MEMORANDUM

Notice #: 082515-1-I-SCBS

TO: Area Agency on Aging Executive Directors

FROM: Samuel P. Verghese, Secretary

DATE: August 25, 2015

SUBJECT: Notice of Instruction: Background Screening Clearinghouse Results Website Pre-Registration

The purpose of this Notice is to provide information concerning the Department of Elder Affairs’ (Department) entrance in the Agency for Health Care Administration’s (AHCA) Background Screening Clearinghouse Results Website (Clearinghouse). The Department and AHCA are working diligently for a September 14, 2015, start date.

Providers must be registered with the Clearinghouse prior to referring the employee/volunteer or potential employee/volunteer for fingerprinting. Provider pre-registration begins on August 28, 2015.

The following information is pertinent to the pre-registration process:

- Starting August 28, 2015, pre-registration for the Clearinghouse will be available. The Department is listed as DOEA.
- The Department and AHCA strongly encourage all providers to PRE-REGISTER starting August 28, 2015.
- Registration for the Clearinghouse is free and is available at https://apps.ahca.myflorida.com/SingleSignOnPortal.
- The current Originating Agency Identification (ORI) Number FL924310Z will be turned off permanently on August 28, 2015, two weeks prior to the Department’s entrance into the Clearinghouse.
- Any use of the old ORI number on or after August 28, 2015, will incur additional fees to the entity requesting the screening.
- As of September 14, 2015, the Department will begin using the new ORI number EDOEA310Z.
2. Click on the link for “New User Registration.”
3. Check the box for user Authorization and click the “Continue” button.
4. Fill out the information fields to create your account:
   a. Important note: the email address entered on this page will be used for all future user account notifications and background screening notifications.
5. Click the “Register” button.
6. Click the “Return to Login” button on the next screen.
7. Log in using the username and password you created.
8. Select “Department of Elder Affairs – DOEA” from the “Select Program” drop down list and click “Request Program Access.”
9. Select “Provider” from the “Role” drop down list.
10. Select “DOEA” from the “Provider Type” dropdown list.
11. Begin typing the name of the provider you represent.
12. Select the “Provider” from the list when it appears, and be sure your OCA number matches.
13. Click “Add Provider” button.
14. Repeat steps 10-12 for additional providers you represent, if applicable.
15. Click “Submit Request and Generate User Agreement.”
16. Review the user registration agreement that opens in the next window.
17. Print the agreement by clicking the “Here” link in the upper-right-hand corner of the window under your email and user ID.
18. Sign the agreement and have your owner/administrator/supervisor sign it.
19. Send the agreement and a copy of your driver’s license or state-issued photo ID to DOEA in one of the following ways:

   **Mail To:**
   Florida Department of Elder Affairs Background Screening Unit
   4040 Esplanade Way
   Room 335U
   Tallahassee, FL 32399-7000

   **Scan and E-Mail To:**
   doeanetwork@elderaffairs.org

   **Fax To:**
   (850) 617-6595

   **Subject Line:** BGS User Agreement
Please note these additional important details for the pre-registration process:

- The Department will finalize provider registration from the Clearinghouse on or by September 14, 2015. Providers will receive an email when their registration is complete with a link to the Clearinghouse and training materials.
- Entities may begin using the Clearinghouse to search for applicants, initiate screenings, and check eligibility determinations upon receiving the registration approval email.
- As a reminder, all individuals who meet the definition of Direct Service Provider as per Section 430.0402(1)(b), Florida Statutes (F.S.) must be screened through the Clearinghouse.

**Direct Service Provider:** “means a person 18 years of age or older who, pursuant to a program to provide services to the elderly, has direct, face-to-face contact with a client while providing services to the client and has access to the client’s living areas, funds, personal property, or personal identification information as defined in s. 817.568. The term includes coordinators, managers, and supervisors of residential facilities and volunteers.” (Section 430.0402(1)(b), F.S.)

**Personal Identification Information:** “means any name or number that may be used, alone or in conjunction with any other information, to identify a specific person, including any:

1. Name, postal or electronic mail address, telephone number, social security number, date of birth, mother’s maiden name, official state-issued or United States-issued driver license or identification number, alien registration number, government passport number, employer or taxpayer identification number, Medicaid or food assistance account number, bank account number, credit or debit card number, or personal identification number or code assigned to the holder of a debit card by the issuer to permit authorized electronic use of such card;
2. Unique biometric data, such as fingerprint, voice print, retina or iris image, or other unique physical representation;
3. Unique electronic identification number, address, or routing code;
4. Medical records;
5. Telecommunication identifying information or access device; or
6. Other number or information that can be used to access a person’s financial resources.” (Section 817.568(1)(f), F.S.)

Please note that the Department does not have the authority to background screen individuals who do not meet the “Direct Service Provider” definition.

If you have any questions pertaining to this Notice, please contact the Background Screening Unit at (850) 414-2093 or via email at doeannetwork@elderaffairs.org. Thank you for your cooperation.