

RCO

Probationary Certification Application Portal

User Guide

Alabama Medicaid Regional Care Organization Probationary Certification Application

Submit Notice of Intent to Apply (NOI)

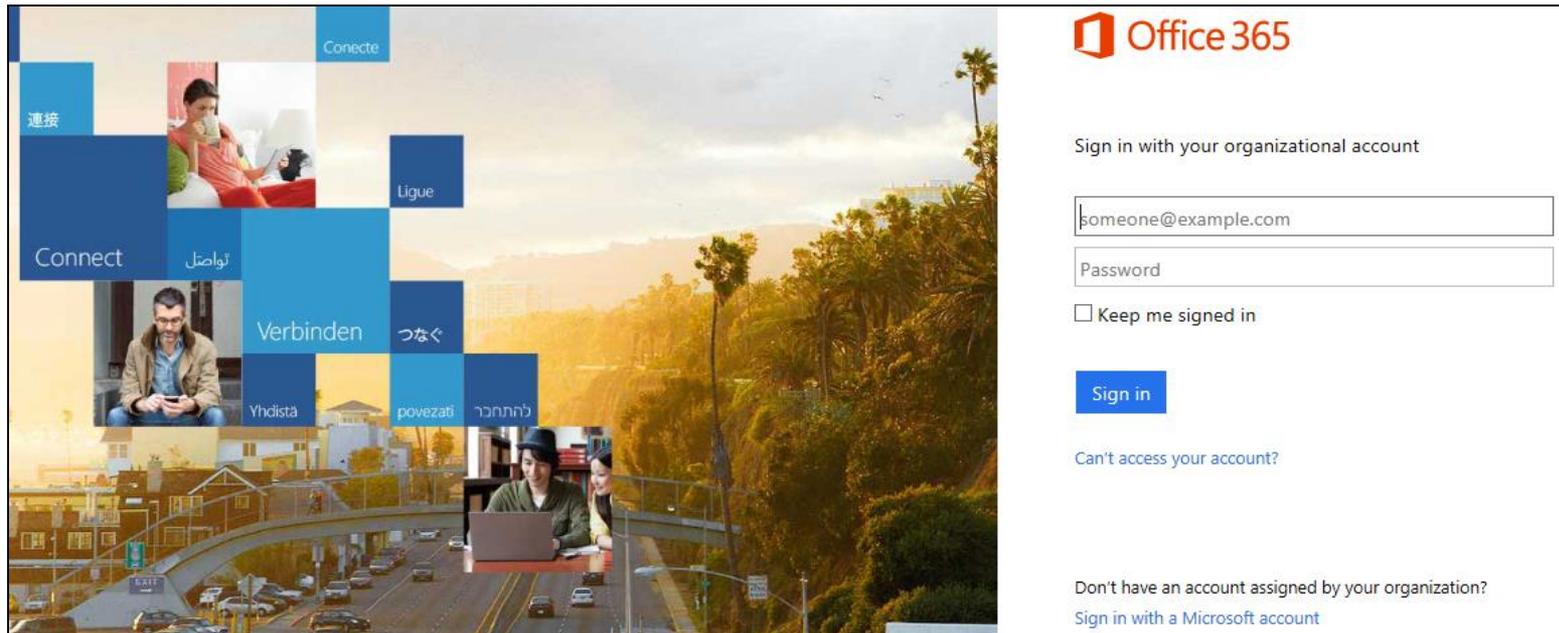
Organizations interested in applying for an RCO Probationary Certification must submit a Notice of Intent to Apply (NOI) via email to

RCOPortal@medicaid.alabama.gov, identifying the following information:

- Organization Name
- Contact Name
- Physical Address
- Mailing Address
- Email Address
- Telephone Number
- Region your organization intends to serve

Your organization will receive an email with an acknowledgement of your NOI. The email will include credentials and instructions for accessing the electronic RCO Probationary Certification Application Portal where you will complete your application.

Alabama Medicaid Regional Care Organization Probationary Certification Application

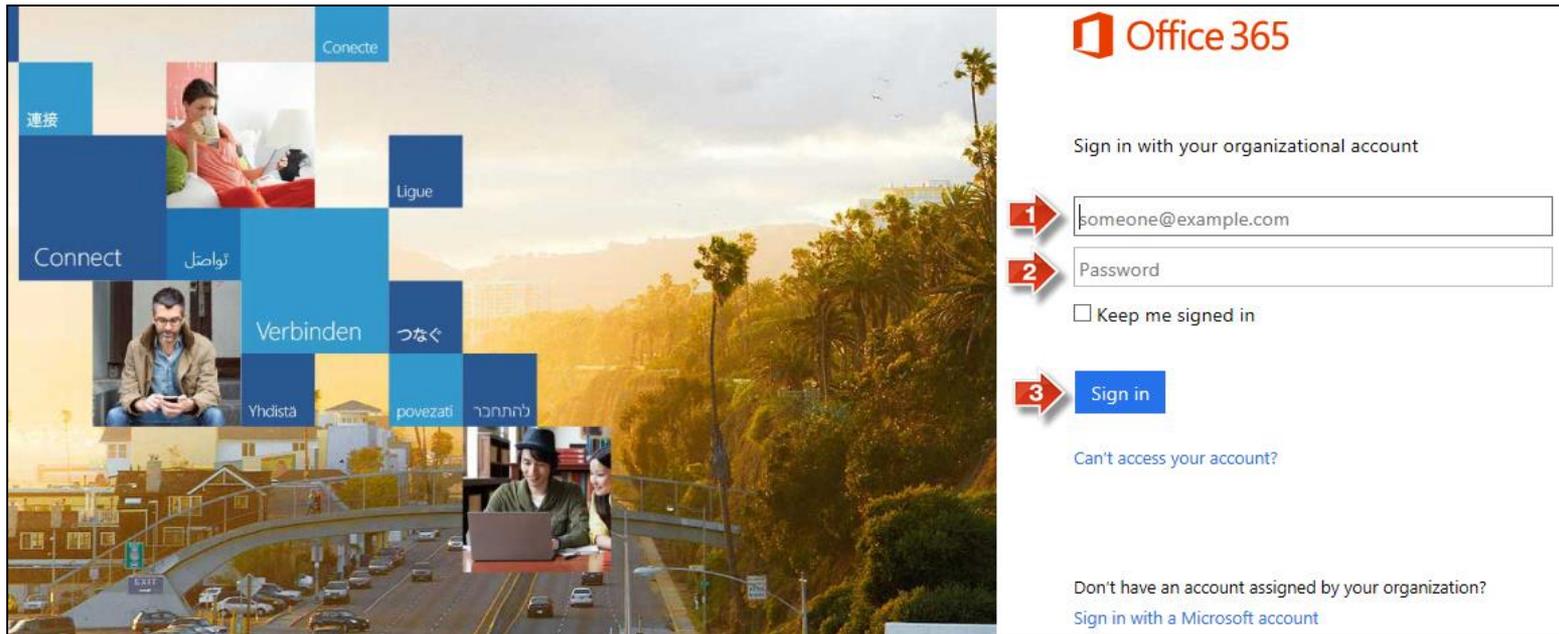


Accessing the Alabama Medicaid Regional Care Organization Portal:

1. To access the Alabama Medicaid Regional Care Organization Portal, open your Web Browser (Internet Explorer, Mozilla, Firefox, Safari, Opera, Google Chrome, etc.).
2. Enter the following URL: <http://amarco.sharepoint.com/sites/rcoportal>.

NOTE: You may also follow the portal link included in your NOI acknowledgement email.

Alabama Medicaid Regional Care Organization Probationary Certification Application



The image shows a screenshot of the Office 365 sign-in page. On the left side, there is a collage of blue buttons with the word 'Connect' in various languages: 连接 (Chinese), Conecte (Portuguese), Ligue (French), Connect (English), تواصل (Arabic), Verbinden (German), つなが (Japanese), Yhdistä (Finnish), povezati (Croatian), and להתחבר (Hebrew). The background of the collage is a scenic view of a city with palm trees and a highway. On the right side, the Office 365 logo is at the top. Below it, the text 'Sign in with your organizational account' is displayed. There are two input fields: the first is for the email address, containing 'someone@example.com', and the second is for the password, containing 'Password'. A 'Keep me signed in' checkbox is below the password field. A 'Sign in' button is highlighted with a red arrow and the number '3'. Below the button, there is a link 'Can't access your account?'. At the bottom, there is a link 'Don't have an account assigned by your organization? Sign in with a Microsoft account'.

Sign in to create and submit an application, modify and resubmit a previously submitted application, or edit the organization's profile.

1. Enter the organizational account **User name**.
2. Enter the organizational account **Password**.
3. Click **Sign in**.

Probationary Certification Application Portal User Account Management



Sign in with your organizational account

Keep me signed in

Sign in

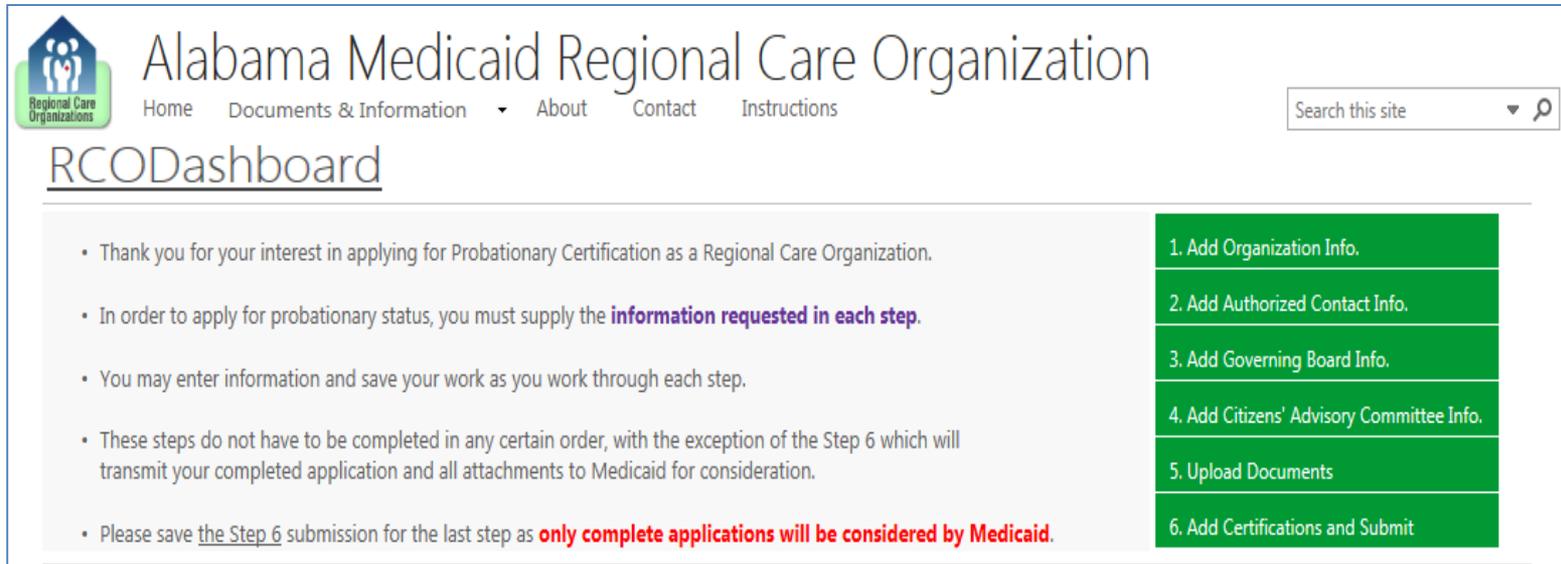
[Can't access your account?](#)

Probationary Certification Application Portal user accounts are managed by the Medicaid Agency's technical support team. Once a username and password is assigned to an organization, the system will generate an automated email to the RCO contact on file.

If your organization needs support accessing the portal, please call Technical Support at (334) 242-5941 or email to RCOPortal@medicaid.alabama.gov.

NOTE: Please do not use the "Can't access your account?" link on the Office 365 sign in page. The link does not redirect to the portal technical support team.

Regional Care Organization Home Page



The screenshot shows the Alabama Medicaid Regional Care Organization website. At the top left is the logo for Regional Care Organizations, featuring a stylized house with two figures inside. To the right of the logo is the text "Alabama Medicaid Regional Care Organization". Below this is a horizontal navigation menu with links for "Home", "Documents & Information", "About", "Contact", and "Instructions". On the far right of the header is a search box labeled "Search this site" with a magnifying glass icon. Below the navigation menu is the heading "RCODashboard". The main content area is divided into two columns. The left column contains a list of instructions for applying for Probationary Certification. The right column contains a vertical list of six steps, each in a green button: "1. Add Organization Info.", "2. Add Authorized Contact Info.", "3. Add Governing Board Info.", "4. Add Citizens' Advisory Committee Info.", "5. Upload Documents", and "6. Add Certifications and Submit".

Regional Care Organizations

Alabama Medicaid Regional Care Organization

Home Documents & Information About Contact Instructions

Search this site

RCODashboard

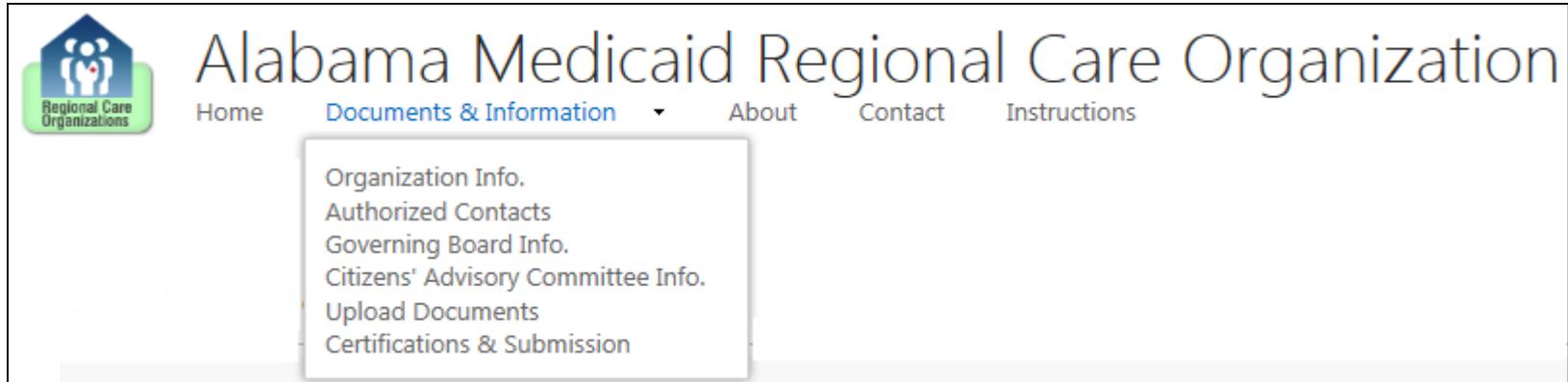
- Thank you for your interest in applying for Probationary Certification as a Regional Care Organization.
- In order to apply for probationary status, you must supply the **information requested in each step**.
- You may enter information and save your work as you work through each step.
- These steps do not have to be completed in any certain order, with the exception of the Step 6 which will transmit your completed application and all attachments to Medicaid for consideration.
- Please save the Step 6 submission for the last step as **only complete applications will be considered by Medicaid**.

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

The Regional Care Organization Dashboard includes a Horizontal Navigation Menu (Home, Documents & Information, About, Contact, and Instructions), an informational area, and a 6-Step Dashboard for navigating directly to each of the 6 steps of completing and submitting a Probationary Certification Application. Additionally, there are six areas at the bottom of the page (one for each step in the process) used to display and access saved/submitted portal activity (see user guide pages 25-27).

Clicking **Home** from anywhere in the system will return the user to the Dashboard.

Horizontal Navigation Menu – Documents & Information



1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

The **Documents & Information** menu provides an additional method of navigating directly to each of the 6 steps of completing and submitting a Probationary Certification Application. Applicants may choose to use either navigational method to move through the Probationary Certification Application process.

Horizontal Navigation Menu - ABOUT



Alabama Medicaid Regional Care Organization

[Home](#) [Documents & Information](#) [About](#) [Contact](#) [Instructions](#)

About Us

An organization may receive probationary certification as a regional care organization (Probationary Certification) upon submission of an application to the Medicaid Agency that satisfies the requirements of the Medicaid Administrative Code and Sections 22-6-150, *et seq.* of the Alabama Code.

All interested organizations shall submit an electronic application through this Portal. The holder of a Probationary Certificate as a Regional Care Organization (Certificate Holder) shall promptly notify the Medicaid Agency of any substantial or material corrections or updates to the information provided in connection with the Certificate Holder's application.

All applications submitted pursuant to this rule, all Probationary Certificates as a Regional Care Organization, and the names and addresses of all organizations and contact persons to whom the Medicaid Agency issues Probationary Certificates as a Regional Care Organization shall be public record(s) and shall be subject to disclosure. The Medicaid Agency may redact confidential or personal information prior to disclosure.

The Medicaid Agency shall actively monitor and supervise the collective negotiations, bargaining, and cooperation among Probationary Certificate Holders in accordance with Sections 22-6-150, *et seq.* of the Alabama Code.

For further information regarding probationary certification please refer to Alabama Medicaid Agency Administrative Code Rules 560-X-62-.03 *et seq.*

The **About** menu describes the probationary certification process as defined by the Medicaid Administrative Code and Sections 22-6-150, *et seq.* of the Alabama Code.

Horizontal Navigation Menu - CONTACT



Alabama Medicaid Regional Care Organization

Home Documents & Information ▾ About **Contact** Instructions

Contact Us

Technical Support: (334)242-5941

Application Support: (334)353-5539

Mailing Address

PO Box 5624
Montgomery, AL
36103-5624

Street/Shipping Address

501 Dexter Avenue
Montgomery, AL
36104

Email

[Medicaid RCO Portal Help](#)

The **Contact** menu provides contact information for both technical and application support. Support can be obtained by phone, mail, and/or email.

Horizontal Navigation Menu - INSTRUCTIONS



Step by Step Instructions

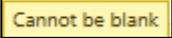


The **Instructions** menu displays a visual of the 6-Step application process including an example of the information required within each step.

6-Step Application Process:

1. Organization Info.
2. Authorized Contacts
3. Governing Board Info.
4. Citizens' Advisory Committee Info.
5. Upload Documents
6. Certifications & Submission

Required Fields & Data Entry Format

Required Fields: There are several mandatory fields throughout the application process. Required fields are marked with a red asterisk (*) that will disappear once information is entered into the field. 

Data Entry Format: The phone number, zip code and email fields have data entry formatting constraints applied as follows:

Telephone: (###)###-#### 

Zip code: ##### OR #####-#### 

Email: RCO@example.com 

Dropdown Lists: Dropdown lists display a list of values users must select from.

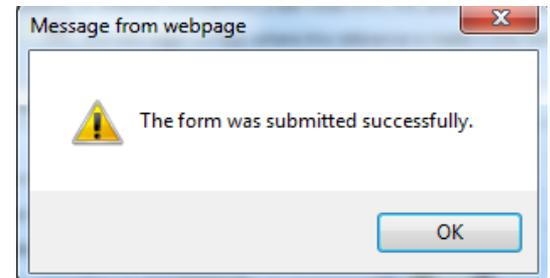
Expanding Question Set: The forms within the system have been designed to expand as needed based on user response. When activated by a response, a subset of questions will appear.

Saving & Submitting

Each of the first 5 Steps of the Probationary Certification Application process can be completed in any order. In each step the organization will complete a set of questions on a form. Once the form is completed, the user must click **Save** to store the information as part of the application. Steps 1 and 3 are both 2-part forms requiring the user to complete the first screen and then click **Next** to navigate to the second screen in order to complete and save the form.

Steps 2, 3, 4, and 5 can each be repeated as needed. The forms for these steps will remain open after the user clicks **Save** to make it more efficient to enter multiple forms in these areas. Once finished saving forms in these steps, click **Close** to return to the system Dashboard.

Once a form has been saved, users will receive a system message indicating “The form was submitted successfully.” Click **Ok** to close the system message.



Step 6 is the final step in the Probationary Certification Application process and **MUST BE** submitted after all other required information has been entered in the previous 5 steps.

Application Modifications

Applications may be modified as needed prior to the submission of the final step – Step 6 Certifications and Submit. It is imperative that organizations complete all requirements of Steps 1 through 5 prior to submitting Step 6.

The completion of Step 6 certifies the application is ready for review and determination by the Medicaid Agency.

Step 6 – Certifications and Submit must be completed with each modification made to the application following the initial Probationary Certification Application submission. Every modification to the initial application submitted requires an additional review and determination by the Medicaid Agency.

Notice of Determination

Submitted Probationary Certification Applications are reviewed by the Medicaid Agency. Once a determination has been made, a written notice of determination will be mailed to the contact identified on the Notice of Intent information.

6-Step Application Process

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 1 - Add Organization Info.

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 1 – **Add Organization Info** is a 2-page form. The first page includes required and optional fields associated to the organization's structure. After completing the first page, click the **Next** button at the bottom to navigate to the second page.

Regional Care Organizations

Step 1
DO NOT REPEAT STEP 1

Alabama Medicaid Regional Care Organization

Business Name test2

Mailing Address *

City, County, State, Zip * * * * *

Physical Address same as Mailing Address

Physical Address *

City, County, State, Zip * * * * *

E-Mail *

Telephone *

RCO Regions Region A
 Region B
 Region C
 Region D
 Region E

National Provider ID #

Medicaid ID Number

TIN/EIN *

State Professional/Facility License #:

Certificate to Collaborate # *

Registered Agent *

Agent Business Name *

Agent Mailing Address *

City, State, Zip * * * * *

Agent E-Mail *

Agent Telephone *

Next >> Cancel

Step 1 - Add Organization Info.

Continued...

Step 1 – Continued....

