

Florida's Care Provider Background Screening Clearinghouse



Clearinghouse Results Website

Advanced User Registration Guide

Agency for Persons with Disabilities and Medicaid Provider Enrollment Screenings



Clearinghouse Results Website Advanced User Guide

Agency for Persons with Disabilities & Medicaid Enrollment Screenings

TABLE OF CONTENTS

The purpose of this document is to familiarize users that need to conduct Agency for Persons with Disabilities and Medicaid Provider Enrollment and Renewal screenings with how to use the Clearinghouse Results Website.

Slide	Slide #
Acronyms	3
Introductory Content	4
APD/Medicaid Screening Requirements	5
Adding Medicaid Program Access To An APD-Registered Account	6
Screening Under The Correct Program	16
Technical Assistance	21



Clearinghouse Results Website Advanced User Guide APD/Medicaid Screenings

Acronyms

This guide contains terminology with frequently used acronyms. The table below lists the terms and acronyms in this guide.

Acronym	Term
APD	Agency for Persons with Disabilities
CLH	Clearinghouse
CRW	Clearinghouse Results Website
DCF	Department of Children and Families
HCBS	Home and Community Based Services
MDCD	Medicaid Provider Enrollment and Renewal*
MW	Medicaid Waiver

*This guide refers to Medicaid frequently for APD provider background screening purposes. Most APD providers will only need to request Medicaid Provider Enrollment and Renewal screenings. However, if they need to conduct other types of Medicaid screenings (general employment, etc.), they will need to add AHCA program access, as well. If they are not sure, they should contact Medicaid to clarify if they need other types of Medicaid screenings. To comply with Medicaid and APD requirements as an APD MW provider, they only need to have APD and Medicaid access.



Clearinghouse Results Website Advanced User Guide

APD/Medicaid Screenings - Introduction



Do you have an existing user account in the CLH Results Website?

NO – If you do not have an existing APD account in CRW, do not proceed with this user guide. The basic CRW user registration manual is posted at the following link: http://ahca.myflorida.com/MCHQ/Central_Services/Background_Screening/BGS_results.shtml. The DCF/APD guide is in the section titled 'Instruction Guides' under the subsection titled 'SSO Portal User Registration Guide.'

Yes – Proceed through this advanced registration guide to add Medicaid program access and learn to request screenings and view results for APD and Medicaid screening types.

*For assistance, contact the **Background Screening Helpdesk** at background.screening@myflfamilies.com*



Clearinghouse Results Website Advanced User Guide

APD/Medicaid Screening Requirements

APD MW Provider Screening Requirements

APD HCBS MW providers are required to conduct employment screenings by APD. Since they are also Medicaid-enrolled, they are also required to do Medicaid Provider Enrollment screenings by Medicaid. APD providers that are not MW providers do not need to conduct Medicaid Provider Enrollment screenings unless they are Medicaid providers for another purpose. For example, some providers may bill Medicaid for services that are not related to APD.



Screening Requirements of Each Program (APD /Medicaid)

- 1. APD-Required Screenings** – APD regulations require providers to request APD background screenings for all owners, directors, employees, volunteers, and contractors before the individual has contact with clients/consumers. Individuals are re-screened at their 5-year employment anniversary date or when they experience a lapse in employment for more than 90 days.
- 2. Florida Medicaid-Required Screenings**- Medicaid regulations require owners (individuals with 5% or more controlling interest) and managing employees (executive level) to be screened at Medicaid provider enrollment (application) and every 5 years at the provider's Medicaid enrollment renewal date (rather than on the individual's 5 year screening anniversary date as with APD-required employment screenings defined above).



Clearinghouse Results Website Advanced User Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Log In Window

- To use this guide, users should already have an APD-registered CLH account; see slide #4 for instructions to register an initial APD CLH account
- To get started adding Medicaid program access to request Medicaid required screenings, users should first open the Internet Explorer or Firefox browser (and enter this URL: <https://apps.ahca.myflorida.com/SingleSignOnPortal>)
- Enter the User ID and password
- Click 'Log In' button and the system will direct the user to the AHCA Portal Landing Page


AHCA Portal - Login

This Portal Login page will allow an authorized user access to external systems maintained by the Agency for Health Care Administration (AHCA) for the purpose of viewing and maintaining information.

AHCA Portal Login

User ID:

Password:



[Forgot Your Password ?](#)

[Reset Password Instructions](#)

[New User Registration](#)

- See the *Clearinghouse Portal User Registration Guide* at the link on slide #4 for information on requesting a user name and password, or resetting your password.
- Since AHCA is the parent agency of the CLH, users register for the AHCA web portal to access the CLH Results Website.



Clearinghouse Results Website Advanced User Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Portal Landing

- Since this is an existing user account, the landing page shows a link to access the 'Department of Children and Families Background Screening Clearinghouse' agency view; APD providers use the DCF agency view to request APD-required screenings because DCF conducts their screenings.
- Each agency has a slightly different 'view' of the Clearinghouse, based on its provider groups, as subsequent slides will show; as previously referenced, use the link on slide #4 to learn how to register an initial account in the CLH.

AHCA Portal - Portal Landing

Program Access
Select the appropriate link below to be directed to the Program's access page.

[Background Screening Clearinghouse - Department of Children and Families](#)
Department of Children and Families

Request Program Access
Choose from the list of programs below and select "Request Program Access".

Select Program --

- Background Screening Clearinghouse
- Agency For Health Care Administration
- Vocational Rehabilitation
- Department of Elder Affairs
- Department of Juvenile Justice
- Florida Medicaid
- Florida Hospital Uniform Reporting System
- Florida Hospital Uniform Reporting System
- Home Health Agency
- Home Health Quarterly Report
- Low Income Pool
- Low Income Pool System
- Online Licensure
- Online Licensure
- External Sharepoint
- External SharePoint Beta Application

Request Program Access

Logout

- To add Medicaid access to the account, use the 'Select Program' drop down field
- Select 'Florida Medicaid' and click the 'Request Program Access' button



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Select Role/Provider Information

Select Role/Provider Information

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role:

- Select the 'Medicaid Provider' role, which will open new fields under the 'role' field
- Select the 'provider type' for the provider required to conduct screenings for Medicaid provider enrollment and renewal

- APD Medicaid Waiver providers should select 'Home & Community Based Services Waiver' as their Medicaid provider type

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role: **Medicaid Provider**

* Provider Type:

* Reason for Screening:

* Medicaid Provider ID/IATN:

Agency for Health Care Administration

Home & Community-Based Services Waiver

Non-Emergency Transport

Other Provider Types:

- AIR AMBULANCE
- AMBULANCE
- AMBULATORY SURGERY CENTER
- ASSISTIVE CARE SERVICES
- AUDIOLOGIST
- BILLING AGENT
- BIRTH CENTER
- CASE MANAGEMENT AGENCY
- CHILDREN'S MEDICAL SERVICES
- CHIROPRACTOR
- COMMUNITY BEHAVIORAL HEALTH SERVICES
- COUNTY HEALTH DEPARTMENT
- DENTIST
- DIALYSIS CENTER
- DURABLE MED EQUIPT/ MEDICAL SUPPLIES
- FEDERALLY QUALIFIED HEALTH CENTER
- GENERAL HOSPITAL
- GOVERNMENT/MUNICIPAL TRANSPORT
- HEARING AID SPECIALIST
- HMO
- HOME HEALTH AGENCY
- HOSPICE
- INDEPENDENT LABORATORY
- LICENSED MIDWIFE
- MEDICAL ASSISTANT
- MEDICAL FOSTER CARE/ PERSONAL CARE PROVIDER
- MULTI-LOAD PRIVATE TRANSPORT
- NON-EMERGENCY TRANSPORT



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Select Reason For Screening

- Select the 'reason for screening'
 - Users with an existing Medicaid Provider ID should select 'I am an enrolled provider in Florida Medicaid'
 - Users applying for a new Medicaid Provider ID should select 'I am a new applicant to Florida Medicaid'

Select Role/Provider Information

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role:

* Provider Type:

* Reason for Screening:

* Medicaid Provider ID/ATN:



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Enter Medicaid Provider ID/ATN

- Enrolled Medicaid providers should enter their Medicaid Provider ID
- New applicants to Florida Medicaid should enter the Application Tracking Number (ATN) received from the online Medicaid provider application wizard*

Select Role/Provider Information

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role:

* Provider Type:

* Reason for Screening:

* Medicaid Provider ID/ATN:

* New Medicaid enrollees must start their Medicaid application to obtain an ATN before registering for the Medicaid view of the Clearinghouse Results Website; Medicaid's online provider enrollment wizard takes preliminary information and pends the application until Medicaid receives the related screening results. Visit this link to access the Medicaid provider enrollment wizard:
https://portal.flmmis.com/flpublic/Provider_ProviderServices/Provider_Enrollment/tabid/42/desktopdefault/+Default.aspx



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Search Provider

- Click 'Search Provider'
- Review the provider information in the search result list
- To add the provider to your request list select 'Add;' to remove the result and search for a different provider select 'Remove'

Select Role/Provider Information

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role:

* Provider Type:

* Reason for Screening:

* Medicaid Provider ID/ATN:

Search Result:

Provider Name	City	Medicaid Provider ID/ATN		
Test Pharmacy Inc.	SARASOTA	123456	Add	Remove



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Submit User Agreement

- Review the 'Requested Provider' information to ensure you have selected the correct Provider Name and ID
- If correct, select "Submit Request and Generate User Agreement;" if not, click 'Delete' and search for a new provider

Background Screening Clearinghouse Program - Florida
Medicaid - Request for Program Access

User ID: Medicaid.Test
Email: MedicaidScreening@ahca.myflorida.com

Select Role/Provider Information

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role:

* Provider Type:

* Reason for Screening:


* Medicaid Provider ID/ATN:

Requested Provider:

Requested Provider:

	Provider Name	City	Medicaid Provider ID/ATN
Delete	Test Pharmacy Inc.	SARASOTA	123456

If the requested Provider is correct, select "Submit Request and Generate User Agreement". If not, click [Delete](#) and search the appropriate Provider.





Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Submit Request and Generate User Agreement

- After adding the correct provider, click the 'Submit Request and Generate User Agreement' button
- Users must submit a separate user agreement for each State agency/program view added to a user account; the agreement is unique to the agency and the provider

Background Screening Clearinghouse Program - Florida
Medicaid - Request for Program Access

User ID: MedicaidTest
Email: MedicaidScreening@ahca.myflorida.com

Select Role/Provider Information

A role is necessary in order to obtain proper access. Select the role that best describes your affiliation.

Medicaid Provider - I have controlling interest in, or am a managing employee of, a provider seeking enrollment in Florida Medicaid.

Select the most appropriate role from the drop down list below. After you have made your role selection, you will need to select a Provide Type.

* Role: Medicaid Provider

* Provider Type: -- Select Provider Type --

* Reason for Screening: -- Select Reason --

* Medicaid Provider ID/ATN:

Requested Provider:

Requested Provider:

Provider Name	City	Medicaid Provider ID/ATN
Delete Test Pharmacy Inc.	SARASOTA	123456

If the requested Provider is correct, select "Submit Request and Generate User Agreement". If not, click [Delete](#) and search the appropriate Provider.

Return to Portal Landing

To open a printable copy of the User Agreement, click [here](#).



Background Screening (BGS)

Medicaid Provider User Registration Agreement

Scan and E-Mail to:
medicaidscreening@ahca.myflorida.com
Subject Line: BGS Provider User Agreement

User Information:

User Name: MEDICAID TEST User ID: MedicaidTest
Employer Name:
Address: 123, CITY, FL 33333
E-Mail Address: MedicaidScreening@ahca.myflorida.com Phone Number: (850) 555-5555

Selected Provider:

Medicaid ID/ATN: 123456
Provider Name: Test Pharmacy Inc.
Address: 123 Lane, City, FL 33333
Phone Number: (850) 555-5555 Fax Number: (850) 555-5555
Authorized Rep: Provider Type: PHARMACY

You may email the agreement to Medicaid Provider Enrollment for approval. Your request for access to the Clearinghouse results website will be in Pending status until staff receives and processes your user registration agreement.

IMPORTANT – Please note that an email will be sent to the email address on file (the email entered in the 'Email Address' field at user account registration) once your request for access has been approved.



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Pending Account Status

- Until Medicaid receives the user agreement with required attachments and approves the new Medicaid program access, the account will remain in 'pending' status
- When the status changes to 'approved' the user can access Florida Medicaid's view of the Clearinghouse to initiate Medicaid screenings and view Medicaid screening requests and results

Background Screening Clearinghouse Program - Florida Medicaid User ID: Medicaid.Test
- Access Page Email: MedicaidScreening@ahca.myflorida.com

Select Your Desired Task Below

[Add Additional Providers](#)
[Reprint User Registration Agreement](#)

List of Providers

Select providers from this list for reprinting specific user agreements. Selecting none will print all of them.

Provider Name	City	Status	Medicaid Provider ID/ATN
<input type="checkbox"/> Test Pharmacy Inc.	SARASOTA	Pending	123456

[Return to Portal Landing](#)



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Adding Medicaid Program Access

Dual Program Access

- Links to program access for both DCF (DCF/APD) and Medicaid will now display on the portal landing page
- When the user receives an email indicating 'Your Request for Access to <username> Has Been APPROVED', program access is active
- To request screenings for Medicaid provider enrollment or renewal, click the 'Background Screening Clearinghouse – Florida Medicaid' link
- To request APD-required screenings, click the 'Background Screening Clearinghouse – Department of Children and Families' link

AHCA Portal - Portal Landing User ID: ahcalpha.jb
Email: backgroundscreening@ahca.com

Program Access

Select the appropriate link below to be directed to the Program's access page.

[Background Screening Clearinghouse - Department of Children and Families](#)

[Background Screening Clearinghouse - Florida Medicaid](#)
Florida Medicaid

Request Program Access

Choose from the list of programs below and select "Request Program Access".

Manage Account

[Edit User Information](#)
[Change Password](#)
[Update Security Question and Answer](#)



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Screening Under the Correct Program

Application Access Page

- Click on the 'Background Screening Clearinghouse' link
- The system will direct the user to the application landing page, as shown in the 2nd screen shot
- Select the 'agency' for this session

Background Screening Clearinghouse Program AHCA - Access Page User ID: ahcalpha.jb
Email: backgroundscreening@ahca.com

Background Screening Clearinghouse Application Access
[Background Screening Clearinghouse](#)
Click the link above to access the Background Screening Clearinghouse results website.

Select Your Desired Task Below
[Add Additional Facilities](#)

List of Providers
If you need to reprint a user agreement
If you select Reprint Registration Agreement

Provider Name
 COMPREHENSIVE PSYCH

Agency for Health Care Administration

[Home](#) [Search](#) [Initiate Screening](#) [Screenings in Process](#) [Screening Results](#) [Livescan](#) [Employee/Contractor Roster](#) [Log Out](#)

Select Agency For This Session

If you have any background screening questions or issues please [contact us](#). ahcalpha.jb



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Screening Under the Correct Program

Home Tab

- If the user selects the 'FL Medicaid' agency-view, the header will display 'Agency for Health Care Administration'
- If the user selects the 'Department of Children and Families' agency-view, the header will display 'Department of Children and Families'
- The user may select to switch agency views from any screen

Department of Children and Families

Home Search Initiate Screening Screenings in Process Screening Results Livescan Employee/Contractor Roster Log Out

Switch Agency View

Home

Welcome to the Care Provider Background Screening Clearinghouse (Clearinghouse) results website. This secure site allows you to search existing screenings processed through the Clearinghouse, initiate a new screening, locate a Livescan service provider, track and review screening results you have requested, and maintain employment statuses of your applicants. The links provided above will assist you in navigating the site.

For instructions on using the website please review the [Clearinghouse Instruction Guide](#)

Bulletins

All persons subject to screening will be required to be rescreened every five years.

- Individuals for whom the last screening was conducted on or between 1/1/2024 and 1/31/2024
- Individuals for whom the last screening conducted was between 2/1/2024 and 2/28/2024
- Individuals for whom the last screening conducted was between 3/1/2024 and 3/31/2024

Agency for Health Care Administration

Home Search Initiate Screening Screenings in Process Screening Results Livescan Employee/Contractor Roster Log Out

Switch Agency View

Home

Welcome to the Care Provider Background Screening Clearinghouse (Clearinghouse) results website. This secure site allows you to search existing screenings processed through the Clearinghouse, initiate a new screening, locate a Livescan service provider, track and review screening results you have requested, and maintain employment statuses of your applicants. The links provided above will assist you in navigating the site.

For instructions on using the website please review the [Clearinghouse Instruction Guide](#)

Provider Information

██████████ L HOSPITAL License Number: ██████████
██████████, BOONVILLE, FL
██████████ BOONVILLE, FL 32424



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Screening Under the Correct Program

Screenings In Process Tab

- In general, aside from the header, most screens will look the same in the DCF/APD and Medicaid system views; there are a few screens with notable differences
- The 'Screenings In Process' tab shown below, displays screenings that have been requested by each provider associated with the selected agency view in the 'Screenings List' table; the system will only display screenings that have been requested from the selected agency view, even if the provider is associated with both DCF/APD and Medicaid

Home Search Initiate Screening **Screenings In Process** Screening Results Livescan Employee/Contractor Roster Log Out

Screenings In Process [Switch Agency View](#)

This page provides a listing of your screening requests and the current status. A request will remain on the list for 7 days once a determination is made. You may also filter the list using the fields below. If you wish to no longer receive notification on an individual request select "Remove". The request will be removed from your listing however the screening process will continue.

Search Options

Provider:

Last Name:

Screening Status:

Submitted Date: To:

Screenings List

Last Name	First Name	SSN	Screening #	Submitted	Provider	Position	Screening Status	Updated	Action
SMITH	SAM	XXX-XX-4251	785031	04/20/2015	CALHOUN GENERAL HOSPITAL - 20389100	Controlling Interest with 5% or more interest	Awaiting Fingerprints	04/20/2015	Remove Request Fingerprint Form

Displaying items 1 - 1 of 1



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Screening Under the Correct Program

Screening Results Tab

- The 'Screening Results' tab has similar differences to those noted on the 'Screenings in Process' tab; the system will only display screening results for those screenings requested under the selected agency view
- To view screening results for screenings requested from another agency/program, the user must 'switch agency view'

Home Search Initiate Screening Screenings in Process **Screening Results** Livescan Employee/Contractor Roster Log Out

Screening Results [Switch Agency View](#)

This page provides a listing of screening requests with final determinations. Select the last name of the individual in the list below to open the Profile page. From the Profile page you may review the individual's information and enter a hiring decision by selecting "Add Employment/Contract Record". You may also print a copy of the profile for your personnel files.

Filter Options (Fields with an (*) are required)

Provider:

Last Name:

Determination Status:

Eligibility Determination Date: to

* Screening Purpose:

Search

Screenings List

Last Name	First Name	SSN	Screening Purpose	Determination	Eligibility Determination Date	Action
No Screening Results found						
« ‹ › »						
Displaying items 0 - 0 of 0						

- Connected screenings

Print All



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Screening Under the Correct Program

Person Profile – Eligibility Table

- Each person profile displays an 'eligibility table' with different 'eligibility types' for each agency view; the screen shot below displays the AHCA eligibility types; APD MW providers should review the screening/eligibility status for 'Medicaid Provider Enrollment' to identify the status of Medicaid requested screenings
- For more information on DCF/APD and Medicaid eligibility types, see the DCF/APD or Medicaid Clearinghouse Results Website Guide at this link: http://ahca.myflorida.com/MCHQ/Central_Services/Background_Screening/BGS_results.shtml

Person Profile [Switch Agency View](#)

First Name: JENNIFER Middle Name: Last Name: LOPEZ1 Aliases: SSN: XXX-XX-0001 Date of Birth: 12/24/1972 Place of Birth: Georgia	Address Line 1: 123 LANE Address Line 2: City: CITY State: Florida ZIP: 33333 County: Prior States:	Sex: FEMALE Race: WHITE Hair Color: Brown Eye Color: Hazel Height: 5' 05" Weight: 150 lbs.	
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[Edit](#)

Screenings in Process

Screening #	Provider	Submitted Date	Status	Status Date	Action
781222		01/22/2015	Determination Made	01/22/2015	Reprint Privacy Policy

Provider: [Connect to Screenings](#) [Initiate New Screening](#) [Initiate Resubmission](#)

Retained Prints Expiration Date: 1/22/2020
Clearinghouse Screening Available?: No

Agency for Health Care Administration Eligibility

Type	Item	Status	Eligibility Determination Date
Employment	Medicaid / Medicare Participating Provider	Eligible	1/22/2015
Employment	Non-Medicaid / Medicare Participating Provider	Eligible	1/22/2015
Position	Medicaid Provider Enrollment	A New Screening is Required	
Position	AHCA Provider/Facility Licensure	Eligible	1/22/2015



Clearinghouse Results Website Advanced User Registration Guide

APD/Medicaid Screenings – Technical Assistance

Requesting Assistance with Clearinghouse Results Website Registration and Use

- For technical support, click on the 'Contact Us' link at the bottom of each screen in the application

If you have any background screening questions or issues please [contact us](#).