

TABLE OF CONTENTS

CERTIFICATION PORTAL COUNSELOR USER OVERVIEW .....2

NEW COUNSELOR USER .....2

COUNSELOR HOMEPAGE .....3

COUNSELOR MY PROFILE .....3

BADGE PHOTO .....5

COUNSELOR AGREEMENT .....6

BACKGROUND CLEARANCE .....7

CRIMINAL DISCLOSURE .....8

BACKGROUND CHECK .....11

CERTIFICATION TRAINING .....14

IMPORTANT CERTIFICATION NOTIFICATIONS .....15

ADDITIONAL COUNSELOR ACTIONS .....15

VIEW CONTACT SECTION .....16

COUNSELOR WITHDRAWAL REQUEST .....17

## **CERTIFICATION PORTAL COUNSELOR USER OVERVIEW**

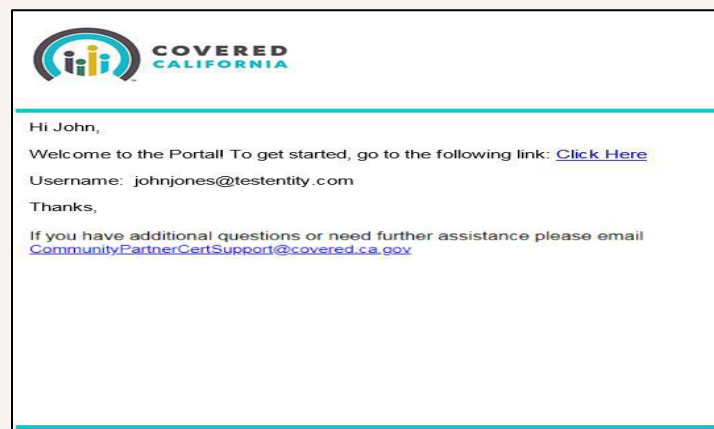
This document outlines all features and functions available to Entity Counselors in the Certification Portal. It details the functions that you, as a Counselor User, have including profile completion, background clearance, and training.

### **NEW COUNSELOR USER**

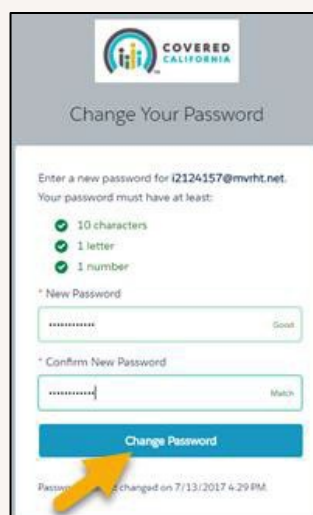
The Primary or Authorized Contact listed on the entity roster will create your Counselor user account. You will receive an email from the Certification Portal that looks like the following:

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

Email Body:

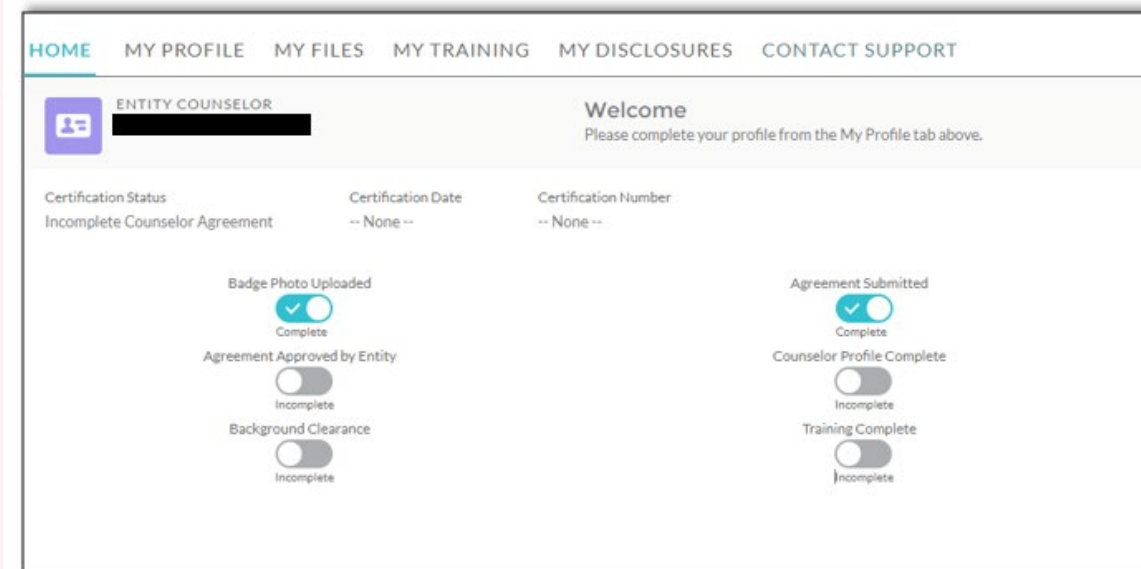


When you click on the hyperlink provided in the email it will take you to a login screen. There you will be prompted to set a password for your new account. When the Change Password button is pressed, you will be logged into the system.



## 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 as well other important information related to fulfilling your duties as a certified counselor.

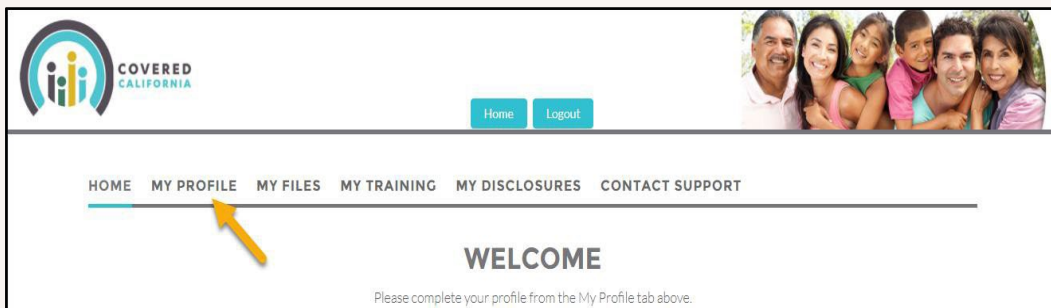


The screenshot shows the Counselor Homepage. At the top is a navigation bar with links: HOME, MY PROFILE, MY FILES, MY TRAINING, MY DISCLOSURES, and CONTACT SUPPORT. Below the navigation bar is a header section with a user icon and the text "ENTITY COUNSELOR" and "Welcome". Below the header is a section for "Certification Status" with three items: "Incomplete Counselor Agreement", "Certification Date -- None --", and "Certification Number -- None --". Below this are two columns of status indicators. The left column has: "Badge Photo Uploaded" (Complete), "Agreement Approved by Entity" (Incomplete), and "Background Clearance" (Incomplete). The right column has: "Agreement Submitted" (Complete), "Counselor Profile Complete" (Incomplete), and "Training Complete" (Incomplete).

**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.



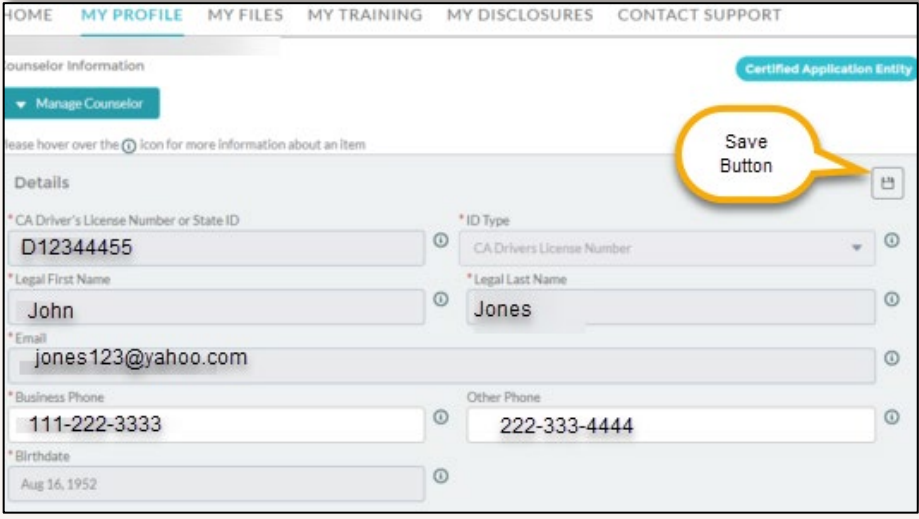
The screenshot shows the Counselor My Profile page. At the top is a header with the Covered California logo, a "Home" button, a "Logout" button, and a photo of a family. Below the header is a navigation bar with links: HOME, MY PROFILE, MY FILES, MY TRAINING, MY DISCLOSURES, and CONTACT SUPPORT. An orange arrow points to the "MY PROFILE" link. Below the navigation bar is a "WELCOME" message and a note: "Please complete your profile from the My Profile tab above."

**IMPORTANT:** Active and Certified counselors ARE NOT REQUIRED to complete a NEW application in the Certification Portal. Please skip to page 20 to view an example of the email sent to access the Certification portal and training.

**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.

**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.



HOME MY PROFILE MY FILES MY TRAINING MY DISCLOSURES CONTACT SUPPORT

Counselor Information Certified Application Entity

Manage Counselor

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

**Details**

\* CA Driver's License Number or State ID: D12344455 ⓘ

\* ID Type: CA Drivers License Number ⓘ

\* Legal First Name: John ⓘ

\* Legal Last Name: Jones ⓘ

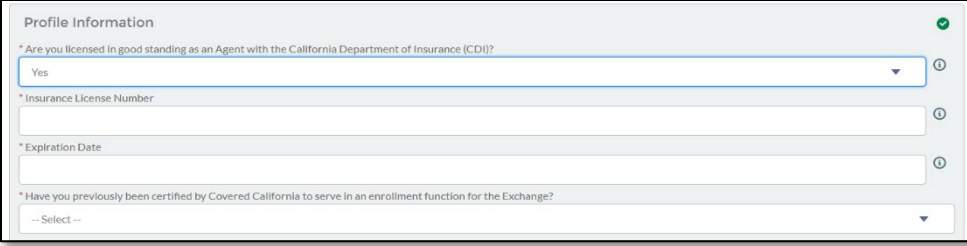
\* Email: jones123@yahoo.com ⓘ

\* Business Phone: 111-222-3333 ⓘ

Other Phone: 222-333-4444 ⓘ

\* Birthdate: Aug 16, 1952 ⓘ

Save Button



Profile Information


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

\* Insurance License Number ⓘ

\* Expiration Date ⓘ

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

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



**Personal Mailing Address**

Mailing Street \*  
1234 Council Blvd

Mailing City \*  
El Doardo Hills

Mailing State/Province \*  
CA

Mailing Zip/Postal Code \*  
96873

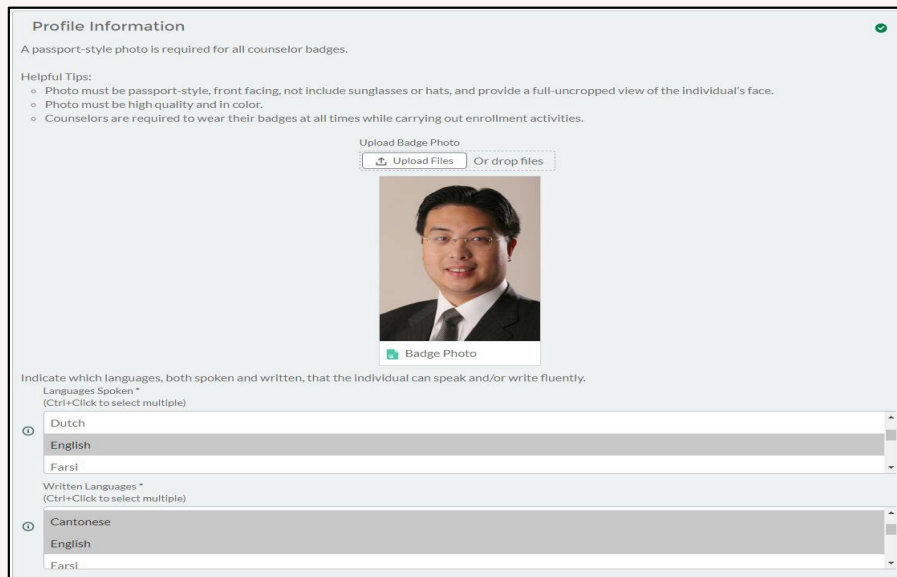
**Save Button**

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

## BADGE PHOTO

Follow these guidelines below when uploading your badge photo and select your written and spoken languages(s):

- 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:

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

Upload Badge Photo

Upload Files 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

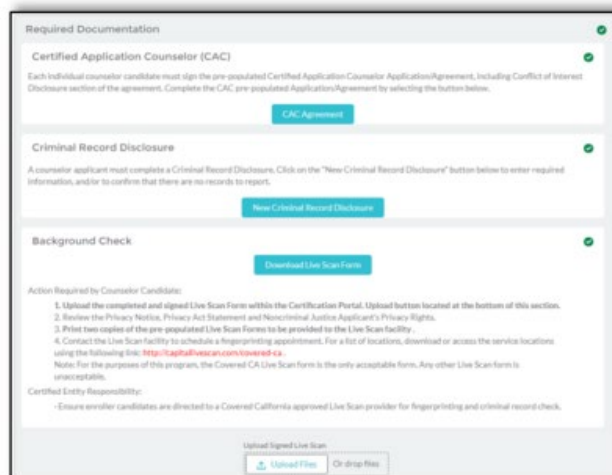
English

Farsi

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

The Required Documentation section includes the Counselor Agreement, Criminal Record Disclosure, and the Live Scan Forms. These documents must be reviewed and submitted prior to becoming a certified counselor.

## CAC View



**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 Record Disclosure**

A counselor applicant must complete a Criminal Record Disclosure. Click on the "New Criminal Record Disclosure" button below to enter required information, and/or to confirm that there are no records to report.

[New Criminal Record Disclosure](#)

**Background Check**

[Download Live Scan Forms](#)

**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>.

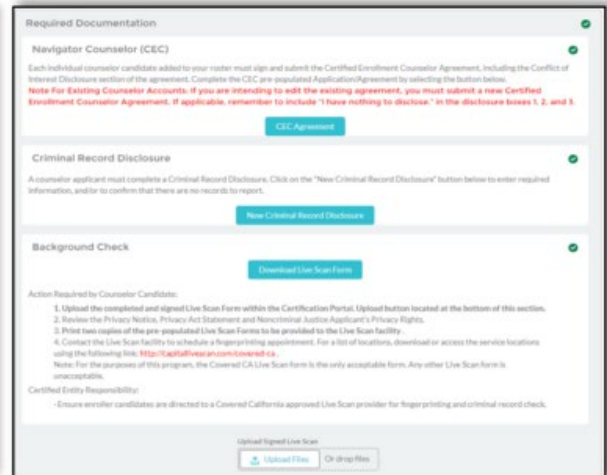
Note: For the purposes of this program, the Covered CA Live Scan form is the only acceptable form. Any other Live Scan form is unacceptable.

**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

## CEC View



**Required Documentation**

**Navigator Counselor (CEC)**

Each individual counselor candidate added to your roster must sign and submit the Certified Enrollment Counselor Agreement, including the Conflict of Interest Disclosure section of the agreement. Complete the CEC pre-populated Application/Agreement by selecting the button below.

Note: For Existing Counselor Accounts, if you are intending to edit the existing agreement, you must submit a new Certified Enrollment Counselor Agreement. If applicable, remember to include "I have nothing to disclose" in the disclosure boxes 1, 2, and 3.

[CEC Agreement](#)

**Criminal Record Disclosure**

A counselor applicant must complete a Criminal Record Disclosure. Click on the "New Criminal Record Disclosure" button below to enter required information, and/or to confirm that there are no records to report.

[New Criminal Record Disclosure](#)

**Background Check**

[Download Live Scan Forms](#)

**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

In the upcoming pages we will provide a walkthrough for how to upload and submit the documents. If these documents are not completed within 30 days your profile will not be reviewed.

## COUNSELOR AGREEMENT

If your entity requires a Counselor Agreement, click on the Certified Application Counselor (CAC) Agreement as shown 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 review and read the full agreement before electronically signing and filling out the disclosure statements. 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:	001r000007UBUAA2
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 nothing to disclose, you must type **“I have nothing to disclose”** in the appropriate disclosure fields and “Save”. Entering N/A or None will cause us to reject the agreement.

**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 comes up after saving the new Agreement.

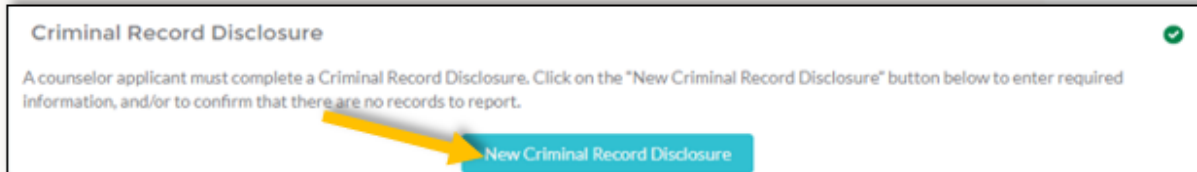
## BACKGROUND CLEARANCE

The Counselor background clearance process consists of two documents that are located on the Counselor profile in the Certification Portal.

These items must be submitted to Covered California to be reviewed and approved as part of the Counselor certification process. A Candidate cannot qualify to become certified until they submit the Background Clearance documents.

## CRIMINAL DISCLOSURE

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



**Criminal Record Disclosure** ✓

A counselor applicant must complete a Criminal Record Disclosure. Click on the “New Criminal Record Disclosure” button below to enter required information, and/or to confirm that there are no records to report.

[New Criminal Record Disclosure](#)

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.

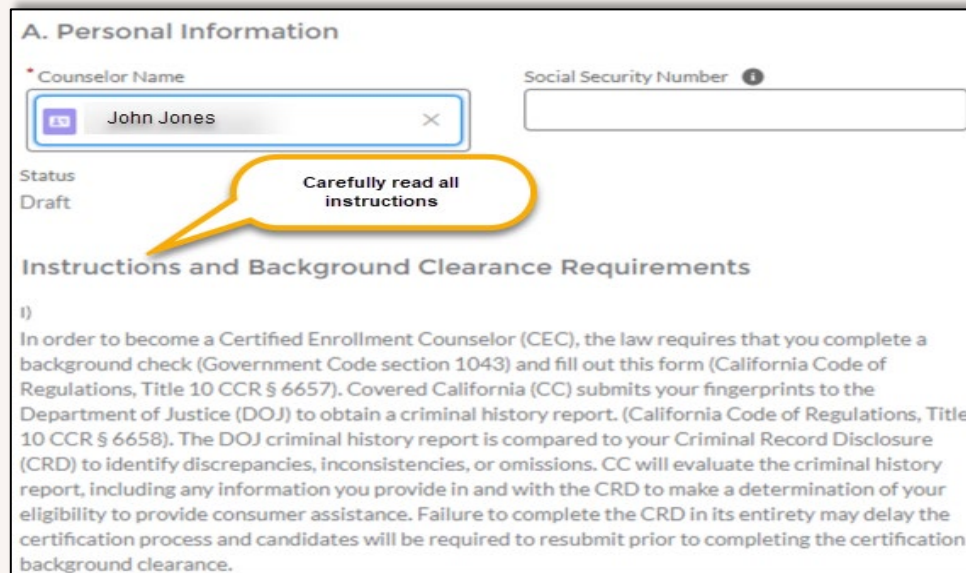


**A. Personal Information**

\* Counselor Name Verify your name is populated

×

Status  
Draft



**A. Personal Information**

\* Counselor Name  ×

Social Security Number ?

Status  
Draft

**Instructions and Background Clearance Requirements**

1)  
In order to become a Certified Enrollment Counselor (CEC), the law requires that you complete a background check (Government Code section 1043) and fill out this form (California Code of Regulations, Title 10 CCR § 6657). Covered California (CC) submits your fingerprints to the Department of Justice (DOJ) to obtain a criminal history report. (California Code of Regulations, Title 10 CCR § 6658). 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 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

Create Criminal Record Disclosure

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**

<p>Offense Question 1</p> <p>What was the first offense, pending charge or administrative action?:</p>	<p>Offense Question 1 Response</p> <div></div>
<p>When did it occur?:</p> <div></div>	<p>Tell us what happened (optional):</p> <div></div>
<p>Where did it occur? City:</p> <div></div>	
<p>Where did it occur? State:</p> <div></div>	

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

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

CRIMINAL RECORD DISCLOSURE

CRD-0024

Counselor Name

Sofia Barker

Status

Draft

Created By

Sofia Barker, 8/7/2017 8:50 AM

Criminal Record Disclosure

CRD-0024

Status

Draft

**A) Personal Information**

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

Submit for Approval

Approval History (0)

Files (0)

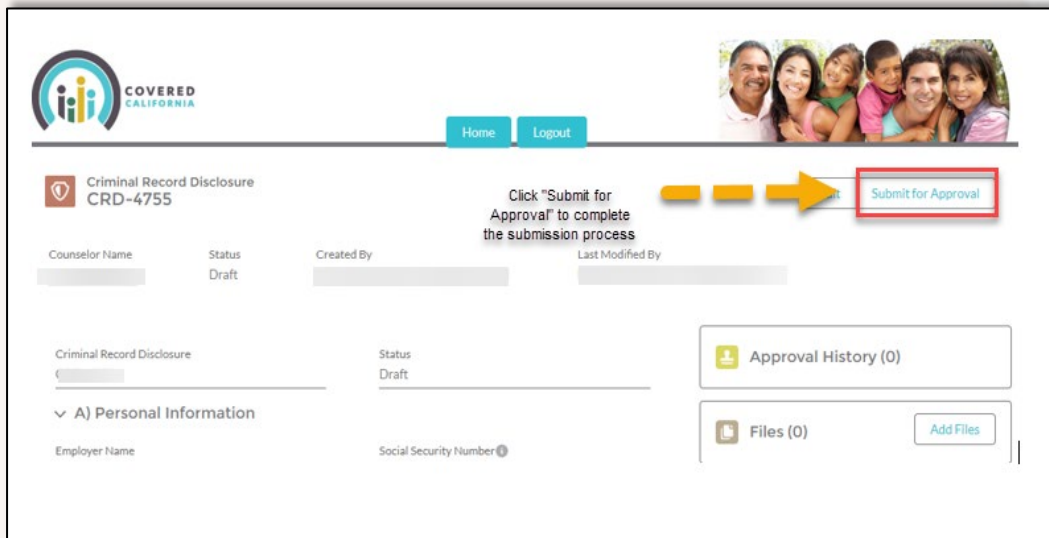
Add Files

Upload Files

Or drop files

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

- 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 Criminal Record Disclosure is reviewed.



**COVERED CALIFORNIA**

Home Logout

**Criminal Record Disclosure**  
CRD-4755

Click "Submit for Approval" to complete the submission process

Submit for Approval

Counselor Name: [Redacted] Status: Draft Created By: [Redacted] Last Modified By: [Redacted]

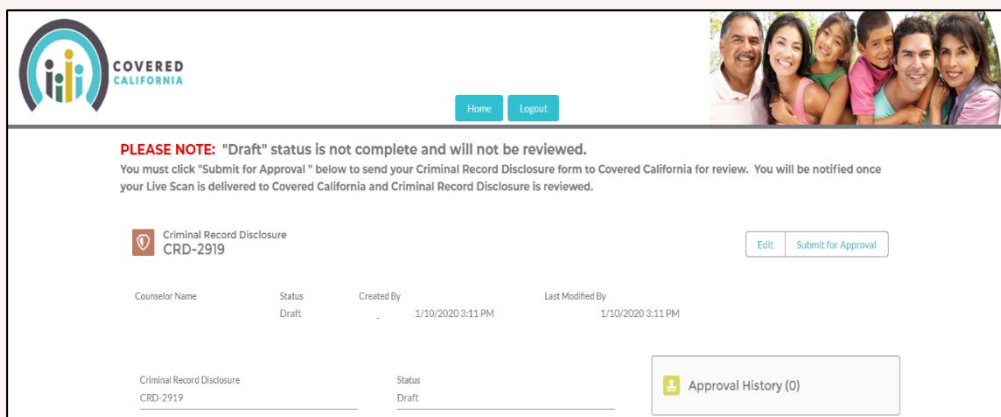
Criminal Record Disclosure: [Redacted] Status: Draft

✓ A) Personal Information

Employer Name: [Redacted] Social Security Number: [Redacted]

Approval History (0)

Files (0) Add Files



**COVERED CALIFORNIA**

Home Logout

**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: [Redacted] Status: Draft Created By: [Redacted] Last Modified By: [Redacted]

Criminal Record Disclosure: [Redacted] Status: Draft

Approval History (0)

## BACKGROUND CHECK


*The second step to the Background Check is completing the Live Scan form and taking the documents to an authorized location to be submitted and fingerprinted.*


- Each Counselor applicant must download the Live Scan form, print (2) two copies and take the forms to an authorized Capitol Live Scan location (<https://www.capitolivescan.com/state-wide>).

