

TABLE OF CONTENTS

Certification Portal Counselor User Overview.....	2
New Counselor User	2
Counselor Profile	4
Badge Photo and Written/Spoken Languages.....	7
Counselor Agreement.....	9
Background Clearance.....	10
Criminal Disclosure	10
Background Check	16
Certification Training	20
Additional Counselor Actions	22
Viewing Contact.....	22
Counselor Withdrawal Request.....	25

CERTIFICATION PORTAL COUNSELOR USER OVERVIEW

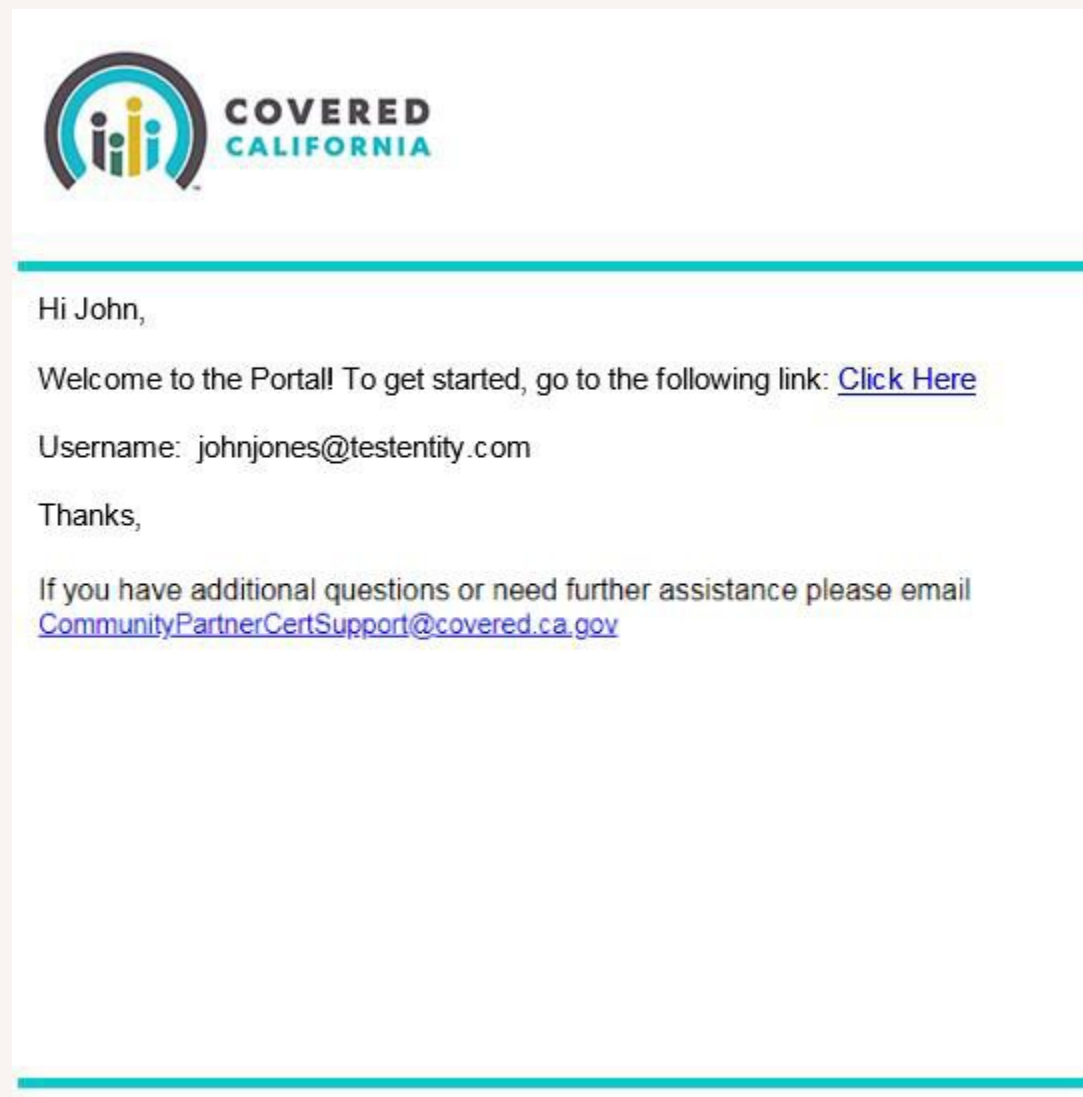
This document outlines all features and functions available to Counselors in the Certification Portal. It also details the functions for a Counselor User, such as the profile completion, background clearance, and training.

NEW COUNSELOR USER

The Primary or Authorized Contact listed on the entity roster is responsible for creating the Counselor user account. You will receive an email from the Certification Portal that looks like the following:

Email Subject: **Welcome to the Certification Portal**

Email Body:



When you click on the hyperlink provided in the email it will take you to a login screen. There you will be prompted to set a password for your new account. When the Change Password button is pressed, you will be logged into the system.



 **COVERED CALIFORNIA**

Change Your Password

Enter a new password for **i2124157@mvht.net**.
Your password must have at least:

- ✓ 10 characters
- ✓ 1 letter
- ✓ 1 number

* New Password

***** Good

* Confirm New Password

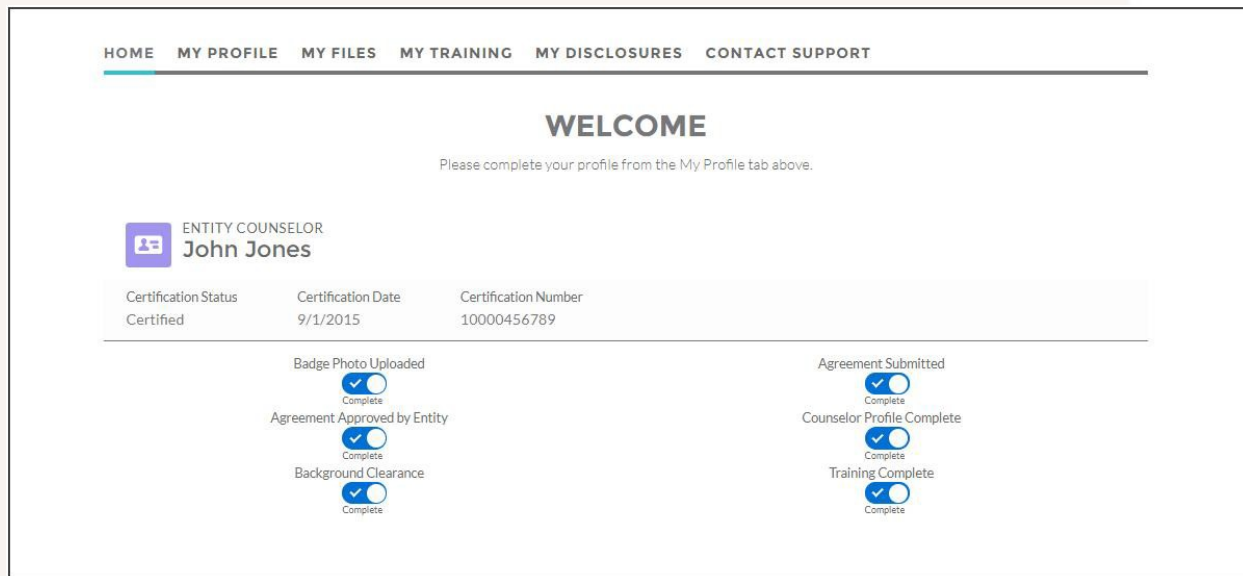
***** Match

Change Password

Password successfully changed on 7/13/2017 4:29 PM

COUNSELOR HOMEPAGE

Once logged into the system, you will be presented with the homepage welcome screen. Here you will find high-level information regarding your certification status and important information to help you fulfilling your duties as a certified counselor.



