**Employee / Candidate Screening Consent - CCW** Last Revised 2.23.24

Individuals who are being considered for participant-directed employment (employee candidates) are required to pass background screenings to verify that they qualify to receive payment through the Medicaid HCBS Waiver Program (the Agency) for delivery of these services, and to allow the Employer to make informed hiring decisions. These screenings are administered by the contracted Financial Management Service provider (ACES$) during the enrollment process and every five (5) years of their employment.

**INITIAL SCREENING:**

ACES$ will review the screening results to determine if the employee/candidate meets the Agency qualification requirements and will notify the employer of the determination (meets/does not meet).

If the candidate meets the Agency qualifications, the screening results will be provided to the Employer who will provide the results and Screening Entity (the “consumer reporting agency” who provided the screening results) contact information to the employee candidate, and share their hiring decision.

If the candidate does not meet the Agency qualification, the Employer will share the determination with the employee candidate and a summary of the screening result(s), and contact information for the Screening Entity. The Employer cannot pay the employee candidate through the Agency waiver program and the hiring process will stop.

A determination that an employee candidate does not meet the Agency qualifications based on the screening results cannot be reversed by the Agency, ACES$, the Screening Entity, or the Employer.

If information found within the screening result is thought to be inaccurate or incorrect, the employee candidate can choose to reach out to the Screening Entity to dispute the inaccurate information. By working with the Screening Entity, the employee candidate may be able to have inaccurate information corrected. Once that the information has been corrected, the Employer may reconsider the employee candidate for hiring, by submitting a request in writing to ACES$ for a second screening.

**RESCREENING:**

ACES$ will conduct a rescreening as outlined above every five (5) years for as long as the Employee continues to provide services to the Participant.

If the Employee meets the Agency qualifications, ACES$ will update the employment files to reflect the continued qualification and extend the timeline for another five (5) year period. ACES$ will notify the Employer that the Employee’s status has been verified and updated. It is the Employer’s responsibility to notify the Employee.

If the Employee no longer meets the Agency qualification, the Employer will be notified and will no longer be authorized to pay the employee through the Agency waiver program. The Employer will share the determination with the employee, provide a summary of the screening result(s) and contact information for the Screening Entity.

**PLEASE NOTE:**

* The signature page of this document will be kept on file with ACES$, for each employee, and will be **used as consent for initial and rescreening processes**.
* This includes the initial employment screening, Agency or employer requested rescreening, and the Agency required requalification screenings that will take place every five (5) years after an employee is hired, so long as the Employee remains employed by a participant-directed employer.
* If the individual is no longer working as a participant-directed employee and wishes to have this consent removed, they may submit a request to ACES$ in writing and the signed consent form will be terminated.
* Please keep this page and the “Fair Credit Reporting Act - Consumer Rights” page for your records.

**SCREENING AND RESCREENING CONSENT:**

I, (printed name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ consent to allow ACES$ FMS, acting on behalf of the State HCBS Agency, to:

1) conduct the following background screenings as outlined above, both initially for each employer and every five (5) years during my participant-directed employment.

* + Federal Sex Offender Registry
  + Wyoming Central Registry of Abuse and Neglect of Children and Vulnerable Adults (DFS Central Registry)
  + Office of Inspection General (OIG) Exclusion Database
  + National Criminal Background Check

2) view the screening results, as authorized by the Agency, for the purpose of determining if I qualify to receive payment through the Agency for participant-directed waiver services.

3) maintain a copy of the screening results within the confidential employment file, to include pass/fail registry and database results, and summary information of any barrier crime that resulted in a non-qualified determination.

3) provide the qualifying screening results or disqualifying summary information to the participant-directed employer so that they can make an informed hiring decision.

Employee candidate signature: Date

*\* This page of the consent form will be provided to the employer for their records\**

**Fair Credit Reporting Act – Consumer Rights:**

• You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (screening agency) (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

o a person has taken adverse action against you because of information in your report;

o you are the victim of identity theft and place a fraud alert in your file;

o your file contains inaccurate information as a result of fraud;

o you are on public assistance;

o you are unemployed but expect to apply for employment within 60 days.

• All consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

• You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

• Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has been verified as accurate.

• Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

• Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

• You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer.