

# ISAC's Community Behavioral Health Care Professional Loan Repayment Program

# **User Guide**



Certification of an applicant's eligibility for the Community Behavioral Health Care Professional Loan Repayment Program (CBH LRP) by an approved community mental health facility must take place in the ISAC Gift Assistance Programs (GAP) Access portal before program benefits can be awarded and disbursed on behalf of an applicant. Each facility is expected to appoint an authorized staff member to serve as the Primary Administrator, who will serve as the main contact person for ISAC and complete the certification process to confirm eligibility.

Before certification can be completed, the Primary Administrator must register in GAP Access. As part of the registration process, your name and affiliation to your facility will be verified prior to the issuance of an acceptance e-mail. Once registration is complete, you will be able to perform all program functions and/or you may assign other facility staff member(s) to various functions, such as granting privileges, resetting passwords, and viewing and updating applicant records.

In order to establish yourself as the GAP Access Primary Administrator and activate your account, follow the steps below.

If at any point, your facility needs to establish a new Primary Administrator or you need assistance adding other users, **contact ISAC via email at:** <u>isac.schoolservices@illinois.gov</u> or <u>isac.communitypartnerservices@illinois.gov</u>, or by phone at: 866-247-2172.

#### **GAP** Access registration instructions:

- 1. Go to the GAP Access Login screen at <u>https://isacportal.isac.org</u>, or use the Quick Links menu at the bottom of the home page.
- 2. Click on the "Click here to register" link.





Under 'Select type of user', Select 'Administrator', and then click on the 'Continue' button.
 a. If 'User' is selected by mistake, click on "Previous Step."

GAPACCESS	JB Pritzker, Governor, State of Illinois
User Login	
Select type of user	
Administrator     Itser	
Continue	

- 4. Click on "Partner Type" dropdown, and select "Community Behavioral Health Care Professional"
  - a. NOTE: Default selection for "Partner Type" is "Post Secondary Institution."

User Login		
Administrator Registration *Indicates required field Previous Step		
	Partner Type	
	Community Behavioral Health Care Professional 🗸	
	Community Behavioral Health Care Professional Golden Apple Foundation High School National Guard Base Post Secondary Institution Illinois Department of Veterans' Affairs	

5. Click on "Facility Name – ISAC Code" dropdown to search for specific facility. a. NOTE: ISAC Code adjacent to facility name is unique to ISAC.

GAPACCESS		JB Pritzker, Governor, State of Illinois
User Login		
Administrator Registration *Indicates required field Previous Step		
	Partner Type Community Behavioral Health Care Professional	
	* Facility Name - ISAC Code	

- 6. Complete all the remaining fields on the "Administrator Registration" page.
  - a. All fields that have an asterisk(\*) are required.
  - b. The User ID must be 10 characters or less and must include at least one numeric digit.
  - c. The Password must include at least one uppercase letter, one lowercase letter, one numeric digit, and a special character -- {!@#\$%^&+=}.
  - d. The password must be a minimum of eight (8) characters.

User Login	
Administrator Registration *Indicates required field	
Previous Step	
	Partner Type
	Community Benavioral Health Care Professional
	^ Facility Name - ISAC Code
	*Leet Name
	* First Name
	Middle Initial
	^ E-mail
	* User ID
	^ Password
	A Canfirm Descurred
	* Select Challenge Question
	What is the name of your elementary school?
	* Challenge Question Answer
	* Confirm Challenge Question Answer
	* Select Challenge Question
	What is the name of your elementary school?
	* Challenge Question Answer
	* Confirm Challenge Question Answer
	t Calcot Challenge Question
	What is the name of your elementary school?
	* Challenge Question Answer
	* Confirm Challenge Question Answer
	* Select Challenge Question
	What is the name of your elementary school?
	* Challenge Question Answer
	* Confirm Challenge Question Answer
	*Review Confidentiality Certification before checking Agree box
	□ I agree to comply with the statements in the <u>Confidentiality Certification</u>

7. After all fields have been completed on the "Administrator Registration" page, review the Confidentiality Certification by clicking on hyperlink.

a. Upon clicking Confidentiality Certification, it will open in a new tab within a web browser.

What was the name	e of your first pet?
allenge Question	n Answer
kample	
onfirm Challenge	Question Answer
xample	
*Review	Confidentiality Certification before checking Agree box comply with the statements in the Confidentiality Certificati

8. After reviewing the Confidentiality Certification, check the box next to "I agree to comply with the statements in the Confidentiality Certification."

a. NOTE: If box is not checked, user will not be able to click on the "Confirm" button.