The screenshot shows the Counselor Homepage. At the top is a navigation menu with links: HOME, MY PROFILE, MY FILES, MY TRAINING, MY DISCLOSURES, and CONTACT SUPPORT. Below the menu is a "WELCOME" heading followed by the instruction "Please complete your profile from the My Profile tab above." The user's name, "John Jones", is displayed as an "ENTITY COUNSELOR". Below this is a table with certification details:

Certification Status	Certification Date	Certification Number
Certified	9/1/2015	10000456789

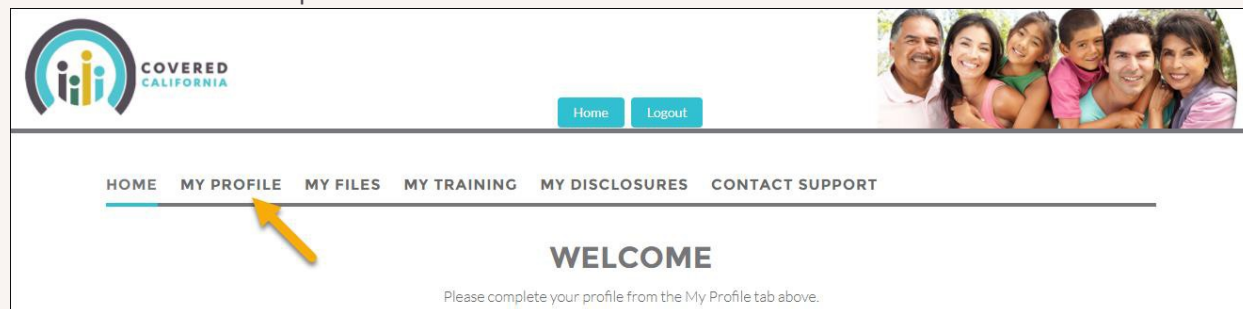
Below the table are two columns of progress indicators, each with a blue checkmark and the word "Complete":

- Badge Photo Uploaded
- Agreement Approved by Entity
- Background Clearance
- Agreement Submitted
- Counselor Profile Complete
- Training Complete

NOTE: New counselors will have no blue check marks on their page. Required items will begin to be checked off as the certification process steps are completed.

COUNSELOR MY PROFILE

Navigate to the "My Profile" tab to complete the information necessary for the counselor certification process.



The screenshot shows the Counselor My Profile page. At the top left is the Covered California logo. To the right are "Home" and "Logout" buttons. Below the navigation menu, the "MY PROFILE" tab is highlighted with a yellow arrow. The "WELCOME" heading and the instruction "Please complete your profile from the My Profile tab above." are visible below the navigation menu.

IMPORTANT:

Active and Certified counselors ARE NOT REQUIRED to complete a NEW application in the Certification Portal. Please skip to page 20 to view additional counselor actions in the Certification portal.

NEW counselors looking to become certified for the first time:

1. The first step is to populate all required fields in the Details section (Note: the fields in grey are pre-populated by the Primary / Authorized Contact person. Once completed, click on the 'save' icon button located on the top right corner of the section panel, or by clicking the 'Save Details' button at the bottom of the page.

HOME MY PROFILE MY FILES MY TRAINING MY DISCLOSURES CONTACT SUPPORT

John Wayne Medical Center
Counselor Information

[Manage Counselor](#)

CERTIFIED APPLICATION ENTITY

Save Button

Please hover over the ⓘ icon for more information about an item

Details ⓘ

CA Driver's License Number or State ID *
D2985436 ⓘ

ID Type *
CA Drivers License Number ⓘ

Legal First Name *
John ⓘ

Legal Last Name *
Jones ⓘ

Email *
jjones@jmedical.com ⓘ

Business Phone *
111-222-3333 ⓘ

Other Phone
222-333-4444 ⓘ

Birthdate *
Apr 16, 1970 ⓘ

Sites served by this individual *

-- Select --

Main Location

Profile Information ✔

* Are you licensed in good standing as an Agent with the California Department of Insurance (CDI)?
 ⓘ

* Insurance License Number
 ⓘ

* Expiration Date
 ⓘ

* Have you previously been certified by Covered California to serve in an enrollment function for the Exchange?
 ⓘ

Note: Make sure to fill out all required fields, which are marked with a red asterisk, before submitting. Any missing fields will result in a delay in the certification process.

2. Next, fill in the **Personal Mailing Address** fields.

Personal Mailing Address Save Button ⓘ

Mailing Street *
 ⓘ

Mailing City *
 ⓘ

Mailing State/Province * ⓘ Mailing Zip/Postal Code * ⓘ

- The next step is to complete the Profile Information section. You must upload your badge photo and select your written and spoken language(s).

Follow these guidelines when uploading your badge photo:

- Photo must be a passport-style, front facing photograph, which does not include sunglasses or hats, and provides a full-uncropped view of the individual’s face.
- Photo must be high quality and in color.

Profile Information ✓


A passport-style photo is required for all counselor badges.


Helpful Tips:

- o Photo must be passport-style, front facing, not include sunglasses or hats, and provide a full-uncropped view of the individual's face.
- o Photo must be high quality and in color.
- o Counselors are required to wear their badges at all times while carrying out enrollment activities.

Upload Badge Photo

Or drop files



 Badge Photo

Indicate which languages, both spoken and written, that the individual can speak and/or write fluently.

Languages Spoken *
(Ctrl+Click to select multiple)

Dutch

English

Farsi

Written Languages *
(Ctrl+Click to select multiple)

Cantonese

English

Farsi

Note: Counselors are always required to wear their badges while carrying out enrollment activities.

4. The Required Documentation section includes documents that need to be submitted for review and are a vital piece to becoming a certified counselor. This section includes the Counselor Agreement, Criminal Record Disclosure, and the Live Scan Forms.

Required Documentation

Certified Application Counselor (CAC)

Each individual counselor candidate must sign the pre-populated Certified Application Counselor Application/Agreement, including Conflict of Interest Disclosure section of the agreement. Complete the CAC pre-populated Application/Agreement by selecting the button below.

[CAC Agreement](#)

Criminal Disclosure

Each individual applying to become a Counselor must complete and submit a Criminal Disclosure form. This form is to be completed by the individual applying to become a Counselor.

[New Criminal Disclosure](#)

Background Check

[Download Live Scan Form](#)

The Entity must send Counselor candidates to a Covered California approved Live Scan provider for fingerprinting and criminal record check. The Entity must provide two pre-populated Live Scan Forms to Counselor candidate and advise Counselor candidate that the pre-populated Live Scan form is the required form to provide to the Live Scan vendor and only acceptable form to present to the Live Scan vendor. The pre-populated Live Scan form authorizes the Live Scan vendor to perform the fingerprinting service for the Counselor candidate. Any other downloaded Live Scan form other than the pre-populated Live Scan form from the Entity is not acceptable. Forms can be generated in IPAS in the counselor grid as shown above. Upon completion of the form, the applicant should call the fingerprinting facility to schedule a fingerprinting appointment. For a list of locations, download the service locations using the following link: <http://capitalivescan.com/walk-in-locations>

Note: The next section displays a walkthrough for each document and how it is submitted. If these documents are not completed within 30 calendar days from the start of process, your profile will not be reviewed per the California Code of Regulations [§ 6856. Certified Application Counselor Application. Subsection \(a\)\(2\)\(B\).](#)


COUNSELOR AGREEMENT

If your entity requires a Counselor Agreement, click on the Certified Application Counselor agreement below.