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: <https://www.capitalivescan.com/state-wide>.
3. Download and print the two (2) copies of the pre-populated form. The screenshot below shows what the Live Scan form looks like.
4. Review the Privacy Notices and sign the Live Scan form under the "Attestation Acknowledgment" to attest receipt of the three notices.

### 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: [REDACTED]	Suffix:
Alias:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Eye Color:
Date of Birth: [REDACTED]	Hair Color:
Social Security Number:	Height:
California Driver's License: [REDACTED]	Weight:

Home Address	
Street Address: [REDACTED]	City: [REDACTED]
State: [REDACTED]	Zip: [REDACTED]

[REDACTED]

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 3:00 PM) or email at [coveredca@capitalivescan.com](mailto:coveredca@capitalivescan.com)  
You may also visit the Web page at <http://capitalivescan.com/covered-ca>  
Regarding Covered California Enrollment Assistance Program email:  
[CommunityPartnerCertSupport@covered.ca.gov](mailto:CommunityPartnerCertSupport@covered.ca.gov)  
You may also visit the Covered California Website at [www.coveredca.com](http://www.coveredca.com)



## Example of the Privacy Notices (3)

### Privacy Notice

As Required by Civil Code § 1798.17

**Collection and Use of Personal Information.** The California Justice Information Services (CJIS) Division is the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4000-4021, 7574-7574.16, 26050-26051, 11340-11346, and 22440-22445; Penal Code sections 11100-11112, and 11077; Health and Safety Code sections 1502, 1415.20-1416.10, 1569.10-1569.24, 1596.10-1596.29, 1726-1742, and 18050-18055; Family Code sections 2700-2702.5, 8600-8623, and 8900-8925; Financial Code sections 1300-1301, 22700-22712, 27200-17215, and 28222-28224; Education Code sections 44330-44335; Welfare and Institutions Code sections 1718-1719.5, 16443-16445, 4604-4628.6, and 16500-16523.1; 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://oag.ca.gov/privacy-policy>.

**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.

**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.

**Possible Disclosure of Personal Information.** In order to process applications pertaining to Live Scan services 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.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and conforms 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.

**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) 210-3208, by email at [keeperofrecords@doj.ca.gov](mailto:keeperofrecords@doj.ca.gov), or by mail at:

Department of Justice  
Bureau of Criminal Information & Analysis/Keeper of Records  
P.O. Box 903417 Sacramento, CA 95835-4179

### Privacy Act Statement

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 update on 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 APC Section 11120-11127.

**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, Presidential Executive Order, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**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.

**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 at 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 Standard 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 suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

You have the right to access certain records containing your personal information maintained by the Department of Justice (DOJ) under 5 U.S.C. 552(a)(6). Additionally, pursuant to the Federal Privacy Act (5 U.S.C. 552(a)(6)) 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 help 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. 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.

### Noncriminal Justice Applicant's Privacy Rights

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.

- You must be provided written notification 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.
- 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 in 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.

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.

If agency entry 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/crimident/criminal-history-information-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that constituted 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 constituted 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 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/services/crimident/criminal-history-information-checks>.

1. Written notification includes electronic notification, but excludes any restriction.  
2. <https://www.fbi.gov/services/crimident/criminal-history-information-checks>  
3. See 28 CFR 16.1001.  
4. See 28 U.S.C. 552(a)(6); 28 U.S.C. 534(b); 34 U.S.C. § 40101 (formerly cited as 42 U.S.C. § 16810); Article IV(C).

5. Upload the completed and signed Live Scan form in the Certification Portal (upload button is located at the bottom of the "Background Check" section). Your signature on the Live Scan forms is an attestation that you have received the privacy notices.

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

Save Details

**Note:** When all documents have been completed and submitted in the Required Documentation sections a green check mark will appear on the upper right-hand corner. Ensure you "Save Details".

Required Documentation

**Certified Application Counselor (CAC)**

Each individual counselor candidate must sign the pre-populated Certified Application Counselor Disclosure section of the agreement. Complete the CAC pre-populated Application Agreement.

CAC Agreement

**Criminal Record Disclosure**

A counselor applicant must complete a Criminal Record Disclosure. Click on the "New Criminal Record Disclosure" button below to enter required information, and/or to confirm that there are no records to report.

New Criminal Record Disclosure

**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.

Green check marks indicate forms are submitted.

Click "Save" to ensure all changes are captured in the profile details.

