Design Document

CA-201845 – GR 237 Report

	DOCUMENT APPROVAL HISTORY	
CalACES	Prepared By	Farhat Ulain
	Reviewed By	Justin Dobbs

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/24/2018	1.0	Initial Draft of the Design Document Containing Report Requirements.	Farhat Ulain
06/03/2019	1.1	Content revision to include Line 14 auto-calculation formula	Justin Dobbs

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1 OVERVIEW

This document describes the requirements changes for the GR 237 Report.

1.1 Current Design

GR 237 Report is a monthly scheduled report provides detailed information of General Relief and Interim Assistance, Caseload and Expenditures, SSI/SSP Interim Assistance, and Net General Relief Expenditures for the report month. Los Angeles only: Currently, lines 8 through 11 are being manually entered by county workers based on data from the automated ABD 217 report and the external 8125 Processing reports produced by Fiscal Operations Division (FOD).

1.2 Request

To eliminate manually entering the data from ABD 217 and 8125 Processing reports, modify the report logic based on the SSI-SSP Monthly Activity Report to automatically populate the data in lines 8 through 11 of GR 237 report.

1.3 Overview of Recommendations

GR 237 Report will be modified based on the logic of the SSI-SSP Monthly Activity Report to automatically populate the data in lines 8 through 11.

1.4 Assumptions

- The logic of the SSI-SSP Monthly Activity Report will be replicated in to lines 8 through 11 of the GR 237 Report with the addition of a restriction to a GR program type.
- GR 237 layout will not be changed.
- Scheduling of the GR 237 will not be changed.

2   RECOMMENDATIONS

This section will outline the specific recommendations to modify the logic to automatically populate the data in lines 8 through 11 of GR 237 Report.

2.1 Overview

GR 237 Report is a monthly scheduled report consists of 5 sheets. Sheet 1 is the GR 237 summary report. Sheets 2-5 provide detailed information supporting the counts on the summary sheet. Sheet 1of the GR 237 report will be modified to replicate the logic of SSI-SSP Monthly Activity Report to automatically populate the data in lines 8 through 11.

Add two sheets to the GR 237 Report to break down the supporting detailed information for lines:

- Line 8: Total SSA checks disposed of during month
- Line 8a: Disposed of 1-10 working days of receipt from SSA
- Line 10: Denial notice received
- Line11a: SSA checks received

2.2   GR 237 Report Mockups

2.2.1   Sheet 1 Mockup

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES				CALIFORNIA DEPARTMENT OF		
				DATA SYSTEMS AND SURVEY		
GENERAL RELIEF AND INTERIM ASSISTANCE				SEND ONE COPY OF THIS REPORT TO:		
TO APPLICANTS FOR SSI/SSP				California Department of Social Services		
MONTHLY CASELOAD EXPENDITURE				Data Systems and Survey Design Bureau, M.S. 9-		
STATISTICAL REPORT				P.O. Box 944243		
				Sacramento, CA 94244-2430		
				FAX: (916) 657-2074		
VERSION: (Initial/Revised)		COUNTY		REPORT MONTH		REPORT YEAR
		Los Angeles		FEBRUARY		2018

PART A. CASELOAD (GENERAL RELIEF AND INTERIM ASSISTANCE)

	1	CDSS Use
1. Cases brought forward from last month (Item 5 last month or explain)............................	2	55890
2. Cases added during month...	3	782
3. Total cases available during the month (Item 1 plus Item 2)................................	4	56672
4. Cases discontinued during month..	5	4058
5. Cases carried forward to next month (Item 3 minus Item 4 above)............................	6	52614

PART B. CASELOAD AND

	Case	A	Perso	B	Amount	C
6. Total General Relief [(1)+(2); also (a)+(b)	7	9	10	11	13	1565.56
(1) Amount in cash..................................					14	1544.56
(2) Amount in kind..................................					15	21
a. Family Cases.....................................	8	2	11	4	16	810.56
b. One-Person Cases.................................	9	7	12	7	17	755

PART C. SSI/SSP INTERIM ASSISTANCE

	Case	A			Amount	
7. Cases added during month............................	18	48				
8. Total SSA checks disposed of during	19	0				
a. Disposed of 1-10 working days of receipt from	20	0				
9. SSA sent to SSI/SSP check directly to	21	0				
10. Denial notices received................................	22	0				
11. Reimbursements during the month (a + b	23	0			26	0
a. SSA checks received..................................	24	0			27	0
b. Repaid by recipient..................................	25	0			28	0

PART D. (FOR USE ONLY UPON INSTRUCTIONS FROM DSS)

12	
13	

PART E. NET GENERAL RELIEF EXPENDITURES

14. Net General Relief expenditures (Item 6 minus Item		29	0
COMMENTS			

Contact Name	Telephone Number	Extension	Fax
Title/Classification	E-Mail Address		Date

Sheet1 | Sheet2 | Sheet3 | Sheet4 | Sheet5 | (+)

Figure 2.2.1 -1 Sheet 1

2.2.2 Sheet 6 Mockup

Figure 2.2.2 -1 Sheet 6

2.2.3 Sheet 7 Mockup

Figure 2.2.3-1 Sheet 7

2.3   Description of Changes

2.3.1 Sheet 1 Summary

Modify the logic for lines 8 through 11 and line 14 of the GR 237 Report as follows:

1. Line 8. Total SSA checks disposed of during month:

- The Recovery Account Type is 'General Relief'.
- The Recovery Account Program is 'General Assistance/General Relief'.
- A Transaction was posted to the Recovery Account during the Report Month.
- The Recovery Account Transaction Type is one of the following:

Code	Category ID	Short Description	CalACES/ C-IV
DC	412	Dual County Payment	CalACES
RA	412	Recoveries of Aid-SSI	Both
RI	412	Reimbursement of Aid	Both
SP	412	SSI Payment	CalACES

Figure 2.3.1-1 Code Table

- The Receipt associated to the Recovery Account Transaction has a status of 'Posted'.
- The Receipt associated to the Recovery Account Transaction has a status date within the Report Month.
- The Receipt associated to the Recovery Account Transaction has a received date in the month prior to the Report Month or within the Report Month.

Count the distinct number of Recovery Account Transactions retrieved by the above logic.

Note: This line will populate with the same count as displayed in the count field towards the top of the Payment Processed sheet of the SSI-SSP Activity Monthly Report (GR Program data only).

   a. Line 8a. Disposed of 1-10 working days of receipt from SSA:
- The number of county business days between the Receipt Received Date and the Recovery Account Transaction Posted Date is 10 or less.

2. Line 9. SSA sent SSI/SSP check directly to recipient:
   - This line will populate with a zero.

Los Angeles Note: The SSA office will never send a check directly to the recipient. Due to this business process, counts in this line will always be zero.

3. Line 10. Denial notice received:
   - SSI status is Denied on IAR Detail page.
   - SSI Program is 'General Assistance/General Relief'.
   - SSI Denial Action date is within the Report Month.
   - The SSI Denial Reason from the 'SSI Denial Reason' column is one of the following:

Code	Category ID	Short Description	CalACES/ C-IV
GB	10472	GR code added - SSI record showing a denial	CalACES
CD	10472	SSI Claim Denied	CalACES

Figure 2.3.1-2 Code Table

Count the distinct number of Denial Notices received by Case Number and Responisble Party Name.

Note: This line will populate with sum of the 'GR code added - SSI record showing a denial' and the 'SSI Claim Denied' as displayed in the summary box towards the top of the IAR SSI Denials sheet of the SSI-SSP Activity Monthly Report (GR Program data only).

4. Line 11. Reimbursement during the month:
   - Sum of the lines 11a and 11b

   i. Line 11a. SSA checks received:
      Same criteria as Line 8.
      a. Cell 24:
         Count of Recovery Account Transactions.

         Note: This line will populate with the same count as displayed in the count field towards top of the Payment Processed sheet of the SSI-SSP Activity Monthly Report (GR Program data only).

      b. Cell 27:
         Sum of Recovery Account Transaction amounts.

Note: This line will populate with the same dollar amount as displayed in the 'Total Amount' field towards top of the Payment Processed sheet of the SSI-SSP Activity Monthly Report (GR Program data only).

    ii.   Line 11b. Repaid by Recipient:
- This line will populate with a zero.

Los Angeles Note: LRS does not track whether a participant paid towards IAR. And since participants' payments towards IAR claims can't be identified, counts for this line will always be zero.

5. Line 14. Net General Relief expenditures (Item 6 minus Item 11)
- A formula will auto calculate line 6 minus line 11

2.3.2 Sheet 6 – Line 8, 8a and 11a Details

This detailed worksheet will provide a single data set that will be used to validate Lines 8, 8a and 11a.

Below are the Header fields and descriptions included in Worksheet 6. Note: The summary totals toward the top of the worksheet will display the actual spreadsheet formula which must be activated by the end user in order to display the calculated counts. This is existing functionality.

Field Name	Field Description
Transaction Total	A dynamic total that will display the number of Recovery Account Transactions displayed in the details based on any filters applied.
Transaction Amount Total	A dynamic total that will display the sum of the Recovery Account Transaction Amount column based on any filters applied.

Table 2.3.2-1 Worksheet 6

Below are the column names and descriptions included in Worksheet 6.

Field Name	Field Description
Recovery Account Transaction Number	Transaction Number as displayed in Transaction Detail page
Receipt Number	Receipt Number as displayed in Transaction Detail page
Receipt Received Date	Received Date as displayed in Receipt Detail page formatted as mm/dd/yyyy
Recovery Account Transaction Posted Date	Posted Date as displayed in Transaction Detail page formatted as mm/dd/yyyy
Recovery Account Transaction Amount	Transaction Amount as displayed in Transaction Detail page formatted as $00.00

Recovery Account Number	Recovery Account number as displayed in Recovery Account Information section of Transaction Detail page
Program Type	Program Type as displayed in Recovery Account Information section of Transaction Detail page
Recovery Account Transaction Type	Transaction Type as displayed in Transaction Detail page
Recovery Account Transaction Method	Transaction Method as displayed in the Transaction Detail page

Table 2.3.2-2 Worksheet 6

2.3.3 Sheet 7 – Denial Notices Received During Month Active on GR

Below are the Header field and description included in Worksheet 7. Note: The summary totals toward the top of the worksheet will display the actual spreadsheet formula which must be activated by the end user in order to display the calculated counts. This is existing functionality.

Field Name	Field Description
Transaction Total	A dynamic total that will display the number of Recovery Account Transactions displayed in the details based on any filters applied.

Table 2.3.3-1 Worksheet 7

Below are the column names and descriptions included in Worksheet 7.

Field Name	Field Description
Responsible Party Name	Responsible Party Name as displayed in Transaction Detail page "FIRSTNAME LASTNAME"
Case Number	Case Number as displayed in Transaction Detail page
Program Type	Program as displayed in Transaction Detail page
Program Status	The decoded status of the Program as of the last day of the report month as displayed in Program Detail History section of the General Assistance/General Relief History page
Recovery Account Number	Recovery Account Number as displayed in Recovery Account Information section of Transaction Detail page
SSI Denial Action Date	SSI Denial Action Date as displayed in IAR Detail page formatted as mm/dd/yyyy
SSI Denial Date	SSI Denial Date as displayed in IAR Detail page formatted as mm/dd/yyyy
SSI Denial Reason	SSI Reason as displayed in IAR Detail page

Table 2.3.3-2 Worksheet 7

2.4   Report Location

Global: Reports

Local: Scheduled

Task: State

3   SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
CA-201845	State	GR 237 Report	19_GR 237 Report_1520016228
CA-201845	Fiscal	SSI-SSP Activity Monthly Report	19_SSI-SSP Activity Monthly Report_150

5.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.24.2.2	The LRS shall produce reports that provide the detail LRS Data that will be used to complete the reports required by federal, State, and local laws, rules, regulations, ordinances, guidelines, directives, policies, and procedures.	This SCR is making the GR 237 more complete and accurate.

5.2 Migration Requirements

DDID #	REQUIREMENT TEXT	How Requirement Met
N/A		

5.   MIGRATION IMPACTS

SCR Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?
N/A					

6.   OUTREACH

N/A

DRAFT

Design Document

CA-203096/CIV-10287 –
Support Non-Compliance Reasons in
Request MAGI and MAGI NOAs
(CH-119408)

Version 1.6

	DOCUMENT APPROVAL HISTORY	
	Prepared By	Naga Chinduluru, Nithya Chereddy
	Reviewed By	Renee Kane, Michael Wu, Prashant Goel, Stephanie Hugo, Priya Sridharan, Raj Devidi, Balakumar Murthy, Chris Larson, Naveen Bhumandla. Dana Petersen

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/2/2018	1.0	Original presented to MC Committee	Naga, Nithya
2/4/2019	1.1	Updated Batch section; Reformatted	Howard Suksanti; Renee Kane
2/8/2019	1.2	Final Draft submitted to MC Committee for Approval	Renee Kane
2/27/2019	1.3	Revised based on MC Committee feedback	Renee, Nithya, Michael Wu
04/02/2019	1.4	Content Revision 1: Corrected Typos. Section 2.3.3: included eHIT mapping for Assign Support Rights for C-IV. Section 2.1.3: added technical note Removed references to threshold languages in LRS FDDs. Clarified "Suppression Logic"	Renee, Nithya
05/02/2019	1.5	Content Revision 2: Removed Overview of Recommendations #7 to remove Request MAGI Validation for Primary Applicant without RIDP. **C-IV:** Updated Notices to generate 90-day cure language and regulations for "Child/Medical Support - Assign Support Rights" non-compliance reason. Suppress Cambodian, Arabic and Farsi threshold languages for the Apply/Accept Retirement reason Turned off Arabic, Cambodian and Farsi translations for Apply/Accept Retirement reason	Renee, Nithya
05/07/2019	1.6	Updated Technical Note in 2.1.7 to show MEDS Disc Code 59 for Refused Assign Supp Right	Renee

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1 OVERVIEW

The purpose of this document is to satisfy the functional specifications in support of changes within CalHEERS CR-119408. This SCR allows CalACES to communicate the following Non-Compliance Reasons to CalHEERS through eHIT.