The second page of the **Add Organizational Info** form requires organization to respond to a number of statements. Please be aware that some of the questions include a subset of questions based on the response to previous question. Once both pages of the Add Organization Info. form is complete, click **Save** to submit. If you have a need to return to the first page of the form, click **Back**.

Note: This form should be completed just once. If modifications are required prior to Agency Probationary Certification determination, please request changes be made via the technical support email: [Medicaid RCO Portal Help](#)

Step 1 continued
DO NOT REPEAT STEP 1

Regional Care Organizations

Organizational Structure

1. Is this organization incorporated as a nonprofit corporation under Alabama law?
2. Does the organization's Certificate of Formation mandate that:

(a) Please select Yes or No. The organization's net earnings shall inure to the benefit of any private shareholder or individual? ; Indicate page number where this reference is made in the Certificate of Formation

No substantial part of the activities of the organization shall include carrying on propaganda, or otherwise attempting, to influence legislation (except as otherwise provided in section 501(h) of the Internal Revenue Code of 1986)? ; Indicate page number where this reference is made in the Certificate of Formation

(b) The organization shall not participate in, or intervene in (including the publishing or distributing of statements), any political campaign on behalf of (or in opposition to) any candidate for public office? ; Indicate page number where this reference is made in the Certificate of Formation

(c) All of the gross revenues of the organization shall be received from government programs that target low-income, elderly, or disabled populations under titles XVIII, XIX, and XXI of the Social Security Act? ; Indicate page number where this reference is made in the Certificate of Formation

(d)
3. Is this organization created by only one risk-bearing participant?
4. Executive Committee

(a) Has this organization formed an executive committee?

(b) Does this committee have two or more directors?

(c) Are all at-risk provider types represented on the committee?

(d) Will all actions of this committee be reported to the governing board?

(e) Is at least one member of this committee one of the MASA appointees to the governing board?

(f) Has the organization coordinated its appointments to this committee so that the diversity of gender, race, and geographical areas of the committee members is reflective of the makeup of the Medicaid region?
5. Other Committee(s)

(a) Has this organization appointed, or does it intend to appoint, other committees as are consistent with Alabama law?

(b) Are, and will, all actions of any such committee(s) be reported to the governing board?

(c) Is, or will, at least one member of any such committee(s) be one of the MASA appointees to the governing board?

Step 2 - Add Authorized Contact Info.

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 2 – Add Authorized Contact Info. collects contact information for all individuals authorized to have access to the Probationary Certification Application Portal. Complete the form for each Authorized Contact. Click **Save** to submit after each.

Note: This form may be completed as many times as needed.

RCO Authorized Contacts

Step 2
Repeat step 2 as needed

RCO Authorized Contact

First Name

Last Name

Mailing Address

City, State, Zip

Email Address

Telephone

Step 3 - Add Governing Board Info.

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 3 – **Add Governing Board Info.** is a 2-page form. The first page collects contact information for each member of the RCO's Governing Board. After completing the first page, click the **Next** button at the bottom to navigate to the second page.

Governing Board of Directors

Step 3
Repeat step 3 as needed

Board of Directors Member

Full Name

Gender, Ethnicity

RCO Regions Region A Region B Region C Region D Region E

Mailing Address

City, County, State, Zip

Physical Address same as Mailing Address

Physical Address

City, County, State, Zip

Telephone Number

Cannot be blank
Select... If a provider, is this provider currently, or has this provider ever been disqualified from participating in Medicare or Medicaid?

NPI #

Medicaid ID #

TIN/SSN

Certificate to Collaborate #

State Pro/Facility License #

Board Appointment Date

Board Expiration Date

Business, Occupation or Medical Specialty

If a provider, is this provider type licensed under the laws of the State of Alabama?

If a provider, does this provider meet the licensing requirements set by law for his/her/its profession/industry?

Board Member Risk Type

Step 3 - Add Governing Board Info.

Continued...

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 3 – Continued.... The second page of the **Add Governing Board Info.** form requires completion of a Criminal Background Questionnaire regarding the board member being added. Click **Save** to submit the form when finished.

Note: RCO's are required to identify **twenty** Board Members. Users may return to Step 3 as often as needed prior to completing Step 6 (Submission). Click **Close** when done adding Governing Board members.