1. Click on the “CAC Agreement” button to access the Counselor Agreement and submit the document for review.

Certified Application Counselor (CAC)

Each individual counselor candidate must sign the pre-populated Certified Application Counselor Application/Agreement, including Conflict of Interest Disclosure section of the agreement. Complete the CAC pre-populated Application/Agreement by selecting the button below.

 [CAC Agreement](#)

2. Ensure that you read the full agreement before electronically signing and filling out the disclosure statements for review. When you are ready to sign the agreement, populate the required fields at the bottom of the document. Once saved you will be directed back to your profile.

By electronically signing this Agreement, each party agrees to comply with the applicable terms, conditions, and certifications set forth therein.

Certified Application Entity Name:	John Wayne Medical Center
Certified Application Entity ID:	001r0000007JBUA2
Certified Application Counselor Name (print):	John Jones
Certified Application Counselor Initials:	<input type="text"/>
Signature Date:	8/14/2017 8:20 AM

Attachment 1

Compliance with Conflict of Interest Standards California Code of Regulations, Title 10, Section 6866

1. Disclose any lines of insurance business not covered by the restrictions on participation and prohibitions on conduct contained in Section F which you intend to sell while carrying out consumer assistance functions. If you do not have anything to disclose you must state that below.

2. Disclose any existing employment relationships, or any former employment relationships within the last five years, with any health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance, including any existing employment relationships between a spouse or domestic partner and any health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance. If you do not have anything to disclose you must state that below.

3. Disclose any existing or anticipated financial, business, or contractual relationships with one or more health insurance issuers or issuers of stop loss insurance, or subsidiaries of health insurance issuers or issuers of stop loss insurance. If you do not have anything to disclose you must state that below.

If you have no information to disclose, please enter “No information to disclose” in the appropriate disclosure field.

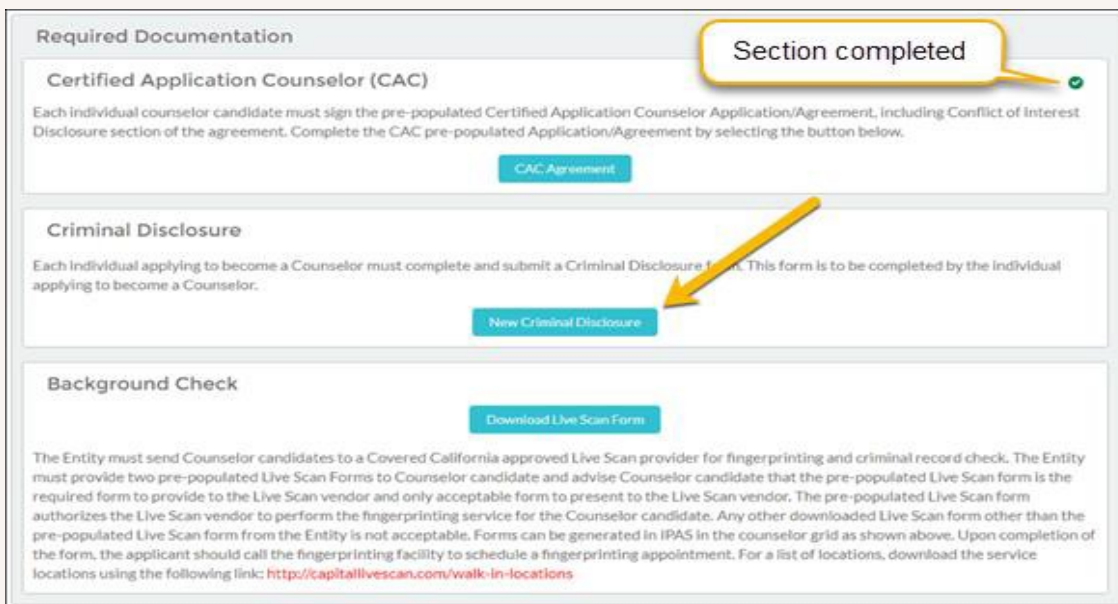
Note: If you are submitting a new Agreement after the initial one, make sure to click the “Submit for Approval” button in the upper right corner of the page that is displayed after saving the new Agreement. A CAC/CEC Agreement will be rejected if a counselor enters “Initials”, “N/A”, “None”, or “0” instead of entering “No information to disclose”.

BACKGROUND CLEARANCE

The Counselor background clearance process consists of two documents that are located on the Counselor profile. These items must be submitted to Covered California to be reviewed and approved as part of the Counselor certification process. An applicant cannot qualify to become certified counselor until they submit the Background Clearance documents.

CRIMINAL DISCLOSURE

1. Click on the “New Criminal Disclosure” button. See screenshot below.



2. When you click on the “New Criminal Disclosure” a pop-up will appear with the blank electronic document. The required fields in the form must be filled out and submitted to Covered California for review.

Create Criminal Record Disclosure: New Disclosure

A. Personal Information

Verify your name is populated

* Counselor Name Social Security Number

Instructions and Background Clearance Requirements

1) Carefully read all instructions

In order to become a Certified... law requires that you complete a background check (Government Code section 1043) and fill out this form (California Code of Regulations, Title 10, Section 6654(d)(8)). Covered California (CC) submits your fingerprints to the Department of Justice (DOJ) to obtain a criminal history report. The DOJ criminal history report is compared to your Criminal Record Disclosure (CRD) to identify discrepancies, inconsistencies, or omissions. CC will evaluate the criminal history report, including any information you provide in and with the CRD to make a determination of your eligibility to provide consumer assistance. Failure to complete the CRD in its entirety may delay the certification process and candidates will be required to resubmit prior to completing the certification background clearance.

Create Criminal Record

Provide details on each offense

III)

If you answered YES to any of the above questions, give details indicating the date and location of each crime or administrative action and, if desired, the nature and circumstances of the offense. If you need additional space or have more offenses or administrative actions to declare, you must use additional sheets and upload them to this record after saving. Once you are ready to submit the disclosure, click the Submit for Approval button.

FIRST OFFENSE, PENDING CHARGE, OR ADMINISTRATIVE ACTION

Offense Question 1

What was the first offense, pending charge or administrative action?:

Offense Question 1 Response

When did it occur?:

Tell us what happened (optional):

Where did it occur? City:

Where did it occur? State:

Create Criminal Record Disclosure

Answer all criminal history questions

B. Criminal History Disclosure

Question 1 Other than those excluded up above, have you ever been convicted of a misdemeanor?	* Question 1 Response --None--
Question 2 Other than those excluded up above, have you ever been convicted of a felony?	* Question 2 Response --None--
Question 3 Do you currently have criminal charges pending against you?	* Question 3 Response --None--
Question 4 Are you currently out on bail or on your own recognizance for any current arrest?	* Question 4 Response --None--
Question 5 Are you currently under any formal or informal supervision, such as probation or parole, for a conviction of any state or federal violation?	* Question 5 Response --None--
Question 6 Have you ever had an Administrative Action against you from another State Agency?	* Question 6 Response --None--

Create Criminal Record Disclosure: New Disclosure

C. Certification - Read Carefully Before Signing

Read Carefully

I declare under penalty of perjury under the laws of the State of California that I have read and understand the information contained in this affidavit and my responses and accompanying attachments are true and correct. I understand that falsification, withholding of information or failure to answer all questions completely and accurately on the CRD may prevent me from being certified as a counselor by CC and/or result in decertification.

* Full Name

Agree to electronic signature

Populate to sign

Electronic Agreement

Each party agrees that the electronic signatures (whether digital or encrypted) of the parties included in this Agreement are intended to authenticate this writing and to have the same force and effect as manual signatures.

Electronic Signature means any electronic sound, symbol, or process attached to or logically associated with a record and executed and adopted by a party with the intent to sign such record pursuant to the California Uniform Electronic Transactions Act (Cal. Civ. Code § 1633.1 et seq.) as amended from time to time. By electronically signing this Agreement, Certified Enrollment Counselor agrees to comply with the applicable terms, conditions, and certifications set forth therein.

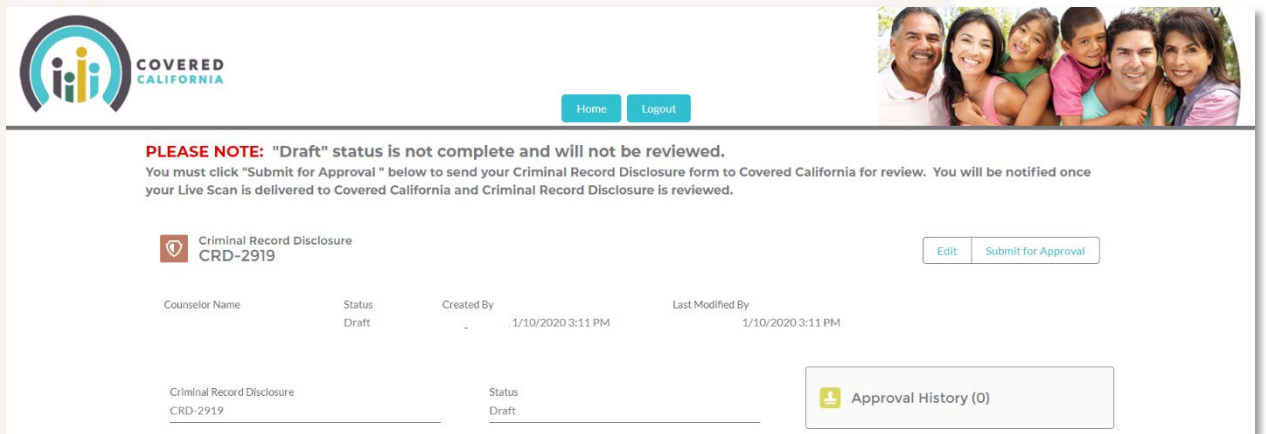
Privacy Statement

Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code section 1798 et seq.), notice is given for the request of the Social Security Number (SSN) on this form. The California Department of Justice uses a person's SSN as an identifying number. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check.

Cancel

Save

- Once saved, the **Criminal Disclosure** record will appear for you to complete the process and submit to Covered California for review.



PLEASE NOTE: "Draft" status is not complete and will not be reviewed.
 You must click "Submit for Approval" below to send your Criminal Record Disclosure form to Covered California for review. You will be notified once your Live Scan is delivered to Covered California and Criminal Record Disclosure is reviewed.

Criminal Record Disclosure
CRD-2919

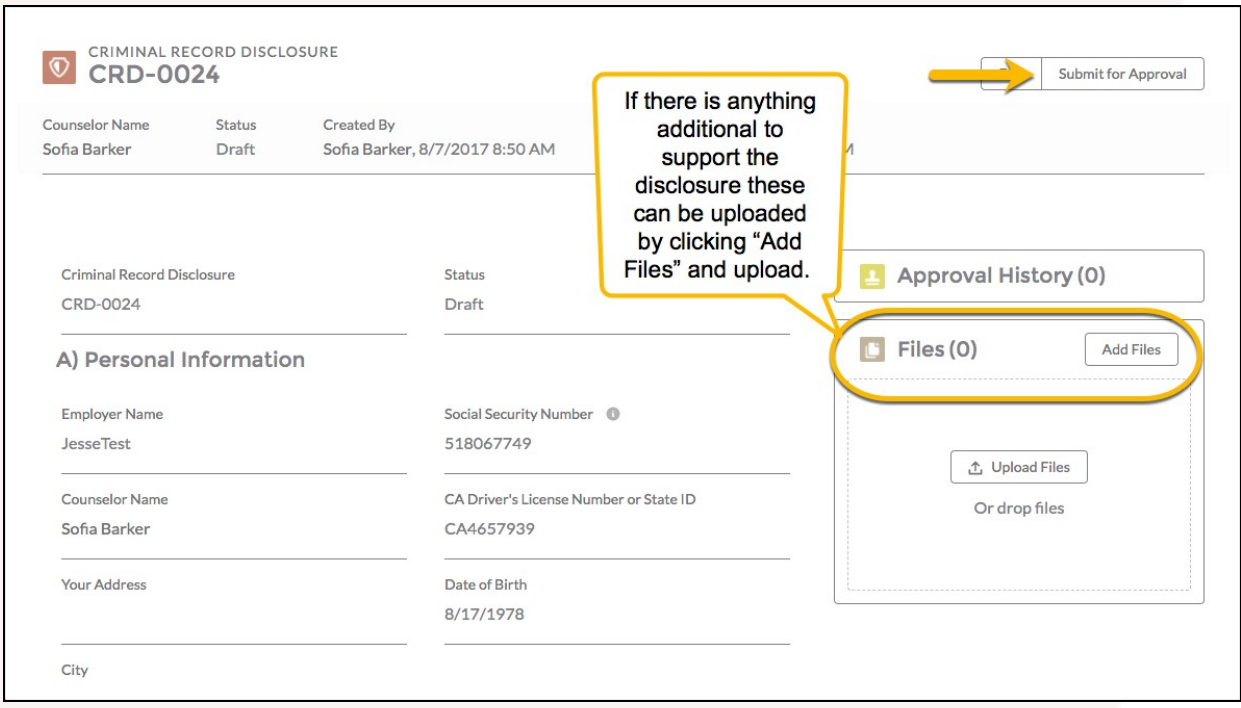
[Edit](#) [Submit for Approval](#)

Counselor Name	Status	Created By	Last Modified By
	Draft		
		1/10/2020 3:11 PM	1/10/2020 3:11 PM

Criminal Record Disclosure CRD-2919 Status Draft

[Approval History \(0\)](#)

Note: To attach additional information to support your criminal record disclosure, click on the 'Add Files' button as illustrated below and upload as required).



CRIMINAL RECORD DISCLOSURE
CRD-0024

[Submit for Approval](#)

Counselor Name	Status	Created By
Sofia Barker	Draft	Sofia Barker, 8/7/2017 8:50 AM

Criminal Record Disclosure CRD-0024 Status Draft

[Approval History \(0\)](#)

A) Personal Information

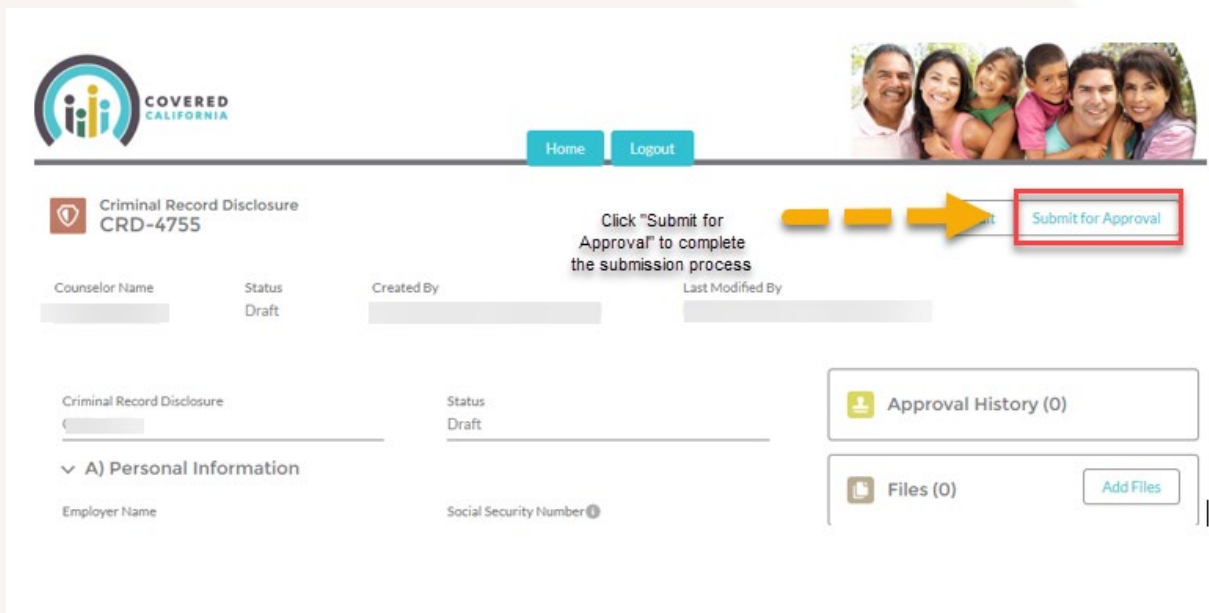
Employer Name JesseTest	Social Security Number ⓘ 518067749
Counselor Name Sofia Barker	CA Driver's License Number or State ID CA4657939
Your Address	Date of Birth 8/17/1978
City	

Files (0) [Add Files](#)

[Upload Files](#)
 Or drop files

If there is anything additional to support the disclosure these can be uploaded by clicking "Add Files" and upload.

4. Click on "Submit for Approval" to send your Criminal Record Disclosure form to Covered California for review. You will be notified once your Live Scan is delivered to Covered California and the Criminal Record Disclosure is reviewed.



BACKGROUND CHECK

The second step to the Background Check is completing the Live Scan form and taking the document(s) to an authorized location to be submitted and fingerprinted.


1. Each counselor applicant must download the Live Scan form and print two (2) copies of the pre-populated Live Scan Forms to be provided to the Live Scan facility.
2. Contact the Live Scan facility to schedule a fingerprinting appointment. For a list of locations, download or access the service locations using the following link: <http://capitalivescan.com/covered-ca>.

Note: For the purposes of this program, the Covered CA Live Scan form is the only acceptable form. Any other Live Scan form is unacceptable.


3. Print two copies of the pre-populated Live Scan Forms to be provided to the Live Scan facility.

Covered California Request for Live Scan

Certified Enrollment and Certified Application Counselors
Applicant Form



CONTRACT CODE: DFJK



This form is only intended for the use of the individual listed below. Altering or sharing this document is prohibited. Please complete the document and ensure the information is valid and up-to-date (Print in CAPITAL LETTERS).

Applicant Information	
Name:	Suffix:
Alias:	
Sex:	Eye Color:
Date of Birth:	Hair Color:
Social Security Number:	Height:
California Driver's License:	Weight:

Home Address	
Street Address:	City:
State:	Zip:

OCA

Name of the Certified Enrollment Entity

_____	_____	_____
Live Scan Agency Name	Live Scan Id (LSID)	Date
_____	_____	_____
Name of Operator	ATI Number	OATI (Resubmission Only)

Attestation Acknowledgement

All applicants must acknowledge they have received these Privacy Notices prior to being Live Scanned or Fingerprinted for hard cards, acknowledged by signature on this live scan form:

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature

Date

QUESTIONS?

Regarding the Live Scan process, locations or appointments call: **877-288-5519**
(Monday through Saturday, 9:00 AM to 5:00 PM) or email at coveredca@capitalivescan.com
You may also visit the Web page at <http://capitalivescan.com/covered-ca>
Regarding Covered California Enrollment Assistance Program email: IPAsupport@ccgrantsandassistors.org
You may also visit the Covered California Website at coveredca.com

3. Review and sign acknowledging receipt of the Privacy Notice documents.

Privacy Notice As Required by Civil Code § 1798.17	Privacy Act Statement	Noncriminal Justice Applicant's Privacy Rights
<p>Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4006-4021, 1574-1574.16, 20650-20650, 11340-11340, and 22440-22440; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.2-1416.50, 1509.10-1509.24, 1596.00-1596.079, 1720-1742, and 10050-10055; Family Code sections 4700-47200, 8000-8021, and 8900-8935; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 20122-20124; Education Code sections 44300-44355; Welfare and Institutions Code sections 9710-9719.5, 14423-14245, 4054-4059.8, and 10500-10522.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled, or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at http://ojcpa.ca.gov/privacy-policy.</p> <p>Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.</p> <p>Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.</p> <p>Possible Disclosure of Personal Information. In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.</p> <p>The information you provide may also be disclosed in the following circumstances:</p> <ul style="list-style-type: none"> • With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes. • To another government agency as required by state or federal law. <p>Contact Information. For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:</p> <p style="text-align: center;">Department of Justice Bureau of Criminal Information & Analysis Keeper of Records P.O. Box 903417 Sacramento, CA 95833-4170</p>	<p>Your fingerprints will be used to check the criminal history records of the California Department of Justice (DOJ) and Federal Bureau of Investigation (FBI). You have the opportunity to complete or challenge the accuracy of the information contained in the DOJ and FBI identification records. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. To request a change, correction, or update to a DOJ record, you must request a record review with DOJ in accordance with the process outlined in PC Sections 11120-11127.</p> <p>Authority. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.</p> <p>Principal Purpose. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.</p> <p>Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to: disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other stability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.</p> <p>You have the right to access certain records containing your personal information maintained by the Department (Civil Code section 1798.17 et seq.).</p> <p>Additionally, pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code section 1798.17 et seq.), notice is given for the request of the Social Security Number (SSN) on this form. Your SSN is needed to keep records accurate because other people may have the same name and birth-date. The California Department of Justice uses a person's SSN as an identifying number. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check. Covered California will create a file concerning your criminal background check that will contain certain documents, including information that you provide.</p> <p>California Public Records Act (CPRA). Under the CPRA, Covered California may have to provide copies of some of the records in your file to members of the public who ask for them, including newspaper and television reporters.</p>	<p>Noncriminal Justice Applicant's Privacy Rights</p> <p>As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below:</p> <ul style="list-style-type: none"> • You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI. • You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.² • If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record. • The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34. • If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.³ <p>You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.⁴</p> <p>If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjic/identity-history-summary-checks.</p> <p>If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) You can find additional information on the FBI website at https://www.fbi.gov/about-us/ops/background-checks.</p> <p>¹ Written notification includes electronic notification, but excludes oral notification. ² https://www.fbi.gov/services/cjic/compact-compatibility-privacy-act-statement ³ See 28 CFR 50.12(b). ⁴ See U.S.C. 562a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40516 (formerly cited as 42 U.S.C. § 14616), Article IV(c).</p>

4. Upload the completed and signed Live Scan Form within the Certification Portal. Upload button located at the bottom of this section.