- Failure to apply for/accept unconditionally available income
- Failure to provide the Veteran's information to complete the MC 05
- Failure to provide other health insurance information
- Failure to comply with Third Party Liability
- Failure to apply for Medicare
- Failure to provide 2.1Q (Child Support)
- Failure to provide or apply for SSN
- Failure to provide identity/name

When a person has one or more Non-Compliance(s) recorded in CalACES, the CalACES Worker sends an EDR with the Non-Compliance(s) to CalHEERS through eHIT. CalHEERS applies the Non-Compliance(s) and determines the person MAGI Denied or Discontinued. CalHEERS responds with a DER that includes the Non-Compliance reason(s) as Eligibility Evaluation Reason Codes (EERC). When the CalACES Worker runs EDBC, CalACES generates a NOA for the MAGI or Non-MAGI Medi-Cal Denial or Discontinuance that includes Non-Compliance language.

1.1 Current Design

The CalHEERS eHIT Interface does not have functionality for CalACES to send Non-Compliance reason(s) to CalHEERS. Therefore, CalACES Workers use Negative Actions or Failed Admin Verifications to Deny or Discontinue a person from MAGI Medi-Cal but the Negative Action reason may not be accurate or specific enough to generate the appropriate language on a NOA or send the proper Termination reason to MEDS. The Non-Compliance language is not populated on MAGI Medi-Cal Denial/Discontinuance NOAs.

CalACES Non-MAGI Medi-Cal EDBC evaluates a person as Non-Compliant if a person's Non-Compliance record is effective on the last day of the EDBC benefit month.

CalACES generates Non-MAGI Medi-Cal Discontinuance NOAs for some Non-Compliances, but the 90-day cure language does not appear on the NOA.

The Non-Compliance Reason "Apply/Accept VA - Sign CA5" is missing reference to the "MC05"

CalACES has validation to prevent sending an EDR when the Primary Applicant has not proved their identity.

CalACES-C-IV does not have "Third Party Liability" Non-Compliance reason.

CalACES Non-MAGI Medi-Cal EDBC can close a person for multiple Role/Status Reasons, but only one Role/Status Reason displays on CalACES online pages based on the Role/Status Reason with the highest pre-determined "MC Priority". The "MC Priority" should be unique for each Role/Status Reason; however, CalACES-LRS has both "FTP Third Party Liability" and "FTP Income" Status Reasons with the same "MC Priority".

CalACES-C-IV captures all Non-Compliances in the "Eligibility Non-Compliance Detail" page, while CalACES-LRS captures Non-Compliances in three places:
- "Eligibility Non-Compliance Detail" Page
- Verification records for "SSN" and "Name/Identity"
- Absent Parent page for "Failure to provide 2.1Q (Child Support)"

CalACES-LRS does not have "SSN" or "Name/Identity" Non-Compliance reasons in the "Eligibility Non-Compliance Detail" page and Non-MAGI Medi-Cal EDBC evaluates a person as Non-Compliant for these reasons based on "SSN" or "Name/Identity" Verification records.

CalACES-LRS Non-MAGI Medi-Cal Denial/Discontinuance NOAs do not generate for below Non-Compliance reasons.
- Apply/Accept DIB
- Apply/Accept Military Benefits
- Apply/Accept Retirement
- Apply/Accept SDI
- Apply/Accept UIB
- Apply/Accept VA - Sign CA5
- Apply/Accept Work. Comp
- Apply for Medicare

CalACES-LRS has a Non-MAGI Medi-Cal Non-Compliance batch that will Deny/Discontinue a person with outstanding Verifications for "SSN".

1.2 Requests

1. Update CalACES to communicate Non-Compliance reason(s) to CalHEERS.
2. Update CalACES to generate a MAGI Medi-Cal Denial/Discontinuance Notice of Action when a person is determined Ineligible or Discontinued from MAGI Medi-Cal due to Non-Compliance(s) using the current Non-MAGI Medi-Cal Non-Compliance language.
3. Update CalACES Medi-Cal EDBC to determine a person Non-Compliant for Non-MAGI Medi-Cal if the person's Non-Compliance is effective for the whole benefit month.
4. Update CalACES Medi-Cal MAGI-only EDBC to close a person for Non-Compliance-specific Role/Status Reason if person is Ineligible or Discontinued from MAGI due to Non-Compliance.
5. Update CalACES-LRS to generate a Non-MAGI Medi-Cal Denial/Discontinuance NOA when a person is closed due to below Non-Compliance Reason(s).
   - Apply/Accept DIB
   - Apply/Accept Military Benefits
   - Apply/Accept Retirement
   - Apply/Accept SDI
   - Apply/Accept UIB
   - Apply/Accept VA - Sign CA5
   - Apply/Accept Work. Comp
   - Apply for Medicare
6. Update CalACES to add a Batch EDBC skip reason so Batch EDBC will not use a DER with a Non-Compliance if the Non-Compliance was not requested by the Worker.
7. Update CalACES-LRS to add a new batch job to create Non-Compliance records when the SSN or Name/Identity verification is overdue.
8. Update CalACES-LRS to modify the existing MC SSN verification due Batch EDBC sweep job to trigger Batch EDBC when the MC participant has a Procedural Requirement Non-Compliance with the reason of 'SSN'.

1.3 Overview of Recommendations

1. Update CalACES to send the following Non-Compliance reason(s) to CalHEERS in the EDR and display the Eligibility Evaluation Reason Codes received in the DER for the same:
   - Failure to apply for/accept unconditionally available income
   - Failure to provide the Veteran's information to complete the MC 05
   - Failure to provide other health insurance information
   - Failure to comply with Third Party Liability
   - Failure to apply for Medicare
   - Failure to provide 2.1Q (Child Support)
   - Failure to provide or apply for SSN
   - Failure to provide identity/name

2. Update CalACES to send CalHEERS Non-Compliance reasons through eHIT in an EDR based on the following mappings:

CalACES		CalHEERS
Non-Compliance Type	**Non-Compliance Reason**	**MAGI Non-Compliance Description**
Unconditionally Available Income	Apply/Accept DIB	Failure to apply for/accept unconditionally available income
	Apply/Accept Military Benefits	
	Apply/Accept Retirement	
	Apply/Accept SDI	
	Apply/Accept UIB	
	Apply/Accept VA - Sign CA5	
	Apply/Accept Work. Comp	
Failure to Provide	Other Health Care Coverage	Failure to provide other health insurance information
	Third Party Liability	Failure to comply with Third Party Liability
	Name/Identity	Failure to provide identity/name
Procedural Requirement	Apply for Medicare	Failure to apply for Medicare
	SSN	Failure to provide or apply for SSN

CalACES – C-IV only		CalHEERS
Non-Compliance Type	**Non-Compliance Reason**	**MAGI Non-Compliance Description**
Child/Medical Support	Child/Medical Support Non Co-op	Failure to provide 2.1Q (Child Support)
	Assign Support Rights	
CalACES – LRS only		**CalHEERS**
Absent Parent page	**Type**	**MAGI Non-Compliance Description**
Child Support Cooperation	Do not agree to cooperate	Failure to provide 2.1Q (Child Support)
Assign Medical Support Rights	I refuse to assign medical support rights	

3. Update CalACES Medi-Cal EDBC to close a MAGI Medi-Cal person with the Non-Compliance-specific Role/Status reason instead of the generic "Failed MAGI" Role/Status reason. This will allow the existing MEDS batch jobs to send a more specific Termination reason to MEDS.
4. Update CalACES to generate a MAGI Medi-Cal Denial/Discontinuance NOA when a person is determined MAGI Denied or Discontinued due to Non-Compliance(s). Include the 90-day cure language for Discontinuances.
5. Update CalACES Medi-Cal EDBC to determine a person Non-Compliant for Non-MAGI Medi-Cal if the person's Non-Compliance record is effective for the whole benefit month.
6. Update CalACES Non-Compliance Reason "Apply/Accept VA - Sign CA5" to read "Apply/Accept VA - Sign CA5/MC05"
7. Update the MAGI Pages to display the Non-Compliance reasons sent through eHIT in an EDR or received in a DER.
8. Update CalACES-LRS "FTP Third Party Liability" and "FTP Income" Role/Status Reasons to have unique "MC Priority".
9. Update CalACES-LRS to have "SSN" and "Name/Identity" Non-Compliance reasons in the "Eligibility Non-Compliance Detail" page.
10. Update CalACES-LRS Non-MAGI Medi-Cal EDBC to evaluate a person as Non-Compliant for "SSN" or "Name/Identity" based on the records in the "Eligibility Non-Compliance Detail" page instead of the pending overdue Verification records.
11. Update CalACES-C-IV to have "Third Party Liability" Non-Compliance reason in the "Eligibility Non-Compliance Detail" page.

12. Update CalACES-LRS Non-MAGI Medi-Cal Denial/Discontinuance NOAs to generate for the following Non-Compliance reasons:
    - Apply/Accept DIB
    - Apply/Accept Military Benefits
    - Apply/Accept Retirement
    - Apply/Accept SDI
    - Apply/Accept UIB
    - Apply/Accept VA - Sign CA5/MC05
    - Apply/Accept Work. Comp
    - Apply for Medicare
13. Update CalACES to prevent a MAGI Medi-Cal person from being Denied or Discontinued based on a Referral or Determination Change with a Non-Compliance reason(s).
14. Update CalACES-C-IV Medi-Cal EDBC to close a person for Role/Status Reason "FTP Third Party Liability".
15. Update CalACES to add a skip reason to Batch EDBC to not use a DER with a Non-Compliance if it was not requested by the Worker when running Batch EDBC for a Medi-Cal program.
16. Update CalACES-LRS to add a new batch job to create Non-Compliance records when the SSN or Name/Identity verification is overdue.
17. Update CalACES-LRS to modify the existing MC SSN verification due Batch EDBC sweep job to trigger Batch EDBC when the MC participant has a Procedural Requirement Non-Compliance with the reason of 'SSN'.

1.4 Assumptions

1. CalACES will use the existing Non-MAGI Medi-Cal Non-Compliance NOA language for the MAGI Medi-Cal Denial/Discontinuance NOAs due to Non-Compliance(s) unless otherwise described in this document.
2. This SCR does not apply to County Medical Services Program (CMSP) or Medicare Savings Program (MSP) recipients; there are no changes to CMSP or MSP Non-Compliance rules.

2 RECOMMENDATIONS

2.1 Eligibility

1. Update the Non-MAGI Medi-Cal EDBC rules to evaluate a person as "Non-Compliant" for a Non-MAGI Medi-Cal program if the person's Medi-Cal Non-Compliance is effective for the whole EDBC benefit month. A person is Non-Compliant only when a single Non-Compliance record spans the whole benefit month. This update does not apply to CMSP or MSP.
2. Update Medi-Cal EDBC rules to display the following validation on Run EDBC and Negative Action pages if the MAGI Determination used by EDBC has one or more Non-Compliance EERC(s) listed in the recommendation 2.3.2 for at least one Active or Pending Member on the Medi-Cal Program and does not have an associated EDR with the same Non-Compliance(s) per person.

   Validation Message:
   Medi-Cal - EDBC cannot be run for this program. At least one Pending or Active Member in the MAGI determination has a Non-Compliance not requested by a Worker. Request a new MAGI Determination.
3. **CalACES-LRS:** Update the Non-MAGI Medi-Cal EDBC rules to evaluate the person as "Non-Compliant" based on the Non-Compliance records instead of the Verification records of "SSN" or "Name/Identity" and apply the corresponding Role/Status Reason as follows:

Program	Non-Compliance Type	Non-Compliance Reason	Role/Status Reason
Medi-Cal	Procedural Requirement	SSN	SSN Enumeration
Medi-Cal	Failure to Provide	Name/Identity	FTP Name/Identity

   Technical Note: Update the SSN Verification Type for the Medi-Cal program to no longer use the Mandatory LRS Verification logic (CT_170_02).
4. **CalACES-LRS:** Update the MC Priority for "FTP Income" Status Reason (CT_73) to be higher than the MC Priority for "FTP Third Party Liability" Status Reason.
5. **CalACES-C-IV**: Add the following Status Reason (CT_73) with the same MC Priority as CalACES-LRS from #4 above.

