<tr>
<td>* eMail Address:</td>
<td>TestEmailAccount@test</td>
</tr>
</tbody>
</table>

* indicates a required field

<table>
<thead>
<tr>
<th>Payment Information for Transaction ID: 2455</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>*Payment Account Type:</td>
<td>MasterCard</td>
</tr>
<tr>
<td>*Name on Credit Card:</td>
<td>(The name must appear as it does on the credit card account.)</td>
</tr>
<tr>
<td>*Address Line 1:</td>
<td></td>
</tr>
<tr>
<td>Address Line 2:</td>
<td></td>
</tr>
<tr>
<td>*City, State, Zip:</td>
<td></td>
</tr>
<tr>
<td>*Credit Card Account Number:</td>
<td></td>
</tr>
<tr>
<td>*Credit Card Security Value:</td>
<td></td>
</tr>
</tbody>
</table>

Click on the image to see Credit Card Security Value locations.

*Expiration Date: 01 / 2016

Please enter payment amount. For on-time posting of the payment to your account, please allow 3 business days prior to the due date for processing.

*Payment Date: 03/22/2014

*Payment Amount: $ 16.99

* indicates a required field

[Continue] [Cancel]
Review Payment Information – Credit Card

Review your payment information and select Confirm to submit your payment. **Skip to page 43 to submit the resubmission request.**

<table>
<thead>
<tr>
<th>Remit Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transaction Amount: 16.99</td>
</tr>
<tr>
<td>Service Fee: 0.41</td>
</tr>
<tr>
<td>Division Name: TEST PROVIDER - 1234</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Verify Payment Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name on Credit Card: Test Account</td>
</tr>
<tr>
<td>Transaction ID: 2455</td>
</tr>
<tr>
<td>Address Line 1: 123 Lane</td>
</tr>
<tr>
<td>Address Line 2:</td>
</tr>
<tr>
<td>City, State, Zip: City, FL 33333</td>
</tr>
<tr>
<td>Credit Card Account Number: ****4851</td>
</tr>
<tr>
<td>Credit Card Security Value: 123</td>
</tr>
<tr>
<td>Expiration Date: 1/2016</td>
</tr>
<tr>
<td>Payment Date: 03/24/2014</td>
</tr>
<tr>
<td>Payment Amount: $16.99</td>
</tr>
<tr>
<td>TOTAL PAYMENT: $16.99</td>
</tr>
</tbody>
</table>

[Confirm] [Modify] [Cancel]
Initiate Payment – E-Checking

The cost of a resubmission is the current fee for a national criminal history check plus a service fee. Resubmission payment options include:

- Credit Card (refer to page 37 for Credit Card instructions)
  - MasterCard
  - Discover
  - American Express
- E-Checking
  - Personal or Business checking/savings account

To pay for the resubmission:
- Select payment method
- Select Pay Total Amount to continue

Please note that all resubmission payments will be collected by the Agency for Health Care Administration.

Payment - Initiation Page

Clearinghouse Payment

As the parent agency of the Care Provider Background Screening Clearinghouse (Clearinghouse), all payments submitted to the Clearinghouse will be collected and processed by the Agency for Health Care Administration.

Transaction Amount  Service Charge  Total Amount
$50.00

Select Payment Method
- Credit Card
- Checking

Pay Total Amount

Terms, Conditions & Fees for Payments: A non-refundable convenience fee of 2.50% will be added to all credit card payments and $0.18 on all e-check (checking) payments. Please allow 2 to 5 business days for the payments to be settled and posted.

Refund Policy: The refund processing of your payment will begin upon receipt of the Application for Refund form. Applications for refund are processed in accordance with Florida Administrative Code 12-20.002 and Florida Administrative Code 58-44.020. We will notify you if, for any reason, we are not able to process the refund. Section 215.20, Florida Statutes, requires all requests for refunds be submitted within 3 years of the initial payment to the State of Florida. Depending upon the user's method of payment, refunds may be issued using the original method of payment.

Cancel Screening Request
Enter Payment Information – E-Checking

Enter the payment information and select ‘Continue’ to verify payment information and submit the request.

**IMPORTANT – Please note that payment information will NOT be saved.**

![Payment Information Form](image)

To schedule your one-time payment enter your banking and payment information below.

<table>
<thead>
<tr>
<th>Remit Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Transaction Amount:</strong> 16.60</td>
</tr>
<tr>
<td><strong>Service Fee:</strong></td>
</tr>
<tr>
<td><strong>Division Name:</strong></td>
</tr>
<tr>
<td><strong>Account Number:</strong></td>
</tr>
<tr>
<td><strong>eMail Address:</strong> TestEmailAccount@Test</td>
</tr>
</tbody>
</table>

* indicates a required field

Payment Information for Transaction ID #: 2458

<table>
<thead>
<tr>
<th>Payment Account Type:</th>
<th>[ ] Personal Checking</th>
<th>[ ] Personal Savings</th>
<th>[ ] Business Checking</th>
<th>[ ] Business Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ]</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name on Bank Account:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Test Email Account</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Bank Routing Number (ABA):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Banking Account Number (DDA):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Please enter payment amount. For on-time posting of the payment to your account, please allow 3 business days prior to the due date for processing.

<table>
<thead>
<tr>
<th>Payment Date:</th>
<th>03/22/2014</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Payment Amount:</th>
<th>$16.60</th>
</tr>
</thead>
</table>

* indicates a required field

![Continue and Cancel Buttons](image)
Review Payment Information – E-Checking

To submit your payment using E-Checking you **must answer a challenge question**. Please enter the email address associated with the account you used to log into the website (https://apps.ahca.myflorida.com/SingleSignOnPortal).

Review your payment information and select Confirm to submit your payment.
Submit Resubmission Request

Select ‘Submit Resubmission Request’ to complete this request. An email confirmation and receipt will be sent to the address on record.

![Payment Confirmation Screen](image-url)
Resubmission Request Submitted

Once the screening request is submitted, select ‘Home’ if you are done or ‘Initiate New Screening’ to initiate a screening for another individual.

Open the applicant’s profile page to view the status of a resubmission request.