9. After checking the box, click on "Confirm" to continue to Registration Confirmation Page.

User Login
Registration Confirmation Page  Indicates required field
Previous Step
Facility name-000000 Last Name
First Name
Middle Initial
E-mail
User ID
Selected Challenge Question What is the name of your elementary school?
Challenge Question Answer
Selected Challenge Question Who is your favorite author?
Challenge Question Answer
Selected Challenge Question What is your favorite movie?
Challenge Question Answer
Submit Make Corrections

10. Review all data.

- a. If changes are needed, click on the "Make Corrections" button, correct as needed, and click on the "Confirm" button again.
- 11. If no further changes are needed, click on the "Submit" button.

12. After clicking on the "Submit" button, you will see a screen indicating that your registration is complete, and a message that ISAC's Community Partner Services will verify your registration and then send you a confirmation e-mail. At this point, you should close your browser window

						JB Pritzker, Governor, State of Illinois	
User Login							
Registration is com	pleted.						
Your registration is comp	leted. Community Partn	er Services wil	l verify your registration	and will send a confirm	ation email.		
Your patience is apprecia	ited, as account process	sing may take 2	2 - 3 business days to co	omplete.			
Do not attempt to acces	ss the account until IS	AC has set up	the account.				
<ul> <li>When ISAC sets u</li> <li>One e-mail will pro</li> <li>The other e-mail w</li> <li>Clicking on the link</li> </ul>	p the access request, th wide the link/URL that th ill provide the Setup Co c and entering the Setup	e user will rece ne user will nee de (access coo code will com	eive two separate e-mail ed to activate the accoun de). uplete the user registration	Is from ISAC's Commur nt. on process and will acti	nity Partner Services (isa	.c.CommunityPartnerServices@Illinois.gov). count.	
	Contact ISAC	FAAs	MAP Program	MTI Program	ING Program	IVG Program	

13. Watch for an e-mail from ISAC, which will provide the link/URL that is needed to activate your account.

a. NOTE: An additional e-mail is to be expected as it will contain a necessary "Setup Code."

14. The user requesting access will need to activate their account within 48 hours of receiving the e-mail confirmation. This can be done using the link provided in the confirmation e-mail.

15. Failing to activate the link within the stipulated timeline, will end in denial of the request and the user profile will be removed from the ISAC system.

16. Facility users are responsible for verifying the authenticity of the request for any additional users.

17. Once the "Setup Code" is received, use the link provided within the e-mail to activate your account.



18. Enter the "Setup Code" provided by ISAC, and click on "Enter." The web browser will change to the following screen with a notification that the user account is activated.

GAP ACCESS		JB Pritzker, Governor, State of Illinois
User Login		
	User is activated. Please	
	login	
	User ID	
	Password	
	Login	
	Forgot Password? Forgot User ID?	
	Click here to register	

19. Enter the "User ID" and "Password" created during registration process, then click on the "Login" button.

20. GAP Access will prompt the user to set up Two-Factor Authentication. (If additional assistance is needed with this step, see the User guide found at <u>https://www.isac.org/gap-access/media/Two-Factor-Auth-User-Guide.pdf.</u>)

a. NOTE: Two-factor Authentication set up will appear with first-time login.

		JB Poliziker, Gövernor, Sinte of Binois
User Login		
Two-Factor Authentication Setup		
Options	Install	Verify
Authenticator App Options Two-factor authentication is necessary to make your app	account truly secure. To access your GAP account yo s to download and install on your Android or iPhone de Authy Authenticator Microsoft Authenticator Gogle Authenticator	u must choose one of the following authentication vice: Next
Contact ISAC FAAs	MAP Program MTI Program ING	Program IVG Program

21. If you have forgotten your Profile password, you can easily reset it by clicking on the "Forgot Password" link on the Log In screen. You will be asked for your User ID, which is the e-mail address you used when you setup your Profile, and then you will be prompted to answer your challenge question. After correctly answering the question, you will be prompted to reset your password.

22. Reminder: GAP Access Users should remember to log out of the system when you are finished working in it.

a. Logout is located on the top right side of GAP Access screen. Hover your curser over the facility name and click "Logout."