Code	Status Reason
TP	FTP Third Party Liability

6. **CalACES-C-IV**: Update the Non-MAGI Medi-Cal EDBC rules to Deny/Discontinue a person for the Medi-Cal program with "FTP Third Party Liability" Status Reason if the person is Non-Compliant due to the "Failure to Provide - Third Party Liability" Non-Compliance.

7. Update Medi-Cal EDBC MAGI-Only Mode rules to close a person for the Non-Compliance-specific Role/Status Reason (instead of "Failed MAGI") when the criteria in the following table is met in the DER used by EDBC and its corresponding EDR. Use the existing MC Priority of the Non-Compliance to display the Role/Status Reason on the CalACES online pages. If both a Negative Action and Non-Compliance apply, Negative Action is higher priority over Non-Compliance.

Note: The existing MAGI-Only Mode functionality to close a Medi-Cal program person with program status of "Denied" or "Discontinued" remains unchanged. If the Non-Compliance is cured, the worker should rescind or reapply the person, request MAGI to remove the Non-Compliance and then run EDBC.

DER used by MAGI-Only Medi-Cal EDBC		CalACES Non-Compliance (In the associated EDR)	MAGI-Only Mode EDBC closure Role/Status Reason
EERC	**Person MAGI Status**		
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept DIB	**Refused DIB**
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept Military Benefits	**Refused Military Ben**
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept Retirement	**Refused Retirement**
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept SDI	**Refused SDI**
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept UIB	**Refused UIB**
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept VA - Sign CA5	**Refused VA**
Failure to apply for/accept unconditionally available income	Ineligible or Discontinue	Apply/Accept Work. Comp	**Refused Wkr Cmp**
Failure to provide Other Health Insurance information	Ineligible or Discontinue	Other Health Care Coverage	**FTP Other Health Care**
Failure to comply with Third Party Liability	Ineligible or Discontinue	Third Party Liability	**FTP Third Party Liability**
Failure to apply for Medicare	Ineligible or Discontinue	Apply for Medicare	**Didn't Apply Medicare**
Failure to provide or apply for SSN	Ineligible or Discontinue	SSN	**SSN Enumeration**
Failure to provide identity/name	Ineligible or Discontinue	Name/Identity	**FTP Name/Identity**

CalACES-C-IV Only			
DER used by MAGI-Only Medi-Cal EDBC		**CalACES Non-Compliance (In the associated EDR)**	**MAGI-Only EDBC closure Role/Status Reason**
EERC	**Person MAGI Status**		
Failure to provide 2.1Q (Child Support)	Ineligible or Discontinue	Child/Medical Support Non Co-op	**Non Co-Op Chld/Med Supp**
Failure to provide 2.1Q (Child Support)	Ineligible or Discontinue	Assign Support Rights	**Refused Assign Supp Right**
CalACES-LRS Only			
DER used by MAGI-Only Medi-Cal EDBC		**CalACES Non-Compliance (In the associated EDR)**	**MAGI-Only EDBC closure Role/Status Reason**
EERC	**Person MAGI Status**		
Failure to provide 2.1Q (Child Support)	Ineligible or Discontinue	Child Support Cooperation - Do not agree to cooperate	**Non Co-Op Chld/Med Supp**
Failure to provide 2.1Q (Child Support)	Ineligible or Discontinue	Assign Medical Support Rights - I refuse to assign medical support rights	**Refused Assign Supp Right**

Technical Note: *The existing MEDS batch jobs send the Termination reason to MEDS based on existing CalACES/MEDS closure reason mappings noted in the table below. This SCR makes no updates to existing MEDS batch jobs or CalACES/MEDS closure reason mappings. This SCR updates MAGI-only Mode EDBC to close for a more specific reason (instead of "Failed MAGI") which allows the existing MEDS batch jobs to send the more specific Termination reason to MEDS based on the existing CalACES/MEDS closure reason mappings noted below.*

CalACES Closure Reason	MEDS Disc Code-32	MEDS Denial Code-33
Refused DIB, Refused Military Ben, Refused Retirement, Refused SDI, Refused UIB, Refused VA, Refused Wkr Cmp, FTP Third Party Liability, SSN Enumeration, FTP Name/Identity	61	E
FTP Other Health Care, Didn't Apply Medicare, Non Co-Op Chld/Med Supp	04	E
Refused Assign Supp Right	59	E

<u>MEDS Code Descriptions</u>

04 – Failure to Cooperate, Medi-Cal Only
59 – Other than 50-70
61 – Refused to provide essential information (non-CA7)
E – Failure to Cooperate

2.2   Online

1. Update the "MAGI Person Detail" Page to display Non-Compliance(s) sent in the EDR and received in the DER.
   a. Add a new section named "Non-Compliances" after the "Citizenship Documents" section.

MAGI Person Detail page with new Non-Compliances section mock up

   b. Display each Non-Compliance sent/received for a person on a separate line.
   c. Update Page Mapping.

2. Update the "MAGI Request Detail" page to display "Yes" when the EDR contains a Non-Compliance.
   a. Add a new column named, "Non-Compliance" to the right of "CIN" in the "Case Members included in the Request" section.

MAGI Request Detail

<div style="text-align:right">Close</div>

MAGI Case Number:	**MAGI Case Name:**	
CH00005544	CH - Grace Barney	
C-IV Case Number:	**C-IV Case Name:**	**Request ID:**
0005544	Grace Barney	6150216
Origination:		

Type:	**Status:**	**Program:**
Eligibility Determination Request	Complete	Medi-Cal
Run Reason:	**Benefit Month:**	
Continuing	10/01/2018	

▸ Application

▾ Case Members included in the Request

Name	MEDS PN	DOB	SSN	CIN	Non-Compliance
Grace Barney	02	01/20/1927	474-64-8374	30600008A	Yes
Jason Jones	05	07/12/1954		666972409	
Harrold Barney	01	07/02/1965	454-54-5522	30700301A	Yes
Baby Ted Barney	03	01/24/2006	699-87-8782	30600003A	Yes
Baby Bop Barney	04	02/29/2000	699-87-8785	30800030C	

View Associations

MAGI Request Detail page with new "Non-Compliance" column mock up

   b. Display "Yes" if one or more Non-Compliances exist in the EDR for the person.
   c. Display blank if Non-Compliances do not exist for the person.
   d. **CalACES-C-IV:** Update Page Mapping.

3. Rename the Non-Compliance Reason "Apply/Accept VA - Sign CA5" to "Apply/Accept VA - Sign CA5/MC05" for the Non-Compliance Type "Unconditionally Available Income" in the "Eligibility Non-Compliance Detail" page.

Eligibility Non-Compliance Detail page mock up for Apply/Accept VA – Sign CA5/MC05

4. **CalACES – C-IV:** Add the Non-Compliance Reason (CT_365) "Third Party Liability" for the Non-Compliance Type "Failure to Provide", Program "Medi-Cal" in the "Eligibility Non-Compliance Detail" page.

Eligibility Non-Compliance Detail page mock up for Third Party Liability

5. **CalACES – LRS:** Add the Non-Compliance Reason (CT_365) "SSN" Non-for the Non-Compliance type "Procedural Requirement", Program "Medi-Cal".

Eligibility Non-Compliance Detail page mock up for SSN

6. **CalACES – LRS:** Add the Non-Compliance Reason (CT_365) "Name/Identity" for the Non-Compliance type "Failure to Provide", Program "Medi-Cal".

Eligibility Non-Compliance Detail page mock up for Name/Identity

2.3 eHIT

1. Create a new Code Category for MAGI Non-Compliance Reasons with the following MAGI Non-Compliance Reason codes and descriptions.

Code	Description
VB	Failure to apply for/accept unconditionally available income
FH	Failure to provide other health insurance information
FV	Failure to provide Veteran's information for MC 05
FT	Failure to comply with Third Party Liability
FM	Failure to apply for Medicare
FQ	Failure to provide 2.1Q (Child Support)
PN	Failure to provide or apply for SSN
FN	Failure to provide identity/name

2. Add the following Eligibility Evaluation Reason Codes to the Codes table (CT_466).

Code	Eligibility Evaluation Reason
WS	Failure to apply for/accept unconditionally available income
VI	Failure to provide Veteran's information for MC 05
HI	Failure to provide Other Health Insurance information
TP	Failure to comply with Third Party Liability
AM	Failure to apply for Medicare
CS	Failure to provide 2.1Q (Child Support)
FS	Failure to provide or apply for SSN
NG	Failure to provide identity/name

The new EERCs will display on the following pages when applicable.

- MAGI Determination Summary
- MAGI Determination Detail
- MAGI Referral Detail

MAGI Determination Summary

Close

Request ID:	Benefit Month:	Date Run:
6150216	10/2018	09/05/2018
Household Eligibility:	**Run Reason:**	**Requested by C-IV Batch:**
Could Not Determine	Continuing	No

Name	Primary Aid Code	Status	Eligibility Evaluation Reasons	Negative Action Reason	Carry Forward Status
Barney, Harrold		Ineligible	Failure to apply for Medicare		
Barney, Grace	M3	Ineligible	Failure to apply for/accept unconditionally available income, Failure to comply with Third Party Liability		
Barney, Baby Ted		Eligible			
Barney, Baby Bop	P5	Eligible			
Jones, Jason		Pending Eligible			

Example: MAGI Determination Summary page with Non-Compliance EERCs

3. Update CalACES outbound mappings for CalACES Non-Compliance Reason Codes (CT_365) to MAGI Non-Compliances Reason codes added in recommendation 2.3.1 as shown in below table.

CalACES		Mapping to CalHEERS	
Non-Compliance Type	Non-Compliance Reason	MAGI Non-Compliance Reason Code	MAGI Non-Compliance Description
Unconditionally Available Income	Apply/Accept DIB	**VB**	Failure to apply for/accept unconditionally available income
Unconditionally Available Income	Apply/Accept Military Benefits	**VB**	Failure to apply for/accept unconditionally available income
Unconditionally Available Income	Apply/Accept Retirement	**VB**	Failure to apply for/accept unconditionally available income
Unconditionally Available Income	Apply/Accept SDI	**VB**	Failure to apply for/accept unconditionally available income

CalACES		Mapping to CalHEERS	
Non-Compliance Type	Non-Compliance Reason	MAGI Non-Compliance Reason Code	MAGI Non-Compliance Description
Unconditionally Available Income	Apply/Accept UIB	**VB**	Failure to apply for/accept unconditionally available income
Unconditionally Available Income	Apply/Accept VA - Sign CA5/MC05	**VB**	Failure to apply for/accept unconditionally available income
Unconditionally Available Income	Apply/Accept Work. Comp	**VB**	Failure to apply for/accept unconditionally available income
Failure to Provide	Other Health Care Coverage	**FH**	Failure to provide other health insurance information
Failure to Provide	Third Party Liability	**FT**	Failure to comply with Third Party Liability
Procedural Requirement	Apply for Medicare	**FM**	Failure to apply for Medicare
Procedural Requirement	SSN	**PN**	Failure to provide or apply for SSN
Failure to Provide	Name/Identity	**FN**	Failure to provide identity/name
CalACES-C-IV only		Mapping to CalHEERS	
Non-Compliance Type	Non-Compliance Reason	MAGI Non-Compliance Reason Code	MAGI Non-Compliance Description
Child/Medical Support	Child/Medical Support Non Co-op	**FQ**	Failure to provide 2.1Q (Child Support)
Child/Medical Support	Assign Support Rights	**FQ**	Failure to provide 2.1Q (Child Support)

Note: "FV - Failure to provide Veteran's information for MC 05" MAGI Non-Compliance reason is not mapped to any CalACES Non-Compliance reason. CalACES will never send this MAGI Non-Compliance Reason in the EDR but will display on the MAGI Person Detail page if CalHEERS sends this MAGI Non-Compliance Reason in the DER.

4. **CalACES – LRS:** Update CalACES-LRS outbound mapping to send "FQ" MAGI Non-Compliance code in an EDR when the following values are selected in the "Absent Parent" page.

| Section | Type | Mapping to CalHEERS | |
		MAGI Non-Compliance Reason Code	MAGI Non-Compliance Description
Child Support Cooperation	Do not agree to cooperate	**FQ**	Failure to provide 2.1Q (Child Support)
Assign Medical Support Rights	I refuse to assign medical support rights	**FQ**	Failure to provide 2.1Q (Child Support)

5. Update eHIT outbound logic to:
   a. Send the associated MAGI Non-Compliance(s) in the EDR based on the mappings in 2.3.3 above when all the following are true:
      i. The Non-Compliance is for the Medi-Cal program.
      ii. The Non-Compliance record is effective for the whole EDR benefit month. A person is Non-Compliant only if there exist a single Non-Compliance record that span the whole EDR benefit month.
   b. **CalACES-LRS:** Send "FQ" MAGI Non-Compliance in the EDR based on the mappings in 2.3.4 above when the following is true:
      i. The "Child Support Cooperation-Do not agree to cooperate" and/or "Assign Medical Support Rights-I refuse to assign medical support rights" record is effective for the whole EDR benefit month. A person is Non-Compliant only if there exist a single Non-Compliance record that span the whole EDR benefit month.
   c. Save both the Non-Compliance/Child Support Cooperation/Assign Medical Support Rights reason code and the MAGI Non-Compliance reason code in the EDR record.