Upload Signed Live Scan

Upload Files

Or drop files

Save Details



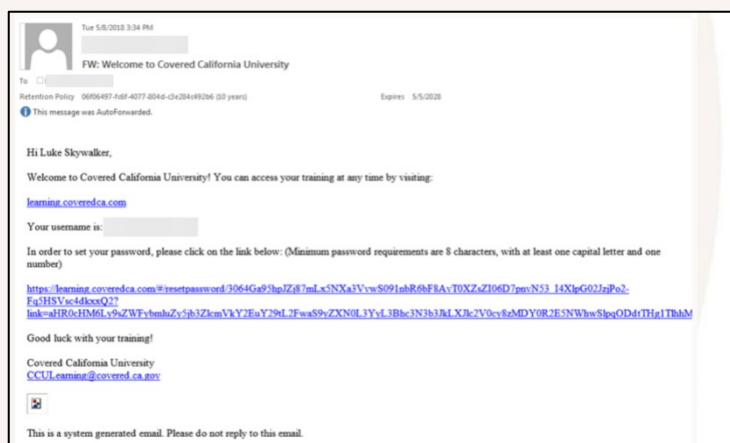
## CERTIFICATION TRAINING

**Computer-based Certification Training is provided by Covered California and will be taken through the Learning Management System (LMS).**

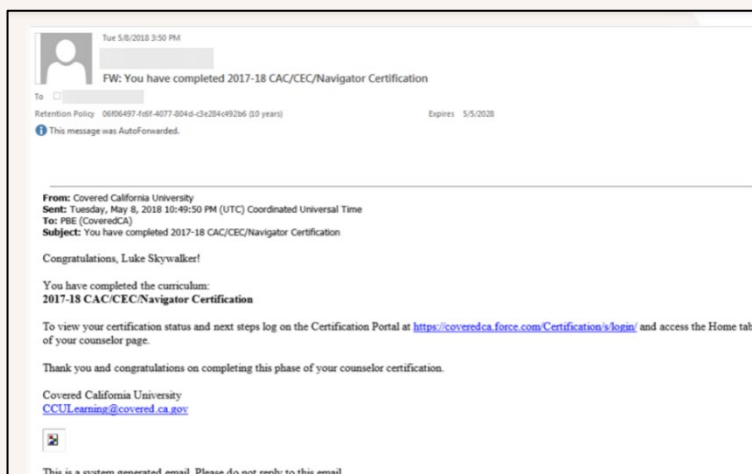
You will be enrolled in the Certification Training modules, once your profile is completed and the agreement is approved.

**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. A study guide is available in LMS under resources to help you with the exam.

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



When you complete the Certification Training courses, you will receive another automated email to confirm completion.



## IMPORTANT CERTIFICATION NOTIFICATIONS

### Requirements to Finalize your Certification

Once your Criminal Record Disclosure and Background Check are approved, the training is complete, and you pass the exam Covered California will change your status to “Certified”.

### CalHEERS Account Creation

An automated email will be sent to you with a link and instructions on how to make your CalHEERS account. A Covered California Analyst will call you to step you through the process of creating your CalHEERS account.

### Badge/ E-Badges

As a result of COVID-19, Covered California is temporarily emailing Certified Counselors an e-badge with 7 days of being Certified. Once you receive your e-badge you can begin to assist consumers for your Entity.

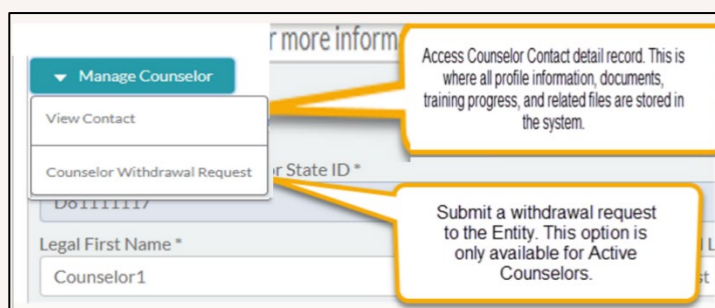
The e-badge allows counselors the ability to work successfully with consumers while awaiting a physical badge.

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](mailto:CommunityPartnerCertSupport@covered.ca.gov).

## ADDITIONAL COUNSELOR ACTIONS

### Manage Counselor-Additional Counselor Actions

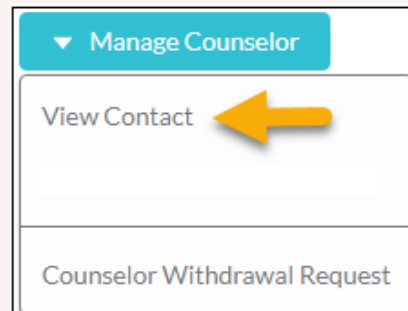
The top of the My Profile page has a drop-down menu labeled “Manage Counselor” for performing additional actions as a Counselor. See the screenshot below for available options.