Governing Board of Directors

Step 3 continued
Repeat step 3 as needed

Background Questionnaire

In responding to the following, if the record has been sealed or expunged, and the proposed board

- member has personally verified that the record was sealed or expunged, an applicant may respond "no" to the question. Has this board member ever:
 - Been refused an occupational, professional, or vocational license or permit by any regulatory authority, or any public administrative, or governmental licensing agency?
 - Had any occupational, professional, or vocational license or permit that has been subject to any judicial, administrative, regulatory, or disciplinary action?
 - Been placed on probation or had a fine levied against you or your occupational, professional, or vocational license or permit in any judicial, administrative, regulatory, or disciplinary action?
 - Been charged with, or indicted for, any criminal offense(s) other than civil traffic offenses?
 - Pled guilty, or nolo contendere, or been convicted of, any criminal offense(s) other than civil traffic offenses?
 - Had a ~~indication of guilt withheld~~, had a sentence imposed or suspended, had pronouncement of a sentence, or been fined, or placed on probation, for any criminal offense(s) other than civil traffic offenses?
 - Been, within the last ten (10) years, subject of any civil judgment involving dishonesty, breach of trust, or foreclosure?
- Has the member ever filed a bankruptcy proceeding or had one filed against them?

Step 4 - Add Citizens' Advisory Committee Info.

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 4 – The **Add Citizens' Advisory Committee Info.** Form collects contact and committee information for all members of the RCO's Citizens' Advisory Committee. Complete one form for each Advisory Committee member. Click **Save** to submit after each.

Note: This form may be completed as many times as needed.

Citizens' Advisory Committee Members

Step 4
Repeat step 4 as needed

Citizens' Advisory Committee Member

Full Name

Gender, Ethnicity

Occupation

Mailing Address

City, County, State, Zip

Physical Address is same as Mailing Address

Physical Address

City, County, State, Zip

Telephone

E-Mail

Board Appointment Date

Board Expiration Date

Designated Role on Board

Select.. Is this committee member a Medicaid Beneficiary?

Select.. Is this committee member a member of an organization that is part of the Disabilities Leadership Coalition of Alabama or Alabama Arise?

Save Close

Step 5 - Upload Documents



Add a document

Choose a file

[Upload files using Windows Explorer instead](#)

Add as a new version to existing files

Version Comments

Step 5 – The **Upload Documents** screen allows you to upload required documents. To upload a document, click on the **Browse** button, select the file you are uploading, and click on **Open**. The file name should appear in the textbox to the left of the Browse button. The Version Comments field allows you to enter notes regarding the document you are uploading. Click **Ok** to move to the second Upload Document screen.

Note: Versioning is a file system which allows a document to exist in several versions at the same time. The Probationary Certification Application utilizes versioning to allow for both updated files to be stored and historic versions of the same document to be accessed. The Versioning option is selected by default and should not be adjusted.

Step 5 - Upload Documents

Continued...

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Upload Documents

Title

Document Type

Version: 1.0
Created at 5/6/2014 8:50 AM by Micki Allen
Last modified at 5/6/2014 8:50 AM by Micki Allen

Step 5 – The second screen in the **Upload Documents** process allows a document title to be entered in the **Title** field. Select the appropriate **Document Type** from the drop down list. Click **Save** to upload the document.

Note: You may upload as many documents as needed. If a document is uploaded with the wrong document type, simply repeat the upload process selecting the correct document type.

Document Type Options:

- a. Articles of Incorporation
- b. Bylaws
- c. Operating Agreement
- d. Certificate of Formation
- e. Rules
- f. Trust Agreements
- g. Organizational Minutes
- h. Minutes appointing or designating persons as officers/directors/managers
- i. IRS Form 1023, Application for Recognition of Exemption
- j. Proposed Organizational Chart
- k. Description of the method used to select members of the Citizens' Advisory Committee
- l. Resolution
- m. Other

Step 6 - Add Certifications and Submit

1. Add Organization Info.
2. Add Authorized Contact Info.
3. Add Governing Board Info.
4. Add Citizens' Advisory Committee Info.
5. Upload Documents
6. Add Certifications and Submit

Step 6 – **Add Certifications and Submit** is the final step of the Probationary Certification Application process and should not be submitted until all requirements for the first 5 steps of the Application have been satisfied. Step 6 requires the user to enter their initials and an electronic signature affirming and certifying to each of the statements included. Clicking Submit begins the Probationary Application review.

Step 6
Submit ONLY when your application is complete

Certifications and Submission

I, undersigned on behalf of Regional Care Organization, hereby certify that

(Initials) All information entered on this application is true to the best of my knowledge

(Initials) All bargaining in the creation of the organization has been or will continue to be in good faith

(Initials) That such bargaining has been and will continue to be necessary to identify appropriate service delivery systems and reimbursement methods in order to align incentives in support of integrated and coordinated health care delivery

(Initials) That such bargaining has and will continue to be necessary to provide quality health care to citizens who are Medicaid eligible at the lowest possible cost

(Initials) That the organization is not an entity that must be excluded from contracts as a condition for federal financial participation pursuant to 42 C.F.R. § 438.808

(Initials) That the organization does not have a prohibited affiliation with any individual debarred by a federal agency within the meaning of 42 C.F.R. § 438.610

(Initials) That each risk bearing participant has the financial ability and solvency to satisfy his/her obligations as a risk bearing participant

(Initials) That the applicant intends to provide services to Medicaid beneficiaries in all counties of each Medicaid region the organization plans to serve

(Initials) That the organization is organized in a manner consistent with the accomplishment of its stated mission which shall include, as a minimum, delivery of basic health care services in accordance with section 22-6-150, et seq. of the Alabama Code

(Initials) That the organization complies with applicable laws and regulations

(Initials) That the organization agrees to promptly notify the Medicaid Agency of any substantial or material corrections or updates to the information provided in this application as required by rule Rule 560-X-62-.05(17)

(Initials) That the organization complies with all diversity requirements for its boards and committees as required by the Medicaid Administrative Code and Alabama law

(Initials) That a majority of the Board of Directors members do not and will not represent a single provider
----OR----

(Initials) That only one entity has offered to be a risk-bearing participant in the organization as defined in Section 22-6-151(c)(1) of the Alabama Code

Applicant's/Authorized Representative's Electronic Signature

Dashboard “Content” Lists

Step 1: Regional Care Organization

✓ Edit Business Name
 round2

Step 2: Authorized Contact

✓ Edit First Name Last Name
 Micki Allen

Step 3: Governing Board

✓ Edit Full Name Board Member Risk Type
 dsf test3 Risk Bearing

Step 4: Citizens' Advisory Committee

✓ Edit Full Name Designated Role on Committee
 CAC 1 Medical Professional

Step 5: Upload Document

✓ Title Name
d. Certificate of Formation-test 2, AIMedUserCleanUp

Step 6: Certifications and Submission

✓ Edit ApplicantElectronicSignature Submitted
 sdfa 5/5/2014

Each time a user saves a form or uploads a document in the portal it is saved as a file within the system. Both completed forms and uploaded documents may be accessed by clicking the item within its perspective Dashboard content list.

Completed forms will open in view only mode in a new browser window. To close the form in view close the browser it appears in.

Uploaded documents will open in their native application on the user’s computer system (e.g. An Excel document will open in Microsoft Excel). To close an uploaded document close the application it opens in.

View & Print Completed Forms

Step 1: Regional Care Organization

✓ Edit Business Name

 round2

Step 2: Authorized Contact

✓ Edit First Name Last Name

 Micki Allen

Step 3: Governing Board

✓ Edit Full Name Board Member Risk Type

 dsf test3 Risk Bearing

Step 4: Citizens' Advisory Committee

✓ Edit Full Name Designated Role on Committee

 CAC 1 Medical Professional

Step 5: Upload Document

✓ Title Name

d. Certificate of Formation-test 2, AIMedUserCleanUp

Step 6: Certifications and Submission

✓ Edit ApplicantElectronicSignature Submitted

 sdfa 5/5/2014

To view a completed form, click the form you wish to view from its category. The completed form will open in a read only state within the Internet Browser. Users can print completed forms using the Internet Browser print function:

1. Click the **File** Tab.
2. Click **Print**. The Print dialog box will display.
3. Select printer options as desired.
4. Click **Print**.

To close the form in view, close the browser it appears in.

View & Print Uploaded Documents

Step 1: Regional Care Organization

✓ Edit Business Name
 round2

Step 2: Authorized Contact

✓ Edit First Name Last Name
 Micki Allen

Step 3: Governing Board

✓ Edit Full Name Board Member Risk Type
 dsf test3 Risk Bearing

Step 4: Citizens' Advisory Committee

✓ Edit Full Name Designated Role on Committee
 CAC 1 Medical Professional

Step 5: Upload Document

✓ Title Name
d. Certificate of Formation-test 2, AIMedUserCleanUp

Step 6: Certifications and Submission

✓ Edit ApplicantElectronicSignature Submitted
 sdfa 5/5/2014

Each time a user uploads a document to the portal it is saved as a file within the system. All documents uploaded can be viewed beneath the Uploaded Document category located on the Dashboard.

To view an uploaded document, click the file's name. The document will open in its native application on your computer (eg an Excel document will open in Microsoft Excel. Once open, users may review the document. Use the application's print functionality to print it. To close an uploaded document close the application it opens in.