Background Check

Download Live Scan Form

Action Required by Counselor Candidate:

1. Upload the completed and signed Live Scan Form within the Certification Portal. Upload button located at the bottom of this section.
2. Review the Privacy Notice, Privacy Act Statement and Noncriminal Justice Applicant's Privacy Rights.
3. Print two copies of the pre-populated Live Scan Forms to be provided to the Live Scan facility.
4. Contact the Live Scan facility to schedule a fingerprinting appointment. For a list of locations, download or access the service locations using the following link: <http://capitalivescan.com/covered-ca>.

Note: For the purposes of this program, the Covered CA Live Scan form is the only acceptable form. Any other Live Scan form is unacceptable.

Certified Entity Responsibility:

- Ensure enroller candidates are directed to a Covered California approved Live Scan provider for fingerprinting and criminal record check.

Upload Signed Live Scan

Upload Files Or drop files

Note: When all documents have been completed and submitted in the Required Documentation you will see a green check mark on the upper right-hand corner.

Required Documentation Indicates all required sections submitted ✓

Certified Application Counselor (CAC) ✓

Each individual counselor candidate must sign the pre-populated Certified Application Counselor Application/Agreement, including Conflict of Interest Disclosure section of the agreement. Complete the CAC pre-populated Application/Agreement by selecting the button below.

[CAC Agreement](#)

Criminal Disclosure ✓

Each individual applying to become a Counselor must complete and submit a Criminal Disclosure form. This form is to be completed by the individual applying to become a Counselor.

[New Criminal Disclosure](#)

Background Check ✓

[Download Live Scan Form](#)

The Entity must send Counselor candidates to a Covered California approved Live Scan provider for fingerprinting and criminal record check. The Entity must provide two pre-populated Live Scan Forms to Counselor candidate and advise Counselor candidate that the pre-populated Live Scan form is the required form to provide to the Live Scan vendor and only acceptable form to present to the Live Scan vendor. The pre-populated Live Scan form authorizes the Live Scan vendor to perform the fingerprinting service for the Counselor candidate. Any other downloaded Live Scan form other than the pre-populated Live Scan form from the Entity is not acceptable. Forms can be generated in IPAS in the counselor grid as shown above. Upon completion of the form, the applicant should call the fingerprinting facility to schedule a fingerprinting appointment. For a list of locations, download the service [in-locations](#)

[Save Details](#)

Click to save all profile details. This performs the same action as the save buttons above.

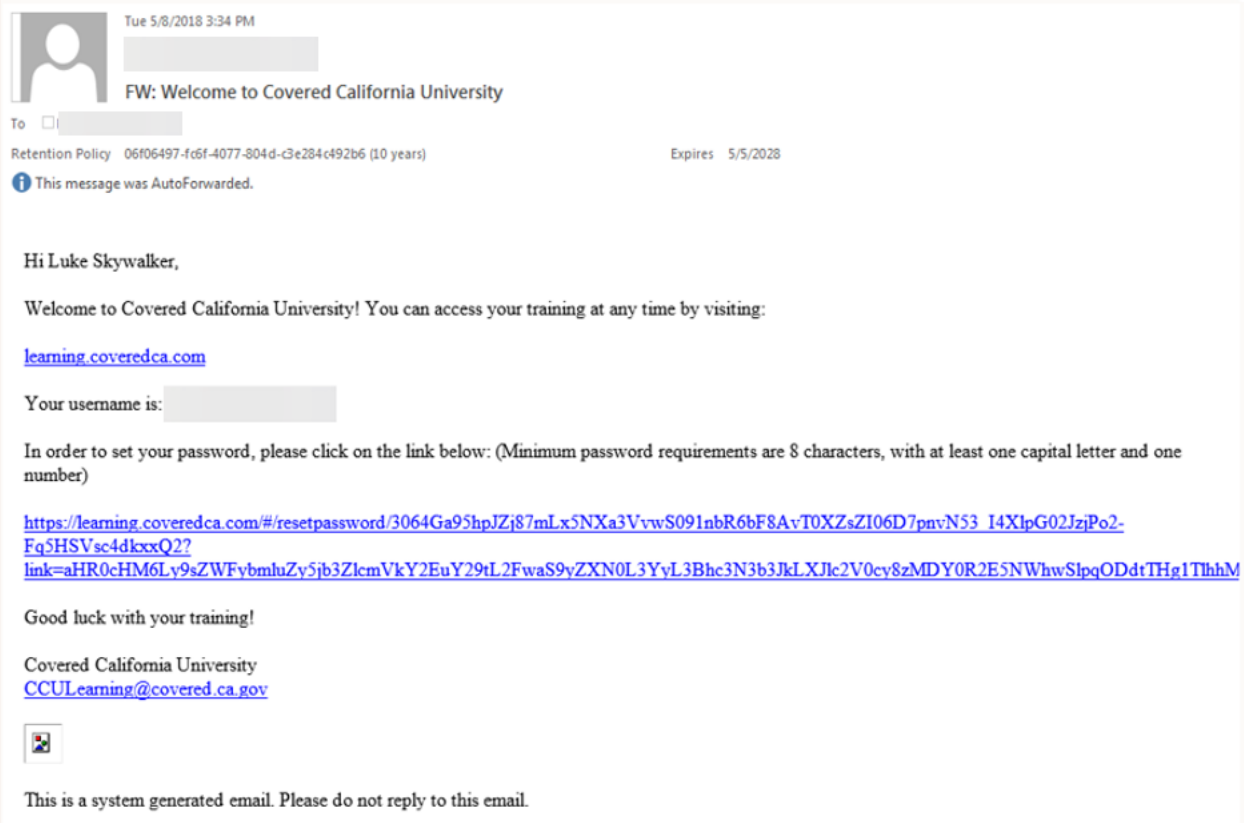
CERTIFICATION TRAINING

Computer-based Certification Training shall be provided by Covered CA and will be taken through the Learning Management System (LMS) database.


You will be enrolled in the Certification Training modules, once your profile is completed, the agreement is approved, and backgrounds process has begun.

NOTE: You will have 30 Days to complete the training and 3 attempts to pass the exam with a score of 80% or better. Take your time and answer each question to the best of your ability.

Once enrolled, you will receive an automated email that will provide a link to LMS to create an LMS account and access the Certification Training.




Tue 5/8/2018 3:34 PM

 [Redacted]
FW: Welcome to Covered California University

To: [Redacted]

Retention Policy 06f06497-fc6f-4077-804d-c3e284c492b6 (10 years) Expires 5/5/2028

 This message was AutoForwarded.