#### Instructions for accessing the CBH LRP Program:

1. Login with your "User ID" and "Password" created during the registration process, then click "Login." You will see a message to indicate that you have successfully logged in. You may also be presented with an ISAC survey to complete, which is optional.

		•			•	JB Pritzker, Governor, State of Illinois	
Administration Programs							
User Login: Successful							
Welcome,							
Undate Profile							
ISAC Survey							
Please click <i>here</i> to take Survey.							
3	New GAP Access Survey					>	<
	Question	Rating 1	l (Low) to	5 (Excelle	ent)		
	How do you rate the look and feel of GAP Access?	0 1	0 2	3	0 4	5	
	How easy is it to find what you need on GAP Access?	0 1	0 2	3	0 4	5	
Contact ISAC	How easy or hard is navigation on GAP Access?	0 1	0 2	3	0 4	5	
	How do you rate the functionality of GAP Access?	1	2	3	04	5	
	Overall, how would you rate GAP Access?	1	2	3	0 4	5	
		-14					
	Subr	nic					

Sample of optional ISAC survey.

2. On the login screen, an "Update Profile" button is available if you need to make changes to your user information.

GAPACCESS ISAC Gitt Assistance Programs
Administration Programs
User Login: Successful Welcome, TEST TESTER
Update Profile

a. Click the "Update Profile" button to go to the "Update User Profile" screen. Update any fields as needed, and then click the "Submit" button (or, if no changes are needed, click the "Back" button).

Administration Programs	
Update User Profile	
*Indicates required field	
Last Name	
First Name	
Middle Initial	
Email Address	
Confirm Email Address	
* Security Question-1	
Security Answer-1	~
* Security Question-2	
Who is your favorite author?	~
Security Answer-2	
* Security Question-3	
What was the name of your first pet?	~
Security Answer-3	
Change Password	
Submit Home	

b. If you need to change your Password, click on the "Change Password" link that appears at the bottom of the Update User Profile screen. Prior to changing your password, you will need to provide the security question responses that you entered when first creating your account. If you try to change your password but do not know your security question responses, you must contact ISAC for assistance.

3. The Administration tab includes user administration information for your facility. To access it, hover over the "Administration" tab and then click "User Administration."

Administration Programs
User Administration
Welcome,
Last Login:
Update Profile

- a. Verify users (checkbox and submit) Primary Admins only
- b. At the Users View screen, you will see a row that displays your User ID, your name, and your facility's name. Note that the "Admin", "Primary" and "Active" columns are prepopulated with a "Y," indicating that you are the facility's GAP Access Primary Administrator. In addition, you will see three icons.

User Admin	istration							
<sup>,</sup> Users View								
Verify Users								
Submit								
Entries displayed	10 🗸							Filter
User ID	Last Name	First Name	M.I.	Name	A	dmin	Active	Primery
10 C	TESTER	TEST			Y		Y	Y 🥇 🛔
Showing 1-1 of 1 er	ntries				_			< < 1 > >

i. The first icon looks like a key and may be used to reset your password.



ii. The second icon looks like a person and may be used to assign user privileges.

				FIRST ADMIN
Administration Programs				
User cbtest10				
Program Privileges				
Program Name	Privilege			
	⊖ None			
CBLRP	Opdate			
	⊖ View			
		User Administration	Save Changes	

4. For access to Community Behavioral Health Care Professional Loan Repayment program (CBLRP), hover over the "Programs" tab and then click on CBLRP.

Administration F	Programs
C User Login: Su	BLRP
Welcome,	
Last Login:	
Update Profile	

- 5. Once CBLRP is clicked, two tabs will be available to you.
  - a. Home This is the default screen for CBLRP, and the Fiscal Year dropdown will default to the current year.
  - b. Certification Provides the list of employees who need to be certified.

Administration School Programs
CBLRP
Home         Application         Certification         Eligibility         Reports
Fiscal Year
2024-2025 🗸

# **Navigation of Certification List: View Screen**

- 1. Certification tab Provides a list view of certification records for applicants who have indicated on their application that they work or have worked at your facility.
  - a. Records will be listed in alphabetical order by last name.
  - b. Default view displays only the last four digits of the SSN. To view the entire SSN click on the "Lock" icon.
- 2. If you have multiple facility locations, be sure to select each facility from the drop-down list and complete all of the certification records on each respective list.