## VIEW CONTACT SECTION

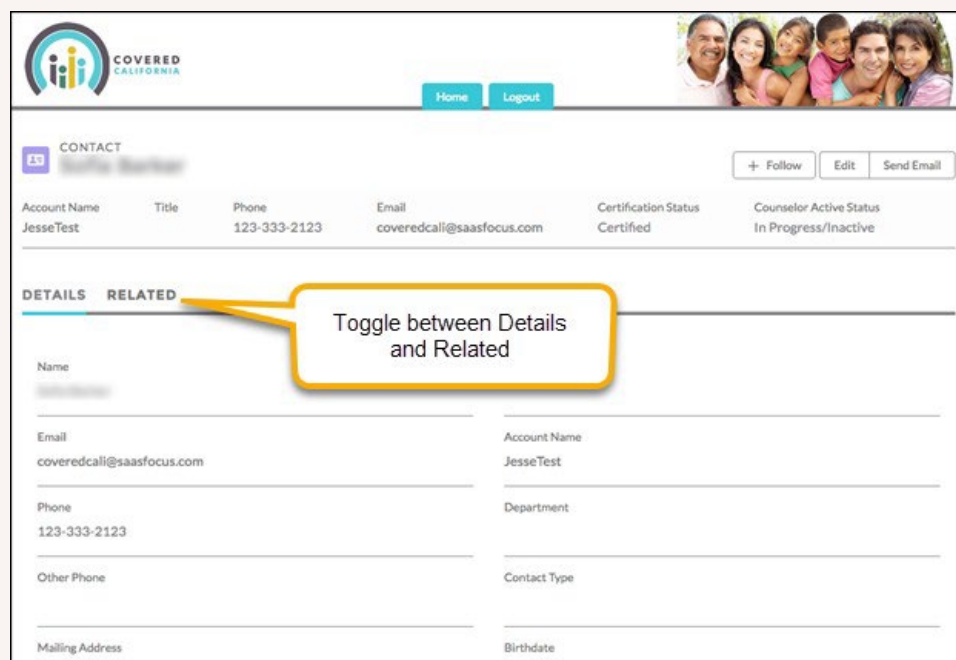
“View Contact” allows you to view your own contact record and related Information. Select “**View** Contact” from the drop-down menu under “Manage Counselor”.

Clicking on the button “View Contact” as shown in the screen below.



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

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



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	coveredcal@saasfocus.com	Certified	Active

**DETAILS** **RELATED**

**Related Accounts (1)**

ACCOUNT NAME	DELEGATION CODE	CALHEERS ASSISTANT NUMBER
JesseTest		

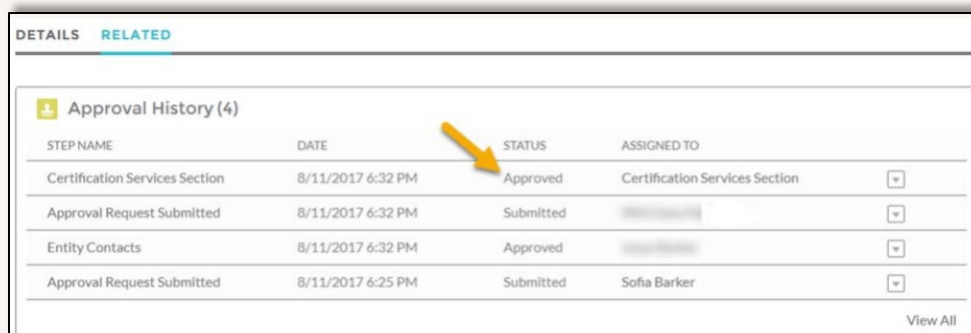
View All

**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**

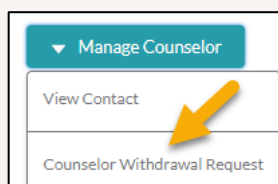
**Approval History (4)**

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.



**Manage Counselor**

- View Contact
- Counselor Withdrawal Request

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.

New Counselor Change Request: Withdrawal Request

Information

\* Counselor

Change Request

John Jones

\* Reason for Withdrawal ⓘ

Record Type

Withdrawal Request

Sample reason for withdrawal

Status

Draft

Verify your name is populated

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-166333

Clone Printable View Submit for Approval

DETAILS RELATED


Approval History (3)

Step Name	Date	Status	Assigned To
Entity Contacts	3/31/2021 8:49 AM	No Response	
Entity Contacts	3/31/2021 8:49 AM	Approved	
Approval Request Submitted	3/31/2021 8:48 AM	Submitted	

View All




- When both the Entity Contacts and the Covered California have approved of your withdrawal request your status will be updated to "Withdrawn-Entity request" within the system.


**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	
Approval Request Submitted	8/11/2017 7:06 PM	Submitted	
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

Sofia Barker

Title

Email

coveredcall@saasfocus.com

Account Name

JesseTest

Phone

123-333-2123

Department

This concludes the Certification Portal Counselors User Overview Manual training steps. If you have any questions or need assistance regarding the Certification Portal or the process, please send the Certification Services Section Team at [CommunityPartnerCertSupport@covered.ca.gov](mailto:CommunityPartnerCertSupport@covered.ca.gov).