Hi Luke Skywalker,

Welcome to Covered California University! You can access your training at any time by visiting:

learning.coveredca.com


Your username is: [Redacted]

In order to set your password, please click on the link below: (Minimum password requirements are 8 characters, with at least one capital letter and one number)

https://learning.coveredca.com/#/resetpassword/3064Ga95hpJZj87mLx5NXa3VvwS091nbR6bF8AvT0XZsZI06D7pnvN53_I4XlpG02JzjPo2-Eq5HSVsc4dkcxQ2?link=aHR0cHM6Ly9sZWYybnV5b3ZlcmVkeY2EuY29tL2FwaS9vZXR0L3YyL3Bhc3N3b3JkLXJlc2V0cy8zMdY0R2E5NWhwSlpqODdtTHg1TlhhM

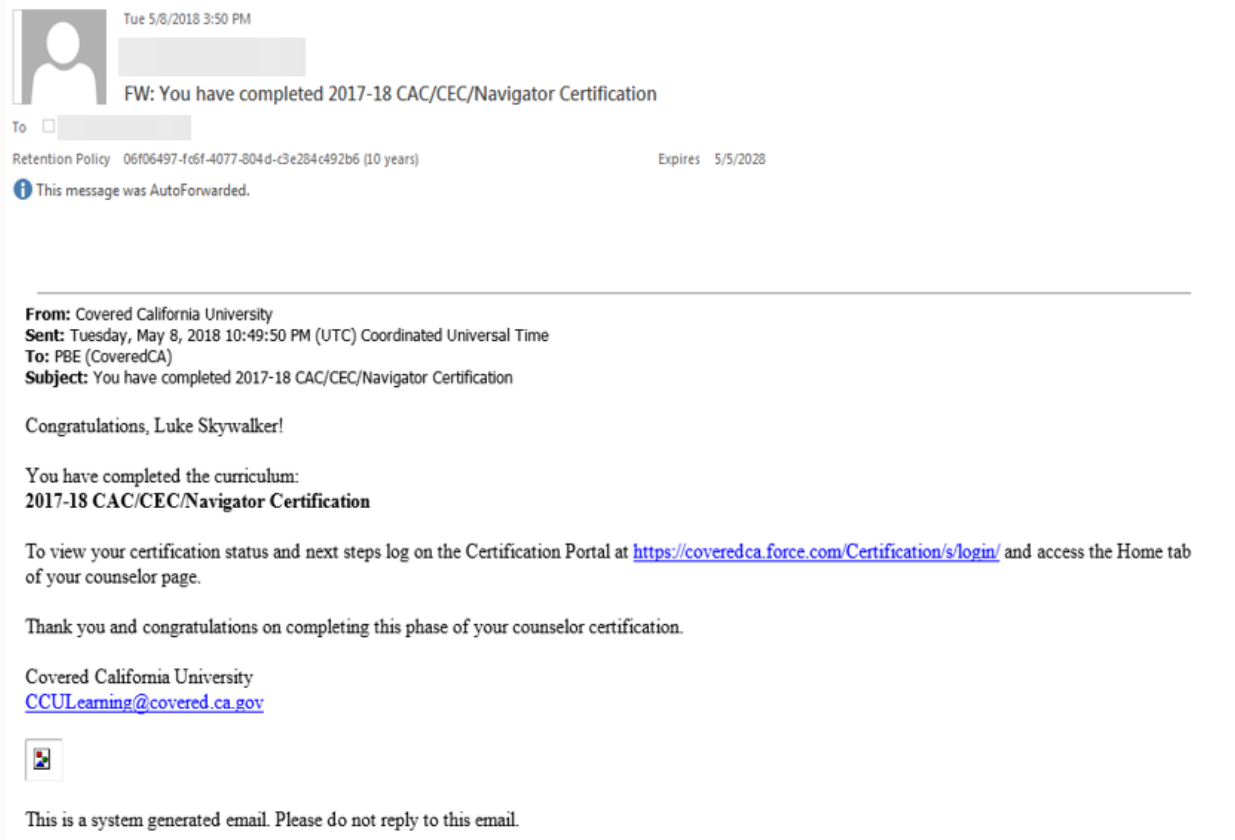
Good luck with your training!

Covered California University
CCULearning@covered.ca.gov



This is a system generated email. Please do not reply to this email.

When you have completed the Certification Training, you will receive another automated email.



IMPORTANT:

Once your Criminal Record Disclosure and Background Check is approved, you will be given a “Certified” status. An automated email will be sent to you with instructions and a link on how to make your CalHEERS account.

As a result of COVID-19, Covered California will temporarily email badge photos to Certified Counselors. Once you receive your e-badge you can begin to assist consumers for your Entity. The e-badge allows counselors the ability to work successfully with consumers while awaiting a physical badge.

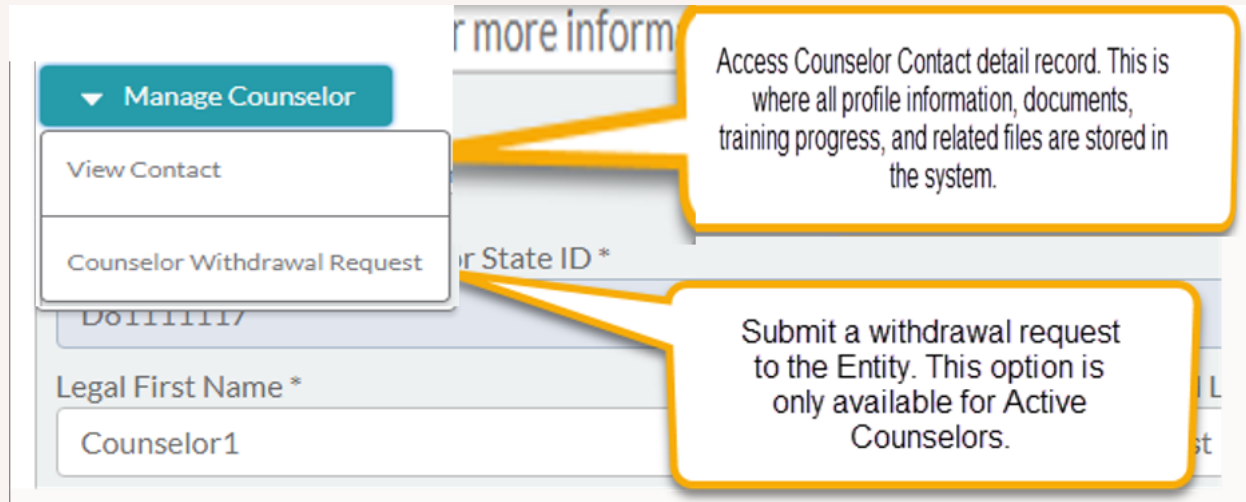
A physical badge will be sent to you within 30 Business Days to the physical address listed in your Certification Portal Profile.

For additional questions or inquiries, you can send an email to CommunityPartnerCertSupport@covered.ca.gov.

ADDITIONAL COUNSELOR ACTIONS

Manage Counselor-Additional Counselor Actions

1. At the top of the My Profile page you will see a drop-down menu labeled “Manage Counselor” to perform additional actions as a Counselor. Look at the screenshot below for additional options available.



VIEWING CONTACT

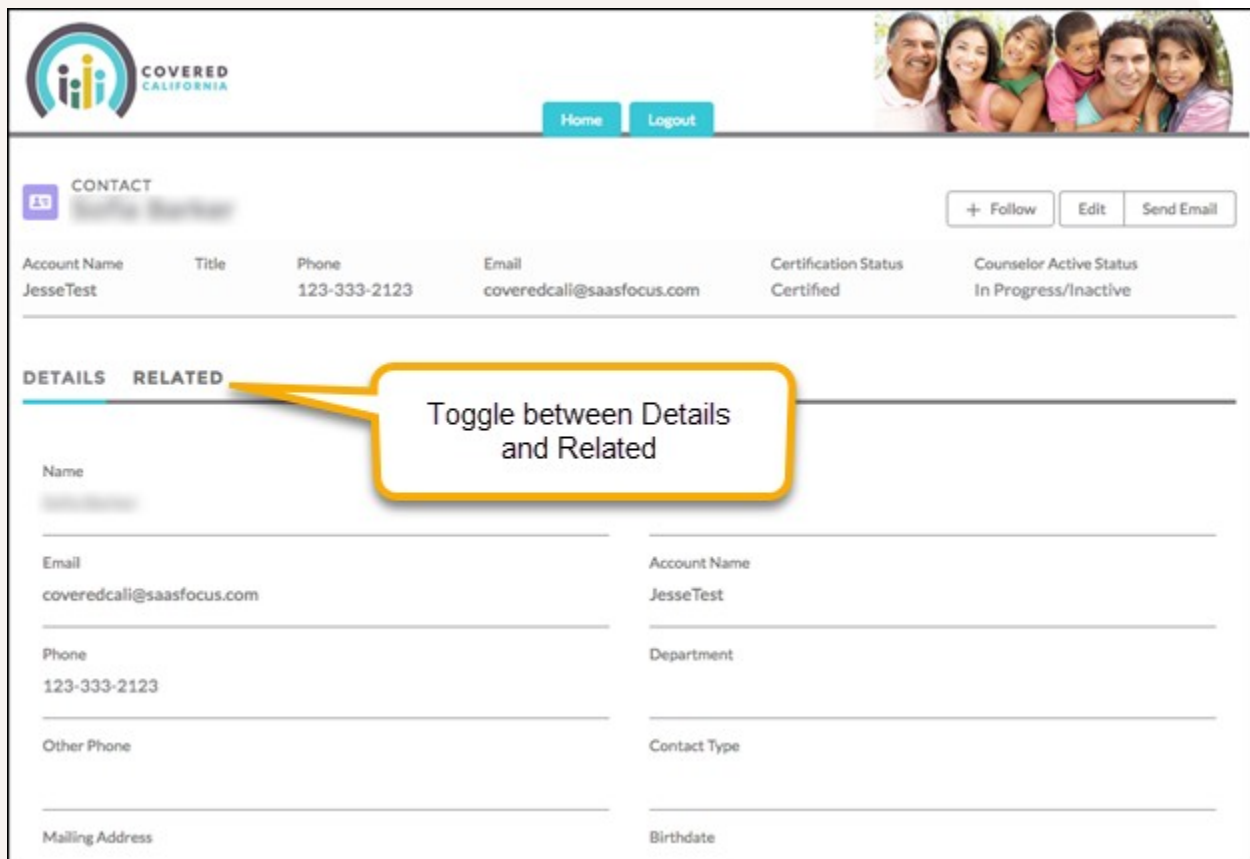
The View Contact feature allows you to view your own contact record and related Information. Select “View Contact” from the drop-down menu under “Manage Counselor”:



The “Details” tab will show you your information and allows you to edit the information by clicking the “Edit” button in the upper right-hand corner of the page.

Clicking on the “View Contact” button will take you to the screen below.

The “Related” tab will show you any documents or files that are related to you, including all entity affiliations and sites served.




The screenshot displays the user interface for a contact profile. At the top, there is a navigation bar with 'Home' and 'Logout' buttons, and a family photo. Below this is a header for the contact, 'CONTACT JesseTest', with buttons for '+ Follow', 'Edit', and 'Send Email'. A summary table lists key information:

Account Name	Title	Phone	Email	Certification Status	Counselor Active Status
JesseTest		123-333-2123	coveredcali@saasfocus.com	Certified	In Progress/Inactive

Below the table are two tabs: 'DETAILS' and 'RELATED'. The 'RELATED' tab is selected and highlighted with a yellow callout box that says 'Toggle between Details and Related'. The main content area shows a form with the following fields:

- Name
- Email: coveredcali@saasfocus.com
- Phone: 123-333-2123
- Other Phone
- Mailing Address
- Account Name: JesseTest
- Department
- Contact Type
- Birthdate

The Counselor Agreement Status can be found in the Counselor Files related list on your Contact record.

CONTACT
 **Sofia Barker**

+ Follow Edit Send Email

Account Name	Title	Phone	Email	Certification Status	Counselor Active Status
JesseTest		123-333-2123	coveredcali@saasfocus.com	Certified	Active


DETAILS **RELATED**

Related Accounts (1)

ACCOUNT NAME	DELEGATION CODE	CALHEERS ASSISTER NUMBER
JesseTest		▼

[View All](#)

Counselor Files (1) New


COUNSELOR FILE NAME	FILE TYPE	FILE DETAILS	STATUS
CAC Agreement 	CAC Agreement		Submitted ▼

[View All](#)

After Entity Contact approval, it will be submitted to Covered California for review. If approved by the Certification Services Section, the Counselor Agreement is then complete.

DETAILS **RELATED**

Approval History (4)

STEP NAME	DATE	STATUS	ASSIGNED TO
Certification Services Section	8/11/2017 6:32 PM	Approved 	Certification Services Section ▼
Approval Request Submitted	8/11/2017 6:32 PM	Submitted	▼
Entity Contacts	8/11/2017 6:32 PM	Approved	▼
Approval Request Submitted	8/11/2017 6:25 PM	Submitted	Sofia Barker ▼

[View All](#)

COUNSELOR WITHDRAWAL REQUEST

1. You can submit a withdrawal request to your Entity if you would like to withdraw from the program. Click on the “Counselor Withdrawal Request” link from “Manage Counselor” the drop-down menu. This function can only be done if you are an active Counselor with and active Entity.



2. Provided your reason for wanting to withdraw from the program in the “Reason for Withdrawal” field. Click on the “Save” button to be directed to the Withdrawal Request Record.

Create Counselor Change Request: Withdrawal Request

*** Counselor**

Sofia Barker
×

*** Reason for Withdrawal** ⓘ

Sample reason for withdrawal.

Change Request

Verify your name is populated

Record Type

Withdrawal Request

Created By

Last Modified By

Cancel
Save & New
Save

3. The system will take you to the Withdrawal Request record which will automatically be submitted to the Entity Contacts for approval.

COUNSELOR CHANGE REQUEST

CR-91361

Clone

DETAILS
RELATED

Approval History (2)

Recall

STEP NAME	DATE	STATUS	ASSIGNED TO
Entity Contacts	8/7/2017 11:56 AM	Pending	Jesse Barker ▼
Approval Request Submitted	8/7/2017 11:56 AM	Submitted	Sofia Barker ▼

View All

4. When both the Entity Contacts and the Covered California have approved of your withdrawal request your status will be updated to “Withdrawn-Entity request” in the certification portal.

COUNSELOR CHANGE REQUEST
CR-91366 Clone Submit for Approval

DETAILS **RELATED**

Approval History (4)

STEP NAME	DATE	STATUS	ASSIGNED TO
Certification Services Section	8/11/2017 7:07 PM	Approved	Certification Services Section
Entity Contacts	8/11/2017 7:06 PM	Approved	[Redacted]
Approval Request Submitted	8/11/2017 7:06 PM	Submitted	[Redacted]
Approval Request Submitted	8/11/2017 7:04 PM	Submitted	Sofia Barker

[View All](#)

CONTACT
Sofia Barker + Follow Edit Send Email

Account Name	Title	Phone	Email	Certification Status	Counselor Active Status
JesseTest		123-333-2123	coveredcall@saasfocus.com	Withdrawn - Entity Request	Active

DETAILS **RELATED**

Name	Title
Sofia Barker	
Email	Account Name
coveredcall@saasfocus.com	JesseTest
Phone	Department
123-333-2123	