   Technical Note: There is a many-to-one relationship between some CalACES Non-Compliances and MAGI Non-Compliances. Saving the CalACES Non-Compliance reason code is required to generate the appropriate Non-Compliance NOA fragment.

   Also, multiple unique MAGI Non-Compliance reasons can be sent in an EDR; however, the same MAGI Non-Compliance reason should not be duplicated in the EDR when multiple CalACES Non-Compliances exist that map to the same MAGI Non-Compliance.

For Example: A person has CalACES Non-Compliance records that cover the whole EDR benefit month for:

Unconditionally Available Income	Apply/Accept VA - Sign CA5/MC05	**VB**	Failure to apply for/accept unconditionally available income
Unconditionally Available Income	Apply/Accept Work. Comp	**VB**	Failure to apply for/accept unconditionally available income
Failure to Provide	Other Health Care Coverage	**FH**	Failure to provide other health insurance information

The MAGI Non-Compliances sent in the EDR should be "VB" and "FH".

6. Update eHIT inbound logic to save the MAGI Non-Compliance(s) received in DER.

2.4 Batch

2.4.1 Add a Non-Compliance skip reason to Batch EDBC

2.4.1.1 Overview

Add a new skip reason to Batch EDBC if the MAGI Determination used by MC EDBC has one or more Non-Compliance EERC(s) listed in the recommendation 2.3.2 for at least one Active or Pending Member on the Medi-Cal Program and does not have an associated EDR with the same Non-Compliance(s) per person.

2.4.1.2 Description of Change

1. Create a CTCR to add the new Batch EDBC skip reason for the new Non-Compliance skip.

Batch EDBC Skip reason	Description
New/Update	*New*
Category Id	*707*
Short Decode Name	*MAGI Determination has a Non-Compliance not requested by Worker.*
Long Decode Name	*At least one Pending or Active Member in the MAGI determination has a Non-Compliance not requested by a Worker. Request a new MAGI Determination.*
Begin date	*Default System Min Date /* 01-JAN-00 00:00:00
End date	*Default System High Date /* 31-DEC-99 00:00:00

2. Update Batch EDBC skip logic to skip cases that use a DER with a Non-Compliance not requested by CalACES when running Batch EDBC for a Medi-Cal program.
   a. **Skip Criteria:** The MAGI Determination used by EDBC has one or more Non-Compliance EERC(s) listed in the recommendation 2.3.2 for at least one Active or Pending Member on the Medi-Cal Program and does not have an associated EDR with the same Non-Compliance(s) per person.

   Technical Note: This new Non-Compliance Batch EDBC skip logic is the same validation logic as when worker runs EDBC online as described in Recommendation 2.1.2.

2.4.2 CalACES-LRS: Create SSN and/or Name/Identity Non-Compliance records

2.4.2.1 Overview
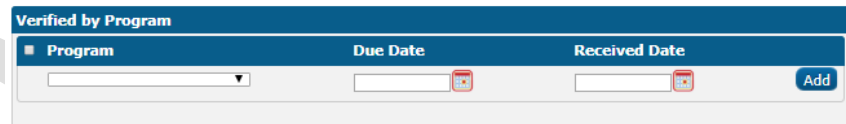
CalACES-LRS does not automate the creation of Non-Compliance records for overdue SSN or Name/Identity verifications. This SCR will add a new batch job to create Non-Compliance records for MC participants when the SSN or Name/Identity verification is overdue.

2.4.2.2 **Description of Change**

1. Add a new Non-Compliance batch job that will identify Program Persons when all the following conditions are met:
   a. Program Code is MC
   b. Program status is Active
   c. Program Person status is Active or Pending
   d. Verification type is either 'SSN' or 'Name/Identity'
   e. Verification status is 'Pending' or 'Refused'
   f. Verification Due date is between the last success batch run date and the current batch run date OR,
   g. The SSN verification has an extension in which the latest extension end date is greater than the verification due date. Batch will trigger when the latest extension end date is between the last success batch run date and the current batch run date.
   h. The SSN or Name/Identity verification must not be verified already by the MC program.

   Note: Verified by Program information is displayed at the bottom of Verification Detail page.

   Sample:

   i. There does not already exist a Non-Compliance record with all the below details:
      1. The Non-Compliance has the same reason to potentially be created.
      2. Non-Compliance begin date is before or on the current batch date.
      3. Non-Compliance end date is on or after the current batch date.
2. Create a Non-Compliance record for the identified persons with details as specified below:
   a. If the pending verification type is 'SSN' then the new batch will create a Non-Compliance with the below details:
      i. Type of 'Procedural Requirement'.
      ii. Reason of 'SSN'.
      iii. Non-Compliance Name of Participant that is pending or refused for verification.
      iv. Non-Compliance Begin Date will be the current batch date.
      v. Non-Compliance End Date will be the high date (12/31/9999).

1. If there exists a future-dated Non-Compliance record, create a new record with the current batch date as the begin date, and the day prior to the existing record's begin date as the new record's end date.
2. If there are more than one future-dated Non-Compliance records, create a new record with the current batch date as the begin date, and the day prior to the closest existing future-dated record's begin date as the new record's end date.

b. If the pending verification type is 'Name/Identity' then the new batch will create Non-Compliance with below details.
   i. Type of 'Failure to Provide'.
   ii. Reason of 'Name/Identity'.
   iii. Non-Compliance Name of Participant that is pending or refused for verification.
   iv. Non-Compliance Begin Date of current batch date.
   v. Non-Compliance End Date will be the high date (12/31/9999).
      1. If there exists a future-dated Non-Compliance record, create a new record with the current batch date as the begin date, and the day prior to the existing future-dated record's begin date as the new record's end date.
      2. If there are more than one future-dated Non-Compliance records, create a new record with the current batch date as the begin date, and the day prior to the closest existing future-dated record's begin date as the new record's end date.

3. Add a batch property to allow running the batch job per county; currently, the batch job will run only for LA county.

2.4.2.3 Execution Frequency

Daily except Sunday and Holidays.

2.4.2.4 Key Scheduling Dependencies

The new batch will run before the existing MC SSN Verification Due Batch EDBC sweep job (PB00E176).

2.4.2.5 Counties Impacted

Los Angeles County only.

2.4.2.6 Data Volume/Performance

N/A.

2.4.2.7 Failure Procedure/Operational Instructions

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc…).

2.4.3 CalACES-LRS: Update existing MC SSN Verification Due Batch EDBC sweep job

2.4.3.1 Overview

The existing CalACES-LRS MC SSN Verification Due Batch EDBC sweep job (PB00E176) triggers Batch EDBC when the SSN verification is overdue. This SCR will update the batch job to trigger Batch EDBC when a MC participant has a Non-Compliance type of Procedural Requirement with the Non-Compliance Reason of 'SSN'. Additionally, the journal entry will be modified from 'Batch EDBC for MC SSN Verifications' to 'SSN Non-Compliance'.

2.4.3.2 Description of Change

1. Modify the existing journal entry of the MC SSN Verification Due Batch EDBC sweep job with below updated information.

Journal Entry	Description
New/Update	*Update*
Category Id	*942*
Code Num Identif	*MV*
Short Description	*Batch EDBC ran for <Month Year>.*
Long Description	*Batch EDBC ran for <Month Year>. Batch EDBC processed for the MC program for following reasons: **SSN Non-Compliance**.*
Trigger Condition	*When MC participant has a Procedural Requirement Non-Compliance with the reason of 'SSN'.*

2. Update the existing MC SSN verification due batch job (PB00E176) to trigger Batch EDBC when all the following are met:
   a. Program Code is MC
   b. Program status is Active
   c. Program Person status is Active
   d. Participant has a Non-Compliance type of Procedural Requirement and the Non-Compliance Reason of 'SSN'.
   e. The Non-Compliance Begin date is before or on the same date as the benefit month and End date is on or after the last day of the benefit month.
3. Add a batch property to allow running the batch job per county; currently, the batch job will run only for LA county.

2.4.3.3 Execution Frequency

No Change. Monthly on Batch 10-day cut off.

2.4.3.4 Key Scheduling Dependencies

No Change.

2.4.3.5 Counties Impacted

Los Angeles County only.

2.4.3.6 Data Volume/Performance

No Change.

2.4.3.7 Failure Procedure/Operational Instructions

No Change. Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc…).

2.5 Correspondence

Attachments in Section 4 have the Correspondence design updates for CalACES-LRS and CalACES-C-IV.

2.6 Automated Regression Test

2.6.1 Overview

New regression test scripts will be created to verify the sending of Non-Compliance reasons through the eHIT interface during (and only during) the applicable period.

2.6.2 Description of Changes

Create new regression test scripts to cover each of the following scenarios.

Scenario 1: Non-Compliance at Intake

Create a new Medi-Cal case with at least three applicants, where all would be MAGI eligible. Add a Non-Compliance for one of the applicants in the BDA month and request a MAGI determination. Verify that the person is made Ineligible / Denied, and that the appropriate Non-Compliance and EERC details display on the MAGI Request Detail, MAGI Person Detail, and MAGI Determination Summary pages.

Repeat case setup with each of the following Non-Compliance types:

- o Failure to apply for or accept unconditionally available income including but not limited to UIB, SDI, Veteran's Benefits
- o Failure to provide the Veteran's information to complete the MC 05
- o Failure to provide other health insurance information
- o Failure to comply with Third Party Liability
- o Failure to apply for Medicare
- o Failure to provide 2.1Q (Child Support)
- o Failure to provide or apply for SSN
- o Failure to provide identity/name

Scenario 2: Non-Compliance Ongoing

Create a new Medi-Cal case with at least three applicants, where all would be MAGI eligible. Request a MAGI determination and run EDBC to approve the application in the BDA month. Add a Non-Compliance for one of the applicants in the second month and request a new MAGI determination for that month. Verify that the person is made Ineligible / Discontinued, and that the appropriate Non-Compliance and EERC details display on the MAGI Request Detail, MAGI Person Detail, and MAGI Determination Summary pages.

Repeat case setup with each of the following Non-Compliance types:

- o Failure to apply for or accept unconditionally available income including but not limited to UIB, SDI, Veteran's Benefits
- o Failure to provide the Veteran's information to complete the MC 05
- o Failure to provide other health insurance information
- o Failure to comply with Third Party Liability

- o Failure to apply for Medicare
- o Failure to provide 2.1Q (Child Support)
- o Failure to provide or apply for SSN
- o Failure to provide identity/name

Scenario 3: Non-Compliance Cured

Create or identify an existing Medi-Cal case where an applicant has been denied or discontinued for each of the Non-Compliance reasons listed below. End-date the Non-Compliance record in the current or come-up month, and re-apply for the person in the same month. Request a MAGI determination and run EDBC for this month, and verify that the person is made Eligible / Active, and that the previous Non-Compliance and EERC details do not display on the MAGI Request Detail, MAGI Person Detail, and MAGI Determination Summary pages.

Non-Compliance types:

- o Failure to apply for or accept unconditionally available income including but not limited to UIB, SDI, Veteran's Benefits
- o Failure to provide the Veteran's information to complete the MC 05
- o Failure to provide other health insurance information
- o Failure to comply with Third Party Liability
- o Failure to apply for Medicare
- o Failure to provide 2.1Q (Child Support)
- o Failure to provide or apply for SSN
- o Failure to provide identity/name

3   REQUIREMENTS

3.1   Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.8.1.7	The LRS shall determine when an individual is eligible for Medi-Cal coverage and shall ensure that all required information is collected, eligibility is determined, and share of cost is computed.	CalACES sends the Non-Compliance Reason(s) to CalHEERS to evaluate the eligibility accurately.

4   SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	Design updates for CalACES-CIV	CIV NOA Design Document.docx
2	Correspondence	Design updates for CalACES-LRS	CalACES FDDs.zip

5   MIGRATION IMPACTS

SCR Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?
CA-203096	Medi-Cal	Existing LRS-only batch to discontinue individuals from Non-MAGI Medi-Cal due to overdue SSN verification updated to query MC Non-Compliance record for SSN instead of Verification record (See section 2.4.3)	Batch PB00E176 exists in LRS only. Batch will remain only in LRS. Updated to be configurable to be used by other counties post migration		No
CA-203096	Medi-Cal	A new batch added to LRS only to create MC Non-Compliance records for outstanding SSN and Name/Identity verifications (See section 2.4.4)	Added to LRS only. Configurable to be used by other counties post migration		No

Design Document

CA-203993 CIV-101933 - Update Diaper Benefit Functionality

	DOCUMENT APPROVAL HISTORY		
CalACES	Prepared By	Rainier Dela Cruz	
	Reviewed By	Jyothi Chavata, Eric Chu, Kapil Santosh, Naresh Barsagade, Alexia England, Carl Moore	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
09/13/2018	0.1	Initial Revision	Rainier Dela Cruz
03/14/2019	0.2	Updated the recommendation to the daily and monthly approval sweeps to check if the participant is a parent or a non-parental caretaker. Updated the recommendation to include the check for Pending or Active Cal-Learn. Updated the recommendation to include Cal-Learn participant for CW MMO.	Rainier Dela Cruz
03/29/2019	0.3	Added recommendation to update the Daily and Monthly Auxiliary Payment Authorization batch job to not create the need, service arrangement, and payment request for diaper allowance when the CW program is discontinued. Added recommendation to update the page validation on the Service Arrangement Detail page.	Rainier Dela Cruz
04/25/2019	0.4	Updated the validation message on the Service Arrangement Detail page based on Region 8 feedback. For LRS, the validation message will reference WTW and CW REP. For C-IV, it will only reference WTW. A migration SCR has been logged to address the difference (Please see Section 5 for more information).	Rainier Dela Cruz
5/20/2019	0.5	Updated the validation message on Service Arrangement Detail and	Kapil Santosh

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
		Payment Request Detail pages. Added recommendation to Nightly Payment Request Issuance Sweep procedure.	

DRAFT

Table of Contents

1 OVERVIEW

ACL 18-38 required County Welfare Departments (CWDs) to issue thirty dollars ($30) per month, for each qualified child under age three on the first of the payment month, to California Work Opportunity and Responsibility to Kids (CalWORKs) recipients (and CW sanctioned persons, in the process of curing or have cured their WTW/CW REP sanction) who are qualified Cal-Learn (CL) or Welfare-to-Work (WTW)/CW Refugee Employment Program (REP) participants, as WTW/CW REP supportive service to assist with diaper costs. SCR CA-202085/CIV-100986 (Diaper Benefit Functionality Phase I) provided system functionality for users to manually create a need, service arrangement, and payment request to issue diaper allowance via EBT or another payment method. SCR CA-59192 CIV-100305 (Add Diaper Benefit Functionality Phase II) implemented the automated functionality that determines qualified children with qualified participants and creates the need, service arrangement and payment request to automatically issue a diaper allowance and generates the appropriate NA 823 NOA through different batch processes.

With the implementations of the SCR CA-202085/CIV-100986 and SCR CA-59192 CIV-100305, there were several issues/conditions not covered in the design:

1. The Cal-Learn Report Card Bonus payment cannot be issued to the Senior Parent on a Nested Parent Case as required in MPP 42-769.12.123 because only the Cal-Learn primary applicant can be set as a payee when creating service arrangement for this payment type.

2. The Diaper Allowance benefit cannot be issued manually for eligible child(ren) of WTW/REP participant with WTW/REP program status "Sanction" but still remains "Active" in CW program while batch process was already programmed to create Diaper Allowance Payment Request for this condition.

3. The batch automation was **not** programmed to include child in CW under the age of three with a status of Denied or Discontinued and the qualified participant is the parent or nonparental caretaker of the child when determining qualified children.

4. The batch automation was **not** programmed to include active CW program persons with a role of Medi-Cal Member Only (MMO) when determining qualified participants.

5. The qualified participants are not notified for the discontinuance/or ineligibility of Diaper Allowance when they are no longer eligible to diaper allowance due to other factors **and** their SAR 7 or RE packets are not received or incomplete because the NA 960 X/Y or NA RE X/Y only indicates the reason 'SAR 7/RE Incomplete'.

6. The batch automation was **not** programmed to check the status of the CalWORKs program before creating the need, service arrangement, and payment request to issue diaper allowance.

7. The Customer Options for "Diaper Allowance" from Empl. Services global navigation displays the "Complete" checkbox field which is not relevant to this page.

This document describes changes needed to the on-line Payment Request Detail page and the modification to the Diaper Payment Request batch sweeps to handle the issues/conditions mentioned above.

1.1 Current Design

With the implementation of SCR CA-202085/CIV-100986 (Diaper Benefit Functionality Phase I), the functionality was developed to allow users to manually create diaper allowance in the system. Users must manually create a need, a service arrangement, and a payment request to issue diaper allowance manually in the system. When creating a service arrangement for Cal-Learn "Rpt Card Bonus", the payee can only be set to the primary applicant, which is Cal-Learn participant. Furthermore, when a payment request is created for diaper allowance, if the status of the WTW program/ CW REP is 'Sanction', the payment request cannot be approved.

With the implementation of SCR CA-59192 CIV-100305 (Add Additional Diaper Benefit Functionality Phase II), the functionality was developed to automatically create and pay diaper allowance to eligible participants. The automation is performed by different batch processes. The daily and monthly diaper allowance approval sweeps determine qualified children with qualified participants. The sweeps currently exclude child in CW under the age of three with a status of Denied or Discontinued and the qualified participant is the nonparental caretaker of the child when determining qualified children. The sweeps also exclude active CW program persons with a role of Medi-Cal Member Only (MMO) when determining qualified participants.

In addition, the monthly diaper allowance discontinuance sweep evaluates whether the qualified children with qualified participants currently receiving diaper allowance are no longer eligible. If the participant is no longer eligible to diaper allowance and their SAR 7 is not received or incomplete, the discontinuance reason applied is 'SAR 7/RE Incomplete'.

A qualified child can be opted out of diaper allowance by creating a Customer Options record with the type of 'Diaper Allowance Opt-out'. The Customer Options List page where the record can be created was updated to be accessible through the Empl. Services global navigation. The 'Continue' button is hidden on the page. However, the 'Complete' checkbox is still visible.

1.2 Requests

1. As part of Phase II, the Service Arrangement Detail page was updated to set the payee on the service arrangement to the primary applicant of the employment services program when the program payee is selected. This change allowed the need to be setup for the child and the payments made to the qualified participant when manually issuing diaper allowance. However, for Cal-Learn, a person can have an administrative role of 'Payee' on the program. The update removed the existing functionality that sets the payee on the service arrangement to the payee on the Cal-Learn program when the program payee is selected. The Service Arrangement Detail page needs to be updated to add the previous functionality back in to allow user to issue "Rpt Card Bonus" to the caretaker relative (Senior Parent in a nested case).

2. When manually issuing the diaper allowance, the need will be created for the qualified child and the service arrangement and payment request will be created for the qualified participant. Current page validation prevents the creation of a service arrangement and associated payment request for diaper allowance when the qualified participant has a WTW or REP program status of 'Sanction'. Specific to the support service of diaper allowance, the requirement is to create a service arrangement, and approved payment request, when the WTW or CW REP program status is 'Sanction', but a CalWORKs sanction has not yet removed the person from aid.

3. The daily and monthly diaper allowance approval sweeps will identify a qualified child with a qualified participant for the payment month. Currently, the definition of a qualified child does not include a child under the age of three who is on an active CW program with a status of Denied or Discontinued and the qualified participant, who is on the same CW program with a status of Active and a Role of Member or MMO, is the parent or nonparental caretaker of the child and is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause, or Sanction or is a Cal-Learn participant with a program status of Pending or Active. The approval sweeps will need to be updated expand the definition of a qualified child to include a child under the age of three who is on an active CW program with a status of Denied or Discontinued and the qualified participant is the nonparental caretaker of the child.

4. The daily and monthly diaper allowance approval sweeps currently do not define a qualified participant as an active CW program person with a role of MMO, who is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause or Sanction (while awaiting the CW sanction) or a Cal-Learn participant with a program status of Pending or Active. The approval sweeps will need to be updated to expand the definition of a qualified participant to include an Active CW program person with a role of MMO who is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-

Compliant, Good Cause or Sanction (while awaiting the CW sanction) or is a Cal-Learn participant with a program status of Pending or Active.

5. When the qualified participant is no longer eligible to diaper allowance and the qualified participant's SAR 7 or RE packet has not been received or is incomplete, the participant will only receive the NA 960 X/Y or NA RE X/Y to notify them that they will lose their diaper allowance because they failed to turn in their SAR 7 or RE packet, or the packet is incomplete. Since only the NA 960 or NA RE will be generated in this scenario, the participant is unaware of other factors affecting their eligibility to the diaper allowance, whereas, had both the NA 960 X/Y or NA RE X/Y and the NA 823 generated, the participant would be made aware of all the factors affecting their eligibility. The monthly diaper allowance discontinuance sweep needs to be updated to set the discontinuance reason as 'Participant Not Eligible' to have both the NA 960 X/Y or NA RE X/Y and the NA 823 generate.

6. The purpose of the Daily and Monthly Auxiliary Payment Authorization batch jobs is to create the need, service arrangement, and payment request for diaper allowance. The daily job authorizes the diaper allowance for the current month and the monthly job authorizes the diaper allowance the upcoming month. When the Auxiliary Payment Authorization batch jobs run to create the need, service arrangement, and payment request to issue diaper allowance, the current logic does not check the status of the CW program. When the batch job runs at the end of the month without a check of the CW status, it will create the need, service arrangement, and payment request to issue diaper allowance for the upcoming month even though the CW program is discontinued. The Daily and Monthly Auxiliary Payment Authorization batch jobs will be updated to not create the need, service arrangement, and payment request, thereby preventing the issuance of a payment for diaper allowance when the CW program is discontinued. Diaper Allowance Payments are not authorized or issued by batch on CW discontinued cases or for post-employment / job retention services; Diaper Allowance Payments for post-employment / job retention services must be manually created by WTW/REP workers.

7. The Nightly Payment Request Issuance Sweep Procedure sweeps all approved payment requests that don't have an issuance created and insert the authorization record into a transaction table. The record is then processed by the nightly issuance batch which creates issuances for the authorized payment requests. The Nightly Payment Request Sweep needs to be updated for Diaper Allowance payment requests to pick WTW/REP program in Active, Non-Comp, Good Cause and Sanction status (while awaiting the CW sanction) and CalLearn program in Active or Pending status. The sweep also needs to be updated to not pick diaper allowance payment requests when the CW program is discontinued, unless the active WTW/REP program status reason indicates post-employment or job retention services.

8. The 'Continue' button is hidden on the Customer Options List when navigating to the page through Empl. Services. The 'Complete' checkbox needs to be hidden.

1.3 Overview of Recommendations

This system change request will do the following:

1. The Service Arrangement Detail page will be updated add the previous functionality that sets the payee on the service arrangement as the payee on the Cal-Learn program when the program payee is selected.

2. The page validation on the Service Arrangement Detail page will be updated to allow the user to save a service arrangement for diaper allowance when the qualified participant's status on the WTW program or CW REP is 'Sanction' and has a CalWORKs role of Member or MMO. The Payment Request Detail page will also be updated to allow the user to approve a payment request created for diaper allowance if the qualified participant's status on the WTW program or CW REP is 'Sanction' and has a CalWORKs role of Member or MMO.

3. The daily and monthly diaper allowance approval sweep will be updated to define a qualified child as a child under the age of three who is on an active CW program with a status of Active, Denied or Discontinued and the qualified participant, who is on the same CW program with a status of Active and a Role of Member or MMO, is the parent or nonparental caretaker of the child and is a WTW or CalWORKs REP qualified participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause, or Sanction (while awaiting the CW sanction) or is a Cal-Learn participant with a program status of Pending or Active.

4. The daily and monthly diaper allowance approval sweep will be updated to expand the definition of a qualified participant to include an Active CW program person with a role of MMO who is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause or Sanction (while awaiting the CW sanction) or a Cal-Learn participant with a program status of Pending or Active.

5. The monthly diaper allowance discontinuance sweep will be updated to set the discontinuance reason as 'Participant Not Eligible' if the participant is no longer eligible to diaper allowance and their SAR 7 or RE packet is not received or incomplete.

6. The daily and monthly Auxiliary Payment Authorization batch job will be updated to not create the need, service arrangement, and payment request for diaper allowance if the CalWORKs program is discontinued.

   Note: Diaper Allowance Payments are not authorized or issued by batch on CW discontinued cases or for post-employment / job retention services; Diaper Allowance Payments for post-employment / job retention services must be manually created by WTW/REP workers.

7. The Nightly Payment Request Sweep will be updated for Diaper Allowance payment requests to pick WTW/REP program in Active, Non-Comp, Good Cause and Sanction status and CalLearn program in Active or Pending status. The sweep will also be updated to not pick diaper allowance payment requests when the CW program is discontinued, unless the active WTW/REP program status reason indicates post-employment or job retention services.

8. The Customer Option List Page will be updated to hide the 'Complete' checkbox when navigating to the page through Empl. Services.

1.4 Assumptions

1. When the qualified child is no longer eligible and the qualified participant's SAR 7 or RE packet has not been received or is incomplete, the household will receive the NA 960 X/Y or NA RE X/Y stating they will lose their cash aid due to not turning in or completing the SAR 7 or RE packet and the NA 823 stating the child is no longer eligible to diaper allowance.

2. If the worker discontinues the CalWORKs program after the 10-day cutoff for the upcoming month, the diaper payment creation batch job will no longer create the need, service arrangement, and payment request for the upcoming month after the update in **Section 2.5** has been implemented. Therefore, the diaper allowance (unless for post-employment or job retention) will not be issued for the upcoming month. Within the CW discontinuance process, the worker will also notify (through the NA 823) the participant that they are no longer eligible to the diaper allowance for the upcoming month.

2 RECOMMENDATIONS

2.1 Service Arrangement Detail

2.1.1 Overview

The Service Arrangement Detail page allows users to create a service arrangement for a requested supportive service need. As part of Phase II, the Service Arrangement Detail page was updated to set the payee on the service arrangement to the primary applicant of the employment services program when the program payee is selected. This allowed the need to be setup for the child and the payments made to the qualified participant when manually issuing diaper allowance. However, for Cal-Learn, a person can have an administrative role of 'Payee' on the program. The update removed the existing functionality that sets the payee on the service arrangement to the payee on the Cal-Learn program when the program payee is selected. This section will describe the update to the Service Arrangement Detail page to re-add the previous

functionality to allow user to issue "Rpt Card Bonus" to the caretaker relative (Senior Parent in a nested case).

Currently, a page validation prevents a service arrangement from being created for diaper allowance if the status of the qualified participant's WTW program or CW REP is 'Sanction'. This section will describe the changes to allow the creation of a service arrangement when the status of the WTW program or CW REP is 'Sanction' (while awaiting the CW sanction).

2.1.2 Description of Changes

1. Update the Service Arrangement Detail page to set the Cal-Learn program payee as the payee on the service arrangement when the program payee is selected. If there is no Cal-Learn program payee, set the primary applicant of the Cal-Learn program as the payee on the service arrangement when the program payee is selected. This update is only for service arrangements created for non-diaper allowance. If the need category is "Other Supportive Services" and the need type is "Diaper Allowance," when the program payee is selected on the Service Arrangement Detail page, the payee will be set as the primary applicant of the Cal-Learn program.

2. Remove the following validation that is currently shown on the Service Arrangement Detail page for Diaper Allowance and replace it with new validations.

    'The program or the person within it is not Active, Pending, Good Cause or Non-Comp (Welfare-to-Work only) on <Date> which falls within the Arrangement Period. Please adjust the dates.'

3. Add a new validation on the Service Arrangement Detail page to allow a service arrangement to be created for Diaper Allowance when the status on the qualified participant's WTW program or CW REP is Active, Non-Comp, Good Cause or Sanction (while awaiting the CW sanction). The validation message will say:

    'The <Program> program or the person within it is not Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) on <Date> which falls within the Arrangement Period. Please adjust the dates.'

Note: <Program> will be WTW or REP program in this validation.

<Date> will be the "**Service Arrangement Begin Date**" if the program/person does not qualify to receive Diaper Allowance payments as of the Service Arrangement begin date, or a **date within the Service Arrangement period** when the program/person becomes ineligible to receive Diaper payments after the Service Arrangement begin date.

The worker must enter the exact dates during which the program or the person is eligible to receive the Diaper allowance payment. The validation would be shown on the page and the worker would be blocked from

creating a Service Arrangement for Diaper Allowance, if the program or the person is not eligible for any day within the service arrangement period.

Example:

a. Worker enters Service Arrangement period from 3/15/2019 to 5/31/2019. The WTW status changes from Active to Deregistered on **3/20/2019**. The worker would not be allowed to save the Service Arrangement and the following validation would be shown.

> 'The WTW program or the person within it is not Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) on **3/20/2019** which falls within the Arrangement Period. Please adjust the dates.'

b. Worker enters Service Arrangement period from 3/15/2019 to 5/31/2019. The WTW status changes from Non-Comp to Sanction on **3/20/2019** and CW role for the WTW participant changes from FRE to MEM on 4/1/2019. The worker would not be allowed to save the Service Arrangement and the following validation would be shown.

> 'The WTW program or the person within it is not Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) on **3/20/2019** which falls within the Arrangement Period. Please adjust the dates.'

Note: In this case, a Service Arrangement for Diaper allowance will be allowed to be saved only if the worker enters a Service Arrangement begin date **on or after 4/1/2019**.

c. Worker enters Service Arrangement period from **3/15/2019** to 5/31/2019. The WTW status changes from Active to Deregistered on 2/1/2019. The worker would not be allowed to save the Service Arrangement and the following validation would be shown.

> 'The WTW program or the person within it is not Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) on **3/15/2019** which falls within the Arrangement Period. Please adjust the dates.'

d. Worker enters Service Arrangement period from **3/15/2019** to 5/31/2019. The WTW status changes from Non-Comp to Sanction on 3/20/2019 and CW role for the WTW participant is FRE from 2/1/2019. The worker would not be allowed to save the Service Arrangement and the following validation would be shown.

> 'The WTW program or the person within it is not Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) on **3/15/2019** which falls within the Arrangement Period. Please adjust the dates.'

e. Worker enters Service Arrangement period from 3/01/2019 to 3/31/2019. The WTW status changes from Active to Deregistered on **3/20/2019**. The worker would not be allowed to save the Service Arrangement and the following validation would be shown.

> 'The WTW program or the person within it is not Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) on

3/20/2019 which falls within the Arrangement Period. Please adjust the dates.'

4. Add a new validation on the Service Arrangement Detail page to allow a service arrangement to be created for diaper allowance when the status on the qualified participant's CalLearn program is Active or Pending. The validation message will say:

> 'The <Program> program or the person within it is not Active or Pending on <Date> which falls within the Arrangement Period. Please adjust the dates.'

Note: <Program> will be CalLearn program in this validation.

<Date> will be the "**Service Arrangement Begin Date**" if the program/person does not qualify to receive Diaper Allowance payments as of the Service Arrangement begin date, or a **date within the Service Arrangement period** when the program/person becomes ineligible to receive Diaper payments after the Service Arrangement begin date.

2.1.3 Page Location

Global: Employment Services

Local: Supportive Services

Task: Service Arrangements

2.1.4 Security Updates

No changes.

2.1.5 Page Mapping

No changes.

2.1.6 Page Usage/Data Volume Impacts

No changes.

2.2 Payment Request Detail

2.2.1 Overview

The user can create or approve a recipient's request for a supportive service on the Payment Request Detail page. When manually issuing diaper allowance, the need is created for the qualified child and the service arrangement and payment request are created for the qualified participant. Currently, there is a page validation that prevents a payment request from being approved if the

status of the qualified participant's WTW program or CW REP is 'Sanction'. This section will describe the changes to allow a payment request created for diaper allowance to be approved when the status of the WTW program or CW REP is 'Sanction'.

2.2.2 Description of Changes

1. Remove the following validation that is currently shown on the Payment Request Detail page when approving Diaper Allowance payment request and replace it with new validations.

   'WTW Non-Transport Need Programs must be Active, Non-Comp, Good Cause or Pending during the Service Month.'

2. Add a new validation on the Payment Request Detail page to allow a payment request to be approved for Diaper Allowance when the status on the qualified participant's WTW program or CW REP is Active, Non-Comp, Good Cause or Sanction (while awaiting the CW sanction). The validation message will say:

   'The {Program} Program or the person within it must be Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) during the Service Month for receiving Diaper Allowance payments.'

Note: {Program} will be WTW or REP program in this validation and the validation would be shown if the program or the person is not eligible for receiving Diaper Allowance payments at least for one day in the payment request effective month.

3. Add a new validation on the Payment Request Detail page to allow a payment request to be approved for Diaper Allowance when the status on the qualified participant's CalLearn program is Active or Pending. The validation message will say:

   'The {Program} Program or the person within it must be must be Active or Pending during the Service Month for receiving Diaper Allowance payments.'

Note: {Program} will be CalLearn program in this validation and the conditions would be checked as of the first day of the service month.

2.2.3 Page Location

Global: Fiscal

Local: Payment Request

Task: Payment Request Search

2.2.4 Security Updates

No changes.

2.2.5 Page Mapping

No changes.

2.2.6 Page Usage/Data Volume Impacts

No changes.

2.3 Daily and Monthly Diaper Allowance Approval Sweep

2.3.1 Overview

The daily and monthly approval sweeps identify a qualified child with a qualified participant for the payment month (current month for the daily sweep and the following month for the monthly sweep).

Currently, the definition of a qualified child does not include a child under the age of three, who is on an active CW program with a status of Denied or Discontinued and the qualified participant, who is on the same CW program, is the parent or nonparental caretaker of the child and is a WTW or CalWORKs REP participant and their WTW or CW REP program status is Active, Non-Compliant, Good Cause, or Sanction (while awaiting the CW sanction) with CW status of Active and a Role of Active Member or Active MMO or the parent or nonparental caretaker of the child is a Cal-Learn participant with program status is Active or Pending with CW status of Active Member or Active MMO. The approval sweeps will need to be updated to expand the definition of a qualified child to include a child under the age of three who is (aided or unaided) on an active CW program with a status of Denied or Discontinued and the qualified participant is the nonparental caretaker of the child. For example, a parent may have income to make the parent and his/her child unaided, but the stepparent of the unaided child be a qualified participant.

The daily and monthly approval sweeps currently do not define a qualified participant as an active CW program person with a role of MMO, who is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause, or Sanction (while awaiting the CW sanction) or who is a Cal-Learn participant with Cal-Learn program status of Active or Pending. The approval sweeps will need to be updated to expand the definition of a qualified participant to include an active CW program person with a role of MMO, who is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause, or

Sanction (while awaiting the CW sanction) or who is a Cal-Learn participant with Cal-Learn program status Active or Pending.

2.3.2 Description of Change

1. Update the daily and month diaper allowance approval sweeps to define a qualified child as a child under the age of three who has a status of Active, Denied, or Discontinued on an active CW program and the qualified participant, who is on the same CW program with an Active status and a Role of Member or MMO, is the parent or nonparental caretaker with the parental control set to 'Yes' of the child and is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause, or Sanction (while awaiting the CW sanction) with CW status of Active Member or Active MMO or who is a Cal-Learn participant with programs status Pending or Active with CW status of Active Member or Active MMO.

2. Update the daily and month diaper allowance approval sweep to modify the definition of a qualified participant to include an active CW program person with a role of MMO, who is a WTW or CalWORKs REP participant and the program status on the WTW or CW REP program is Active, Non-Compliant, Good Cause or Sanction (while awaiting the CW sanction) or who is a Cal-Learn participant with Cal-Learn program status Active or Pending.

2.4 Monthly Diaper Allowance Discontinuance Sweep (C-IV Only)

2.4.1 Overview

The Monthly Diaper Allowance Discontinuance Sweep will evaluate whether the qualified children with qualified participants, currently receiving diaper allowance, are no longer eligible. When the qualified participant is no longer eligible and the qualified participant's SAR 7 or RE packet has not been received or is incomplete, the participant will only receive the NA 960 X/Y or NA RE X/Y to notify them that they will lose their diaper allowance because they failed to turn in their SAR 7 or RE packet, or the packet is incomplete.

The NA 823 batch sweep determines if the NA 823 needs to be generated for the discontinuance of diaper allowance by searching the auxiliary payment table for records that have been updated with a discontinuance date and the discontinuance reason is either Child Not Eligible or Participant Not Eligible. The NA 823 discontinuance notice does not generate is in this scenario because the monthly diaper allowance discontinuance sweeps applies a reason of SAR7/RE Incomplete.

Since only the NA 960 or NA RE will be generated in this scenario, the participant is unaware of other factors affecting their eligibility to the diaper allowance,

whereas, had both the NA 960 X/Y or NA RE X/Y and the NA 823 generated, the participant would be made aware of all the factors affecting their eligibility to diaper allowance. The monthly discontinuance sweep will be updated to set the discontinuance reason as 'Participant Not Eligible' to have both the NA 960 X/Y or NA RE X/Y and the NA 823 generate.

2.4.2 Description of Change

1. Update the Monthly Diaper Allowance Discontinuance Sweep to set the discontinuance reason to 'Participant Not Eligible' (which will trigger the generation of the NA 823) when participant no longer eligible for diaper allowance and their SAR7 or RE Packet (CW RE or CF/CW RE) is in a status of not received or incomplete for the payment month.
   Note: This update is for C-IV only, CalACES has already implemented this update to the monthly discontinuance sweep.

2. The discontinuance sweep currently uses the same logic as the Diaper Allowance Approval Sweep when determining if a qualified child with a qualified participant are still eligible for diaper allowance for the upcoming month. The discontinuance sweep will verify if the child or the participant still meets the same eligibility conditions for diaper allowance established in the approval sweep. In **Section 2.3**, the definition of a qualified child and a qualified participant are being updated. The same update will be made to the discontinuance sweep.

2.5 Daily and Monthly Auxiliary Payment Authorization Batch Job

2.5.1 Overview

The purpose of the Daily and Monthly Auxiliary Payment Authorization batch jobs is to create the need, service arrangement, and payment request for diaper allowance. The daily job authorizes the diaper allowance for the current month and the monthly job authorizes the diaper allowance the upcoming month. When the Auxiliary Payment Authorization batch jobs run to create the need, service arrangement, and payment request to issue diaper allowance, the current logic does not check the status of the CW program. When the batch job runs at the end of the month without a check of the CW status, it will create the need, service arrangement, and payment request to issue diaper allowance for the upcoming month even though the CW program is discontinued. The Daily and Monthly Auxiliary Payment Authorization batch jobs will be updated to not create the need, service arrangement, and payment request, thereby preventing the issuance of a payment for diaper allowance when the CW program is not active (status is not Active or Ineligible).
Note: Diaper Allowance Payments are not authorized or issued by batch on CW discontinued cases or for post-employment / job retention services; Diaper Allowance Payments for post-employment / job retention services must be manually created by WTW/REP workers.

2.5.2 Description of Change

Update the Daily and Monthly Auxiliary Payment Authorization batch job to not create the need, service arrangement, and payment request for diaper allowance if the CalWORKs program is not active (status is not Active or Ineligible).

Note: Diaper Allowance Payments are not authorized or issued by batch on CW discontinued cases or for post-employment / job retention services; Diaper Allowance Payments for post-employment / job retention services must be manually created by WTW/REP workers.

2.6 Nightly Payment Request Issuance Sweep Procedure

2.6.1 Overview

The purpose of the Nightly Payment Request Issuance Sweep Procedure is to sweep all approved payment requests that don't have an issuance created and insert the authorization record into a transaction table. The record is then processed by the nightly issuance batch which creates issuances for the authorized payment requests.

2.6.2 Description of Change

Add the following conditions to the Nightly Payment Request Issuance Sweep Procedure when the Need Category is 'Other Supportive Services' and Need Type is 'Diaper Allowance'

    a. The status of the WTW program or CW REP is Active, Non-Comp, Good Cause or Sanction (Sanction and CW MEM or MMO) in the payment request effective month.
        Note: If the WTW/REP program status is eligible for at least one day in the payment request effective month, the month would be eligible for receiving diaper allowance payment. In case of Sanction program status, the CW role of MEM or MMO would be checked as of the first day of the payment request effective month.

    b. The status of the CalLearn program is Active or Pending in the payment request effective month.
        Note: The CL program status would be checked as of the first day of the payment request effective month.

    c. The status of the CalWORKs program for the payment request payee is Active (status is Active or Ineligible) unless for post-employment or job retention.
        Note: The status of the CalWORKs program would be checked as of the first day of the payment request effective month. The status of the

CalWORKs program would not be checked if the WTW/REP program's status reason is "Post Emp/Job Retention" for at least one day in the payment request effective month.

Note: The existing conditions on the Nightly Payment Request Issuance Sweep would be checked for payment requests that are not Diaper Allowance.

2.7   Customer Option List

2.7.1   Overview

The Customer Option List page allows the user to view, add, edit, and remove Customer Option records. For diaper allowance, the Customer Option List page was made accessible through the Customer Options task navigation under the Empl. Services global navigation tab. The user can add a Customer Option record to opt out a qualified child from receiving diaper allowance. The 'Continue' button was hidden when accessing the page through the Empl. Services navigation, however, the 'Complete' checkbox remained. The Customer Option List page will be updated to hide the checkbox.

2.7.2   Customer Options List Mockup

Customer Options List

Search Results Summary				Results 1 - 1 of 1
	Display From:	**To:**		View
				Add

■	**Name**	**Type**	**Begin Date**	**End Date**	
☐	Test, Child	Diaper Allowance Opt-Out	08/01/2018		Edit

| Remove | | | | | Add |

Figure 2.4.2.1 – Customer Options List

2.7.3   Description of Changes

Update the Customer Option List page to hide the 'Complete' checkbox when navigating to the page through Empl. Services.

2.7.4   Page Location

Global: Employment Services
Local: Case Summary or Appraisal
Task: Customer Options

2.7.5   Security Updates

No changes.

2.7.6   Page Mapping

No changes.

2.7.7   Page Usage/Data Volume Impacts

No changes.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

DRAFT

4   REQUIREMENTS

4.1   Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.10.1.1	The LRS shall include the ability to issue and maintain the history of the following benefits: a. Monthly benefits issued on a recurring basis, on either a calendar month or fiscal (cyclical) period; b. Emergency issuances (e.g., Immediate Need, Expedited Services and Emergency Aid Requests); c. Diversion payments; d. Supplemental benefits; e. Recovery refunds; f. Special needs payments; g. Retroactive payments; h. Vendor and/or Service Provider payments; i. Tokens and cash bus passes; j. Non-traditional/alternative transportation (e.g., car pool, taxi vouchers, and parking fees); k. Vouchers/cash for special payments, ancillary payments and other services; l. Interim assistance payments; m. Transportation payments; n. Petty cash; o. Cal-Learn bonus; p. Cal-Learn graduation bonus; q. Vehicle repair program; r. Additional transportation expense payments; s. Ancillary payments; and t. Child care payments.	The updates to the monthly and daily approval sweeps will pick up the population that were not issuing diaper allowance to or the workers were issuing manual diaper allowance.

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	How Requirement Met

DRAFT

5   MIGRATION IMPACTS

SCR Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?

DRAFT

DRAFT

7 APPENDIX

7.1 Update the Need Type Code for Diaper Allowance (CalACES Only)

7.1.1 Overview

When the diaper allowance need category and need type were added as part of Diaper Benefit Functionality Phase I, a code num identification of 'DA' was used for the code value inserted into the Customer Need Type Code codes table (CT164) in C-IV. CalACES already had an existing need type of Diaper Allowance and uses the code num identification of '90'. The purpose of this update is to align the two systems to use the code num identification of 'DA' for the diaper allowance need type.

7.1.2 Description of Changes

1. Create a CTCR to update the end date of code value in CT164 with a code num identification of '90' with a date of 03/31/2019 and update the begin date of code value in CT164 with a code num identification of 'DA' with a date of 04/01/2019.
2. Create a DCR to convert records using the code num identification of '90' as the need type code to use the code num identification of 'DA'.

CalACES

CALIFORNIA AUTOMATED CONSORTIUM ELIGIBILITY SYSTEM

Design Document

SCR 204065 – Create Customer Receipt for Reception Log Visits

	DOCUMENT APPROVAL HISTORY	
Prepared By	Gerald Limbrick	
Reviewed By	[individual(s) from build and test teams that reviewed document]	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
	1.0	Initial Revision	Gerald Limbrick
4/17/2019	1.1	Noted Spanish Printing	Gerald Limbrick
4/23/2019	1.2	MSG Center icons called out	Gerald Limbrick

Table of Contents

1   OVERVIEW

This SCR will adopt C-IV system functionality to create lobby check-in numbers and to print receipts for any visit type from Reception Log Detail. This SCR will also implement printing these receipts to a Zebra receipt printer when one is attached to the workstation.

Note: C-IV CCM SCR 1470 & C-IV SCR 100825 implemented functionality to print receipts for all visit types.

Note: Purchase of a new model of Zebra receipt printer will be required for LRS offices wishing to print to a receipt printer; the mobile printers currently in use in LRS offices are not compatible with this solution. However, this solution will allow all offices to print to any standard printer.

1.1   Current Design

Reception Log Detail is used to track customer visits into county offices: to create, edit and view details of the records on the Reception Log List page.

The YBN mobile application is used to assign check-in numbers but only assigns one number per visitor. LRS does not allow creating a check-in number so records created thru LRS are missing a check-in number.

Reception Log Detail has a Print Receipt button which displays in Create or Edit modes. This button initiates Form PA 2327 "Receipt for Documents" as a receipt for the Document Drop Off visit type. This page also has a Generate Referral button which initiates a referral to an outside agency. The system does not print any receipt for other visit types.

When a print is initiated the system navigates to a new window which causes the need to re-navigate to Reception Log for any subsequent page usage.

Icon images have an "out dated" look and feel.

1.2   Requests

Add the ability to create and print check-in numbers from the Reception Log Detail page. Assign one number per visit type instead of one number per visitor. Implement Reception Log receipt printing, for all visit types; Keep the PA 2337 LA County form as the receipt for Document Drop Off visits. This will ensure that no receipt printing functionality is lost by LRS or C-IV counties at migration.

On the Reception Log Detail page, return the user to the page after printing from or canceling from the Generate Document screens.

1.3   Overview of Recommendations

- Add the Number Assigned field to Reception Log Detail. This field will not be editable. Note: This is the same as the Number Assigned on the Reception Log List page and will be viewable on that page after data is populated here.
- Add logic to Reception Log Detail to the Save Button to retrieve and assign check-in numbers via the existing web-service.

- o Populate the Number Assigned field by applying the same web service logic as the check in functionality handled by YBN mobile service. Note: This includes the additional webservice call only triggered for the SFV office.
    - o Assign one number per visit type.
- Add a button labeled "Print Number Full Page" to Reception Log Detail, for printing with a standard printer.
    - o Create full-page templates for full-page receipts in English and Spanish.
- Add a button labeled "Generate PA2327".
    - o Move the current Print Receipt button functionality (to generate the PA2327) to this button.
- Add a button labeled "Print Number Ticket" to print to a Zebra receipt printer.
    - o Create Receipt templates, for printing to Zebra receipt printers in English and Spanish.
    - o Hide the Print Number Ticket button if a receipt printer is not detected on the workstation.
    - o Add logic to Reception Log Detail to utilize the BrowserPrint.js JavaScript API from Zebra for workstations using receipt printers.
- Note: This SCR will require installing and configuring Zebra "Browser Print", and the Zebra setup utility on each workstation that will be using the Zebra receipt printers.
- Note: Purchase of a new model of Zebra receipt printer will be required for LRS offices wishing to print to a receipt printer the mobile printers currently in use in LRS offices are not compatible with this solution. However, this solution will allow these offices to print to any standard printer.
- Update the Reception Log to open the print work flows in either pop-ups or overlays so the user is not navigated away from the page.
- Move the printing functionality to view mode only.
- Update the Message and Email Icons to those used in the C-IV system. (see Figure 7.1.1 – Replacement Icons). Note: Replacing these icons will update Message Center which uses the same images.

1.4 Assumptions

None

2 RECOMMENDATIONS

2.1 Reception Log Detail

2.1.1 Overview

Currently, though there is an existing web service to assign check-in numbers, this service is not used from anywhere in the LRS application. LRS has no way to assign a check-in number or print the Number Assigned. A Print Receipt button is available in Create or Edit modes. This button generates form PA 2327 (receipt for documents) and is only applicable to the Drop Off Document visit type.

Add the Number Assigned field to the Visit Information section. Use the existing YBN webservice to populate the Number Assigned here. Note: this will propagate to the Reception Log List page. Rename the Print Receipt button to "Generate PA 2327" and add new buttons for full-page printing and for receipt printer printing. Create receipt templates applicable to all visit types for both standard and receipt printers. Update the page so that printing to a standard printer opens the print preview in a pop-up window.

Move the printing functionality (including Generating Referrals and Generating the PA2327) to view mode only.

Update the page so that Generating the PA2327 or Generating a Referral opens in a new overlay instead of changing to a new page. When the overlay is closed, return the user to the Reception Log Detail page.

2.1.2 Reception Log Detail Mockups

Figure 2.1.1 –Reception Log Detail – Edit Mode

Reception Log Detail

*- Indicates required fields

[Print Number Ticket] [Print Number Full Page] [Generate Referral] [Generate PA 2327] [Edit] [Close]

Case Number:		Application Number:	Person Name: *	Office:	Date:
2038140			Beatriz Ross	Pathways	12/04/2018
Description:		Individual Type:	Emergency Requests:		
		Language:	Special Needs:		

Visit Information

Initial Time	Purpose*	Detail	Appt.Time	Program	Status	Number Assigned	Worker ID	Additional E-mail			
10:23 AM	Appointment		12:15 PM	CF	Worker Notified	A001	19LS98000S		🔲	@	🔲@

[Print Number Ticket] [Print Number Full Page] [Generate Referral] [Generate PA 2327] [Edit] [Close]

Figure 2.1.2 –Reception Log Detail – View Mode

Reception Log Detail

*- Indicates required fields

[Save] [Remove] [Cancel]

● **Error with Check-In service. Please try again after some time.**

Case Number:		Application Number:	Person Name: *	Office:	Date:	☐ Interpreter
2038140			Beatriz Ross	Pathways	12/04/2018	☐ Hide From Monitor
Description:		Individual Type:	Emergency Requests:			
		Language:	Special Needs:			

Visit Information

☐	Initial Time	Purpose*	Detail	Appt.Time	Program	Status	Number Assigned	Worker ID	Additional E-mail	
	10:23 AM	Appointment ▾	▾	12:15 PM ▾	CF ▾			19LS98000S [Select]		
☐		▾	▾	▾	▾			[Select]		[Add]

[Remove]

[Save] [Remove] [Cancel]

Figure 2.1.3 – Reception Log Detail – Check-In Service Error

Figure 2.1.4 – Reception Log Detail – Print Error

Figure 2.1.5 – Reception Log Detail – Document Parameters Overlay

Figure 2.1.6 – Message Center – New Icons

2.1.3 Reception Log Receipt Mockups

Welcome to Los Angeles
Pathways

B001

Appointment
B001
Appointment Time: 3:15 PM

Thank You, please have a seat and watch for your number(s) to be called.

December 21, 2018   2:43 PM

Figure 2.1.7 – Reception Log Full Page Printer – Receipt Mockup Single Visit Type

Los Angeles
Pathways

B001, G001

Appointment
B001
Appointment Time: 3:15 PM

EBT Card Replacement
G001

Thank You, please have a seat and watch for your number(s) to be called.

December 21, 2018   2:43 PM

Figure 2.1.8 – Reception Log Full Page Printer – Receipt Mockup Multiple Visit Types

Welcome to Los Angeles
Pathways

B001

Appointment
A001
Appointment Time: 3:15 PM

Thank You, please have a seat and watch for
your number(s) to be called.

December 21, 2018   2:43 PM

Figure 2.1.9 – Zebra Printer Receipt Mockup with a Single Visit Type

Welcome to San Bernardino
Barstow TAD/WTW/Child Care/PID

A001, E001

Appointment
A001
Appointment Time: 3:15 PM

EBT
E001

Thank You, please have a seat and watch for
your number(s) to be called.

December 21, 2018   2:43 PM

Figure 2.1.10 – Zebra Printer Receipt Mockup with Multiple Visit Types

2.1.4 Description of Changes

1) Add the Number Assigned column to Reception Log Detail.
   a) Position this column to the right of the Status column.
   b) Add logic to assign and retrieve check-in numbers via the YBN web-service on saving a record.
   c) Assign one number for each visit type.
   d) Apply the same logic as the check in functionality handled by YBN mobile service including the additional call to the LMRS service for the SFV office.
   e) Display webservice errors in the errors section of the page as "Error with Check-In service. Please try again after some time."
2) Update the page to utilize the "BrowserPrint.js" JavaScript API from Zebra. (This API allows the LRS page to communicate directly with a Zebra printer.) Note: This SCR will require Zebra "Browser Print", and the Zebra "Setup Utility" to be installed and configured on each workstation that will be using the Zebra receipt printers.

a) Display any errors returned by the Browser Print framework in the errors section of the page.
b) Condense any returned errors to either display as:
    i. "An error occurred while printing. Please check the printer." or
    ii. "An error occurred while attempting to connect to your Zebra printer. Install Zebra Browser Print or start the Zebra Browser Print service."

3) Create a Receipt template for Zebra receipt printers.
    a) Use Zebra font "0" for the Receipt template.
    b) Include the following on the template (do not include the case number):
        i. "Welcome to"
        ii. County
        iii. Office Name
        iv. Check-In number(s) -list multiple numbers on the same receipt. (comma separated list)
        v. Visit Reason (repeated when multiple numbers)
        vi. Check-in number (repeated in this section and for multiple check-in numbers)
        vii. Appointment Time: (Appointment Time) (or do not print the line if no appointment) (section repeated if multiple numbers)
        viii. Closing i.e. " Thank you, please have a seat and watch for your number(s) to be called."
        ix. Date and Time (Displayed on Bottom of the receipt)
    c) Embolden the Office name and the check-in number(s)
    d) Make the font size of "Welcome to <County>" and "<Office_Name>" slightly larger than main text
    e) Make the Font size of the comma separated list of check-in numbers noticeably larger than the main text to draw attention to the number(s).

4) Create Full-page templates for full-page receipts in English and Spanish; Include the same information as the Receipt template.
5) Update the Print Receipt Button:
    a) Change the label from "Print Receipt" to "Generate PA2327"
    b) Position this button to the left of the Edit button in view mode only.
    c) Update this button so that the Document Parameters page is opened in overlay, so the user is not navigated away from the page.
6) Update the Generate Referral button
    a) Position this button to the left of the Generate PA 2327 button in view mode only.
    b) Update this button so that the Document Parameters page is opened in overlay, so the user is not navigated away from the page.

7) Add a button labeled "Print Number Full Page" to Reception Log Detail to the left of the Generate PA2327 button in view mode only.
   a) The Print Number Full Page button's visibility will not be dependent on the user's security.
   b) Setup the Print Number Full Page button to print to a standard printer (windows defined printer selection).
   c) Setup the Print Number Full Page button to display the Full-Page template print preview in a pop-up window.
   d) Print the receipt in English or Spanish based on the Reception Log Detail "Language" field. If blank, set to English or something other than Spanish, print in English, if set to Spanish, print in Spanish.
8) Add a button labeled "Print Number Ticket":
   a) Display the Print Number Ticket button to the left of the Print Number Full Page button in view mode only.
      i. This button's visibility will not be dependent on the user's security.
      ii. Display this button only when a Zebra receipt printer is available.
   b) Set this button to print the receipt template to a Zebra receipt printer with no print preview.
   c) Print the receipt in English or Spanish based on the Reception Log Detail "Language" field. If blank, set to English or something other than Spanish, print in English, if set to Spanish, print in Spanish.
   d) If the LRS system finds more than one Zebra printer attached to the workstation, set it to print to the one specified as default in the Zebra software installed on the workstation.
   e) If there is no default Zebra printer specified within the Zebra software, print to the first receipt printer found attached to the workstation.
9) Update this page and Message Center to use the new icons as shown in Figure 7.1.1 – Replacement Icons.

2.1.5 Page Location

LRS Quick Links > Reception Log

2.1.6 Security Updates

Security Rights

Security Right	Right Description	Right to Group Mapping
NA		

Security Groups

Security Group	Group Description	Group to Role Mapping
NA		

2.1.7 Page Mapping

NA

2.1.8 Page Usage/Data Volume Impacts

[Where applicable, evaluate the projected page usage and data volume that will be created from all counties using this page.]

3   SUPPORTING DOCUMENTS

[This section should include any supporting documents for the design as imbedded documents. Some examples of supporting documents include the Security Matrix, Form Design Documents, NOA Design Documents, and ETL Source-to-Target Mappings.]

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.2.2.1	The LRS shall provide a method of tracking the following contacts via the traffic log: a. Face-to-face contacts; d. Inter-County transfer contacts; e. Traffic in the traditional office setting; f. Outreach User contacts in both fixed and non-fixed locations; g. Non-DPSS COUNTY Users; h. Non-COUNTY agencies; i. General public contacts, including e-Government; and j. Other contacts.	Allows tracking of traffic in the traditional office setting.

4.2 Migration Requirements

Per strategic direction for migration, Lobby Management solution has been deferred to CalSAWS General Lobby Management functional design sessions.

DDID #	REQUIREMENT TEXT	How Requirement Met

5 MIGRATION IMPACTS

Accounted for as part of DDID #1778.

SCR Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?
NA					

DRAFT

6   OUTREACH

NA

DRAFT

7 APPENDIX

7.1 Replacement Icons

Replace these old images with these new ones.

Description	Old Image	New Image
msgAcknowledge		
msgAcknowledgeSelect		
msgComplete		
msgCompleteSelect		
msgEmail		
msgGlobe		
msgGlobeEmail		
msgNoResponse		
msgNoResponseSelect		
msgStart		
msgStartSelect		

Figure 7.1.1 – Replacement Icons

Design Document

CA SCR 206058 – Allow Need Type 'Bus Pass – No Valid Month' for CalWORKs program

CalACES	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sidhant Garg
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
03/04/2019	.01	Initial Revision	Sidhant Garg

APPROVAL DATE	APPROVED VERSION	APPROVER

Table of Contents

1   OVERVIEW

This SCR describes the policy changes to replace the Metropolitan Transit Authority (MTA) Bus tokens with the Stored Value TAP Cards and making the corresponding updates in the CalACES system.

Fiscal Operations Division (FOD) maintains the Department's Cash Aid funds that are used to provide emergency assistance to welfare participants. These funds cover Transportation needs such as the MTA bus tokens issued to Welfare-to-Work participants. FOD's Central Cashier Unit (CCU) controls an inventory of MTA bus tokens for the District Offices' use. The District Offices' allocation of MTA bus tokens is maintained on an imprest basis. Also, bus tokens are delivered and disbursed centrally to ensure accountability and security. FOD issues an average of 90,000 bus tokens to 51 District Offices and contractors every month.

On May 25, 2018, the Auditor-Controller (A-C) released a memo to inform Departments that the Metropolitan Transit Authority (MTA) will discontinue their bus tokens and that they will no longer be sold to the County effective August 1, 2018. On July 10, 2018, the A-C issued a second memo to grant County departments an extension for the purchase of tokens until June 28, 2019. Also, tokens will be accepted by MTA until November 29, 2019. Based on FODs discussion with the A-C, currently, their recommendation is for the bus tokens to be replaced by Stored Value (SV) TAP cards.

FOD's preliminary timeline for completion of planned activities is by June 30, 2019, to implement use of the SV TAP cards effective July 1, 2019.

1.1   Current Design

The CalACES system allows the users to create Bus Pass – No Valid Month for the following programs:

a. Welfare-To-Work
b. Cal-Learn
c. REP
d. General Relief/General Assistance

1.2   Request

Enhance the CalACES system with the Transport fare changes mandated by the Los Angeles Auditor Controller after the announcement by Metropolitan Transit Authority (MTA) that they are discontinuing the user of metal bus tokens effective June 29th, 2019. These metal bus tokens will be replaced with the Stored Value TAP Cards. The Request is to allow users to create 'Bus Pass – No Valid Month' for CalWORKs program.

1.3   Overview of Recommendations

This system change request will add new code values to category 1870 - Customer Need to Program Map to lookup the mapping for the ''Bus Pass – No Valid Month'' need type and the 'CalWORKs' program.

1.4   Assumptions

1) The LA County will use the existing Valuable Category of 'Bus Pass – No Valid Month' for the new SV TAP Cards and Load the Valuable Inventory as required.

2   RECOMMENDATIONS

2.1   Service Arrangement Detail

2.1.1   Overview

This update is to enhance the Service Arrangement Detail page to allow user to create 'Bus Pass – No Valid Month' Need Type for CalWORKs program.

2.1.2   Description of Changes

1) Add new code values to category 1870 - Customer Need to Program Map to lookup the mapping for the ''Bus Pass – No Valid Month'' need type and the 'CalWORKs' program.
2) Add new code values to category 1870 - Customer Need to Program Map to lookup the mapping for the ''Bus Pass – No Valid Month'' need type and the 'GROW' program.

2.1.3   Page Location

No Change.

2.1.4   Counties Impacted

Los Angeles County.

2.1.5   Security Updates

No Change.

2.1.6   Page Mapping

No Change.

2.2 Need Detail

2.2.1 Overview
This update is to enhance the Need Detail page to allow user to create 'Bus Pass – No Valid Month' Need Type for 'GROW' Need Category.

2.2.2 Description of Changes
1) Update the page to display the 'Bus Pass – No Valid Month' Need Type for 'GROW' Need Category.

2.2.3 Page Location
No Change.

2.2.4 Counties Impacted
Los Angeles County.

2.2.5 Security Updates
No Change.

2.2.6 Page Mapping
No Change.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4   REQUIREMENTS

4.1   Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.10.1.26	The LRS shall support multiple arrangements for payment of bus tokens, including adding the purchase amount to cash or generating issuance of bus passes/ bus tokens.	This requirement is met by enhancing the Service Arrangement Detail page to allow user to create 'Bus Pass – No Valid Month' Need Type for CalWORKs program.

4.2   Migration Requirements

DDID #	REQUIREMENT TEXT	How Requirement Met
N/A		

5 MIGRATION IMPACTS

Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?
N/A					

6 OUTREACH

None.

7 APPENDIX

None.

CATGRY_ID	CODE_NUM_IDENTIF
184	X1
184	X2
184	X3
184	X4
184	X5
184	X6
184	X7
184	X8
184	X9

SHORT_DECODE_NAME

X1 - Covered CA Subsidized (APTC and/or State Subsidy) 250-400%

X2 - Covered CA Subsidized 100-150%

X3 - Covered CA Subsidized 151-200%

X4 - Covered CA Subsidized 201-250%

X5 - Covered CA Cost Sharing Waiver 100-300%

X6 - Covered CA AI/AN CSR Only No Income Test

X7 - Covered CA Unsub Coverage or Ineligible for Subsidies Above 600%

X8 - Covered CA Lawful Present/MC Ineligible Under 100%

X9 - Covered CA State Subsidy Eligible 400-600%

LONG_DECODE_NAME

Covered California Subsidized Coverage (Advanced Premium Tax Credit and/or State Sub

Covered California Subsidized 100-150%

Covered California Subsidized 151-200%

Covered California Subsidized 201-250%

Covered California Cost Sharing Waiver 100-300%

Covered California American Indian/Alaskan Native Cost Sharing Reduction Only No Incon

Covered California Unsubsidized Coverage or Ineligible for Subsidies Above 600%

Covered California Lawful Present/Medi-Cal Ineligible Under 100%

Covered California State Subsidy Eligible 400-600%

CODE_DESCR

Provides coverage for people between 250-400% FPL.

Provides coverage for people between 100-150% FPL.

Provides coverage for people between 151-200% FPL.

Provides coverage for people between 201-250% FPL.

Provides coverage for people between 100-300% FPL.

Provides coverage for people on AI/AN CSR Only No Income Test.

Provides unsubsidized coverage or Ineligible for Subsidies for those above 600% FPL.

Provides coverage for Lawful Present/MC Ineligible under 100% FPL.

Provides coverage for people between 400-600% FPL.