

California Statewide Automated Welfare System

Design Document

CA-58123 | CIV-10791 – Prevent Advancing Medi-Cal Renewal with a Soft Pause Individual

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1 OVERVIEW

Per guidance provided in ACDWL 17-35, Medi-Cal individuals must be evaluated for Non-Modified Adjusted Gross Income (Non-MAGI) Medi-Cal if the individual was found MAGI Medi-Cal eligible with Soft Pause during the renewal process before advancing the renewal due date.

This SCR will update The Systems to prevent advancing the Medi-Cal renewal with a Soft Pause individual.

1.1 Current Design

When a MAGI Medi-Cal individual reports a change or is reevaluated during the annual renewal period, CalHEERS protects the individual from adverse actions to their MAGI Medi-Cal eligibility by placing the individual in Soft Pause. The annual renewal period begins two months prior to the RE Due Date until the program is renewed.

Soft Pause protects the individual until the County Eligibility Worker (CEW) evaluates the individual for MAGI Medi-Cal with a premium or for other Medi-Cal programs not subject to MAGI, such as Non-MAGI Medi-Cal or Consumer Protection Programs (CPPs).

CalHEERS Soft Pause protections will continue until Soft Pause is lifted by a CEW through an Eligibility Determination Request (EDR). Once Soft Pause is lifted, adverse actions can be applied per the CalHEERS MAGI Medi-Cal discontinuance rules and the individual can be moved to another aid code or discontinued from MAGI Medi-Cal.

With CalHEERS Release 16.4, C-IV SCR 2713 and LRS SCR 36160 updated The Systems with functionality to allow a CEW to send a 'Soft Pause Lift' indicator to CalHEERS in an EDR. When CalHEERS receives the 'Soft Pause Lift' indicator, CalHEERS lifts Soft Pause and applies adverse actions per the CalHEERS MAGI Medi-Cal discontinuance rules and the individual is moved to another aid code or discontinued from MAGI Medi-Cal. CalHEERS sends a MAGI Determination of Eligibility Response (DER) to The Systems with the individual's new MAGI Medi-Cal eligibility/discontinuance and the Eligibility Evaluation Reason code 'Soft Pause Lift'. The CEW can then move the individual to the new MAGI Medi-Cal aid code or evaluate the individual for Non-MAGI Medi-Cal.

C-IV Medi-Cal EDBC Batch skip logic will skip a case with skip reason of 'Soft Paused' when an individual on the MAGI Determination returns as MAGI Eligible with an Eligibility Evaluation Reason of Soft Pause. C-IV generates through batch a Non-MAGI Screening Packet for any individual with Eligibility Evaluation Reason of 'Soft Paused' on the DER received during the Batch MAGI Renewal process. This allows the C-IV CEW to manually request the 'Soft Pause Lift' to determine the individual's correct benefits when the Non-MAGI Screening Packet is returned.

CalSAWS does not have the Medi-Cal Batch EDBC Skip logic nor the batch to generate the Non-MAGI Screening Packet. CalSAWS CA-203981 added the Non-MAGI Screening Packet to the template repository in Release 19.11.

The Systems allow CEWs to run Medi-Cal EDBC against a MAGI Determination that contains an individual in Soft Pause and establish a new annual renewal period. When an individual is in Soft Pause, the MAGI Determination provides the updated income and household size information with incorrect Federal Poverty Level (FPL) limit. As a result, during MAGI Renewals, The Systems generates a MAGI Renewal Notice of Action (NOA) with the incorrect FPL amounts. This can be misleading to the individual.

C-IV allows the CEW to select the 'RE' EDBC Run Reason during the annual renewal period and outside the annual renewal period to establish a new renewal period when processing a reported change. In C-IV 'RE' EDBC Run Reason is displayed when EDBC benefit month is on or after the Re-Evaluation begin month.

CalSAWS allows a worker to select a Run Reason from the EDBC Run Reason dropdown only when running Medi-Cal EDBC for a single-month. In CalSAWS 'RE' EDBC Run Reason is displayed only if the benefit month is after the RE Due Date or if a 'RE' packet exists for the 'RE' Due month.

C-IV sends 'Renewal – manual renewal' (RM) EDR Run Reason to CalHEERS during the annual renewal period starting with the EDR Benefit Month two months prior to the RE Due Date and beyond.

For example: A Medi-Cal program has RE Due Date 06/30/2020.

Beginning with EDR benefit month 05/2020 and beyond, C-IV sends 'RM' EDR Run Reason until a new annual renewal period is established.

CalSAWS does not send 'RM' EDR Run Reason.

CalSAWS automatically sets the EDBC Run Reason to 'RE' if the EDBC Run Reason is left blank when all the following are true:

- The EDBC benefit month is equal to the next RE period begin date and there is a valid open RE record for the program or the EDBC benefit month is equal to the come-up month.
- The appropriate RE packet was generated for the RE Due Month for the program.
- The latest RE packet status is either 'Not Applicable' or 'Reviewed-Ready To Run EDBC'

C-IV does not have functionality to automatically set the EDBC Run Reason to 'RE', but C-IV does have a page validation on the Run EDBC and Negative Action Detail pages that require the worker to run EDBC with 'RE' Run Reason when all the following are true:

- The latest MAGI determination for the benefit month has a 'RE' or 'RM' Run Reason.
- The benefit month is no earlier than one month prior to 'RE' due month.
- 'RE' Run Reason was not selected while running EDBC.
- Not an Auto Test scenario.

The MAGI Emulator allows testing of changes to The Systems that rely on specific results in a MAGI Determination without a direct connection to a CalHEERS-connected test environment. The MAGI Emulator does not have functionality to return Soft Pause or Soft Pause Lift in the MAGI Determination. See the current functionality of MAGI Emulator in Supporting Documents.

1.2 Requests

Per ACDWL 17-35, Medi-Cal individuals must be evaluated for Non-MAGI Medi-Cal if the individual was found MAGI Medi-Cal eligible with Soft Pause during the renewal process before advancing the renewal due date.

- 1. Require the CEW to lift Soft Pause prior to running Medi-Cal EDBC with 'RE' EDBC Run Reason.
- 2. Add a new EDBC Run Reason, 'Soft Pause/Non-RE', that will allow a CEW to run Medi-Cal EDBC during the annual renewal period with an individual in Soft Pause that will not advance the renewal due date. This 'Soft Pause/Non-RE' EDBC Run Reason should only be used for exceptions when the CEW is unable to lift Soft Pause due to 10-day noticing or CalHEERS issues. For example: a 'Person Add' during renewal or to process a Negative Action for a non-Soft Pause individual while waiting for the Non-MAGI Screening Packet for the Soft Pause individual.
- 3. Update CalSAWS Batch EDBC Skip logic to skip a case with a new skip reason of 'Soft Paused' when an individual on the MAGI Determination returns as MAGI Eligible with an Eligibility Evaluation Reason of Soft Pause.
- 4. Update The Systems to generate a Non-MAGI Screening Packet when an individual is skipped through batch for Soft Pause and the MAGI Determination Run Reason code is 'Renewal batch administrative renewal' (RE).
- 5. Update CalSAWS to create a Journal entry when the Non-MAGI Screening Packet is generated through batch.
- 6. Update CalSAWS to allow the CEW to select 'RE' EDBC Run Reason to establish a new renewal period during reported changes outside the annual renewal period.
- 7. Update CalSAWS to send 'RM' EDR Run Reason during the annual renewal period.
- 8. Update The Systems to automatically set the EDBC Run Reason to either 'RE' or 'Soft Pause/Non-RE' when appropriate during the annual renewal period.
- Update the MAGI Emulator to have Soft Pause and Soft Pause Lift functionality to allow the testing of changes in The Systems which rely on specific results in a MAGI Determination without a direct connection to a CalHEERS-connected test environment.

1.3 Overview of Recommendations

- 1. Update the Run EDBC page to display 'Soft Pause/Non-RE' EDBC Run Reason and hide 'RE' EDBC Run Reason for the Medi-Cal program to prevent a CEW from advancing the renewal when an individual is Soft Paused.
- 2. Update the Negative Action Detail page to display 'Soft Pause/Non-RE' EDBC Run Reason and hide 'RE' EDBC Run Reason for the Medi-Cal program to prevent a CEW from advancing the renewal when an individual is Soft Paused.
- 3. Update Create Manual EDBC page to display 'Soft Pause/Non-RE' EDBC Run Reason.
- 4. Update the Medi-Cal EDBC Summary page to display a notification message when 'Soft Pause/Non-RE' Run Reason is auto-set during the Medi-Cal EDBC evaluation.
- 5. Add 'Soft Pause/Non-RE' EDBC Run Reason for the Medi-Cal program. Update The Systems to auto-set the EDBC Run Reason to either 'Soft Pause/Non-RE' or 'RE' when appropriate.
- Update eHIT Disposition functionality for the new EDBC Run Reason 'Soft Pause/Non-RE'. CalSAWS only: Update eHIT logic to have 'RM' EDR Run Reason functionality.
- 7. **CalSAWS only**: Add a Batch EDBC Skip Reason 'Soft Paused' that will skip a case from Batch EDBC processing when the valid DER has at least one individual with Eligibility Evaluation Reason of Soft Pause.
- 8. **CalSAWS only**: Update the Batch MAGI Renewal Sweep to exclude cases from processing through Batch MAGI if the worker has already initiated the MAGI Renewal manually (RM) from the online page.
- 9. Create a new batch job for CalSAWS and update the existing batch job for C-IV to only generate the Non-MAGI Screening packet through batch for cases which are skipped during Batch EDBC with the reason of Soft Pause. CalSAWS only: Add a journal entry when the Non-MAGI Screening packet is generated through batch.
- 10. Update the MAGI Emulator to return MAGI Determinations with Soft Pause and Soft Pause Lift. The MAGI Emulator is used for testing purposes only to emulate the results returned from CalHEERS on a MAGI Determination.
- 11. Regression test the DHCS Renewals Master Request reports for the updated manual renewal EDR run reason functionality.

1.4 Assumptions

- None of these changes apply to CMSP.
- There are no changes to the functionality that determines or updates the Medi-Cal RE period Begin and Due Date with this SCR.
- There are no changes to the functionality that updates the status of a Packet from 'