Title 42 CFR Part 455, Subpart B, requires providers to disclose all entities and individual persons with five (5) percent or greater ownership or controlling interest in the provider, plus all managing employees. It further requires that all disclosed individuals must consent to criminal background checks, including fingerprinting, when required to do so under state law or by level of screening based on risk of fraud, waste, or abuse to the Medicaid program.

New and renewing providers must begin the criminal background check process in the Care Provider Background Screening Clearinghouse (Clearinghouse), the Agency's centralized screening database. Registration with the Clearinghouse is required to access it. First time applicants must submit their Florida Medicaid enrollment application and receive their Application Tracking Number (ATN) before initiating the criminal background check process in the Clearinghouse.

This document features the frequently asked questions (FAQ) for clearinghouse Registration, Renewal, LiveScan, and Out-of-State Providers. Click on any of these hyperlinks to access the desired section.

Commonly Asked Registration Questions

How do I obtain access to the Clearinghouse?

Only Florida Medicaid providers with an active provider ID (PID) or applicants who have initiated an application via the Online Enrollment Wizard can register with the Clearinghouse. After creating an Enrollment Application Tracking Number (ATN), new provider applicants must allow 24-48 hours before they are able to initiate the Clearinghouse registration process.

Providers must create an AHCA Portal user account before they can proceed with requesting access to the Clearinghouse results website. Click on the New User Registration link on the AHCA Portal Login page. Once the AHCA Portal account is successfully created, providers should request Florida Medicaid program access for the Clearinghouse website by logging into the AHCA Portal and selecting Florida Medicaid from the Request Program Access section.

As part of the registration process, each provider will create a Medicaid Provider User Registration Agreement (User Agreement), which must be printed, signed, and submitted to Florida Medicaid for review and approval. Providers will receive an email confirmation of the User Agreement, once access is approved and must allow 24-48 hours before accessing the Clearinghouse results website.

How do I Minimize User Agreement Rejections and Delayed Notifications?

To ensure that the User Agreement does not receive a rejection or any delayed notifications, please keep the following in mind:

- Each user must create her or his own individual account.
- Note: Users who have accounts for other purposes, such as Department of Health practitioner licensing or Agency for Health Care Administration facility licensure, must still create an account for Florida Medicaid provider screenings.
- The user on the user agreement must be an individual, not an entity, and must list her or his first and last names.
- The user’s email address must be a valid email address. The email address is used by the Clearinghouse to deliver confirmation of registration to the user.
- The user and an authorized representative of the provider must sign the user agreement.
The authorized representative for an individual provider is the provider. The representative for an entity can be an owner, officer, or managing employee. The representative must be listed on the new or renewing Medicaid provider application or on the provider record in the Medicaid system.

**Who is able to sign the User Agreement?**

Only an authorized representative may sign the user agreement. The authorized representative’s name must be printed above her or his signature.

Note: The authorized representative for an individual provider is the provider. The representative for an entity can be an owner, officer, or managing employee. The representative must be listed on the new or renewing Medicaid provider application or on the provider record in the Medicaid system.

**What is the next step after I successfully submit the User Agreement?**

You will need to access the Clearinghouse website by visiting the [Agency Clearinghouse landing page](#).

**What is the Clearinghouse used for?**

- Medicaid providers and new applicants with access to the Clearinghouse will be able to:
  - Initiate a new screening;
  - Initiate an Agency Review of an existing screening record;
  - Search LiveScan providers and make appointments;
  - Verify existing background screening statuses; and
  - Resubmissions / Renewals.

**Are there any materials available to which I may refer before obtaining access to the Clearinghouse?**

Yes! From the Agency’s Background Screening page, on the left-hand side of the page, in the navigation for Clearinghouse, click Instruction Guides. The guides include very useful training videos, registration guides, and website guides available for your use at any time.

**Help, I forgot my password! How can I reset it?**

Select the Forgot Your Password? link on the [AHCA Portal Login page](#). Follow the prompts to reset your password.

**Who can sign the Background Screening User Registration Agreement?**

The requestor and the provider, if different from the requestor, must sign the user agreement.
Commonly Asked Screening Questions

How can I initiate a screening for individuals linked to a group?

Use the individual's ATN/PID to initiate a screening. The Group PID can only be used for initiating a screening for an owner/operator of the specific group.

How can I add employees and initiate screenings for them in the Clearinghouse website?

After logging in on the AHCA portal landing page, select Add Additional Providers. You must then select the individual's desired role, the provider type, the reason for screening, and the Medicaid PID/ATN. After this information is entered for the provider, select the Submit Request and Generate User Agreement button.

Note: The person being added must be listed as an owner/operator of the PID/ATN.

After I submit the user agreement, is there anything else I need to do?

Once access is granted, users may search for BGS results, initiate new screening, initiate agency review, confirm privacy policy, select a LiveScan service provider, and connect to the LiveScan service provider’s website to schedule appointments, and create and maintain an employee roster.

What do I do now that the Agency review is done?

Once the results determination status has updated to show “Eligible”, you will need to print off your results and upload them to your Medicaid application for processing.

Note: Manual updates are not electronically forwarded to Medicaid.

How will the Agency receive screening information after I have access to the Clearinghouse?

Results for background screenings will only be delivered to the agency under which the user logs in. To ensure screening results are delivered to Florida Medicaid, create an account and select Florida Medicaid from the Program Access section and under Select Agency For This Session. Be sure to select Florida Medicaid each time you log in to request screenings for Medicaid provider enrollment applications.

What if the screening in the Clearinghouse has NOT been submitted?

If an individual has an Eligible screening in the Clearinghouse with their photo for another agency other than Florida Medicaid, such as for licensure or employment, the provider does not have to submit new fingerprints. As long as they are registered as a Medicaid user they may request an agency review for Medicaid provider enrollment at no cost.

How do I apply for an exemption from disqualification?

Visit the Agency’s Background Screening page. On the left-hand side of the page, under the Screening category, click the Exemption from Disqualification link. The Agency’s Exemption from Disqualification page contains an exemption from disqualification FAQ, application, and other supplemental information.
I keep receiving a message stating the screening is already in process. What should I do?

Return to the AHCA portal landing page and check, under Program Access, that Background Screening Clearinghouse-Florida Medicaid shows.

Note: If you do not have program access for Florida Medicaid, you will not be able to perform certain functions in the Clearinghouse.

Will the screening have any effect on my application?

Receipt of new background screening results triggers a report, which notifies the provider enrollment staff when new results are received. Any applications associated with the results are added to the work queue of pending applications, which are worked in the order received.

Note: Some applications have additional eligibility checks to complete after background screening results are received and prior to approval of the Medicaid ID. Different variables can delay the posting of background screening results. These include, but are not limited to, missing social security number, spelling discrepancies, missing photo, and disclosure of a criminal history.

How long is the wait time for an Agency review?

Please contact the Agency for Clearinghouse-related inquiries. Email at: BGScreen@ahca.myflorida.com or by phone at (850) 412-4503.

Commonly Asked Renewal Questions

What are the rescreening requirements?

Current rescreening requirements are every five (5) years. For example, a completed background screening through the Clearinghouse in 2016, will garner a renewal date in 2021. A reminder email will be sent as the required renewal date nears.

Will I need to submit a new photo and new fingerprints?

If the previous screening and photo are in the Clearinghouse, there is no need to revisit a LiveScan vendor at renewal. The screening can be initiated in the Clearinghouse at a reduced fee.

Will I need to obtain a new ATN or PID for the renewal process?

No. ATNs are for new applicants and PIDs are for providers already enrolled.

Commonly Asked LiveScan Questions

Can I opt out from submitting required information electronically?

The Agency requires that all Level 2 screening requests be submitted electronically. LiveScan sites and LiveScan devices are required to capture and transmit the applicant’s photograph and fingerprints to the Agency.
I have uploaded information to LiveScan prior to registering with the Clearinghouse. Do I have to enter that information again?

If the information was uploaded to a clearinghouse compliant vendor on or after March 1, 2015 and used the New Originating Agency Identification (ORI) number (EAHCA013Z), the results will be available in the Clearinghouse.

**Commonly Asked Questions for Out-of-State Applicants**

Where can out-of-state applicants find more information on the application process? Please visit the [Agency’s Background Screening page](#), and find the [Additional Information](#) section near the bottom left. Click the [Out of State Applicants](#) link.

What contact information should out-of-state applicants use if they prefer to communicate via phone or email?

The [Agency’s Background Screening page](#) contains the most current contact information applicants should reference.