Administration School	ol Programs									
CBLRP 2024-2025	5: Certification Lis	st: View								
Select Facility Name										
ALL FACILITIES Go										
ALL FACILITIES	Certification	tv Report	ts							
		.,								
Entries displayed 100	~									
# Current SSN La:	st Name First Name	Date of Birth	Employment Status	Employment Start Date	Employment End Date	Qualified Behavioral Health Profession	Certification Date	HPSA score		
1										
2										
3			Currently Employed	10/03/2022		Other	01/14/2025	18		
4										
5										
6										
7			Currently Employed	07/17/2017		Licensed marriage and family therapist (LMFT)	01/14/2025	18		
8										
9										
10										
Showing 1 to 100 of 177 entri	ies						IN	1		
			View Report	Excel Re	port					

- A "Filter" tab allows the user to filter records by different options:
  - SSN, First name, Last name, Certified (Certified filter options are All, No, or Yes)
- Entries displayed Dropdown allows number of entries seen on list to be expanded.
   0 20, 50, 100, 150
- View Report Download txt file format report based on current view.
- Excel Report Download Excel file format report based on current view.

# **Completing Certification**

- 1. Click on the certification record on the list to open up the individual certification screen.
  - o Click on any of the following: Current SSN, Last name, First name, or Date of Birth.

Certification Data
SMITH, JOHN FACILITY NAME 123 ABC ST. CHICAGO, IL, 60001
Occupation Occupation Start Date Date Most Recent Licensure/Certification Obtained
Licensed clinical professional counselor (LCPC) 01/19/2024 01/19/2024
Educational Credential Date Most Recent Degree Obtained
Current Job Title: CLINICAL MANAGER Applicant's Employment Status:
Please select applicant's qualified behavior profession(s) from the following: (Select all that apply) Note: For the profession(s) you select, please include the Position Start Date and the date the Licensure/Certification was obtained for each position. If unknown, please leave the date box blank.
<ul><li>2. Select the Employment Status option:</li><li>a. Select one of the following:</li></ul>
Select Employment Status
Select Employment Status Currently Employed Previously Employed Does not currently and has not worked at this location

Then indicate the Applicant's Licensure/Certification, selecting all that apply: 3.



a master's or bachelor's degree in one of the areas listed, please select the correct option below. If none of these options apply for this applicant, please select, "Other" and indicate a reason in the text box and leave the Date Most Recent Degree Obtained box blank

# **Completing Certification**

- 4. Continue to complete the certification record by providing:
  - The applicant's Educational Credential
  - HPSA Score options: Numbers 1 26
  - Employment Start and End Dates, using the Calendar tool or manually entering the date (Format: MM/DD/YYYY)
  - Job Title, providing current and previous titles and dates, as appropriate.

Certification Data									
Applicant's Educational Credential:	Degree necessary to meet the IDFPR licensure requirements for a	Psychiatri	st, APR	N, Phys	ician A	ssistant,	or a Cl	inical p	sycholog
	Degree or training program necessary to meet the certification required	uirements	for a CA	DC or (	CRSS				
Degree necessary to meet the certification requirements for a LCSW/LSW, LCPC/LPC, LMFT									
Master's degree in counseling, psychology, social work, or marriage and family therapy									
Bachelor's degree in counseling, psychology, or social work							0		
	Other	-		-		- Cur	_	-	
Applicant's HPSA Score:	Select HPSA Score V	s	м	T	w	T	F	S	
						1	2	3	
Applicant's Employment Start Date:		4	5	6	7	8	9	10	
Applicant's Employment End Date:	J	11	12	13	14	15	16	17	
Applicant's Current Job Title:									
Applicant's Current Job Start Date:		18	19	20	21	22	23	24	
Applicant's Previous Job Title:		25	26	27	28	29	30	31	
Applicant's Previous Job Start Date									
Applicant's Previous Job End Date:									

- 5. After all required fields are filled in, click on the "Certify" button to save the information and complete the process.
  - a. A "Successfully saved" notification will appear above the employee name.



6. After the certification record is successfully saved, click on the "Close' button to return to the certification list and continue the process for another record.



# **Completing Certification**

#### **Required Fields based on Employment Status:**

- If "Currently Employed" is selected, required fields are:
  - a) Most Recent Position
  - b) HPSA Score
  - c) Employment Start date
- If "Previously Employed" is selected, required fields are:
  - a) Most Recent Position
  - b) HPSA Score
  - c) Employment Start date
  - d) Employment End date
- If "Does not currently and has not worked at this location" is selected:
  - a) No additional fields are required
  - b) Click on "Certify" and "Close"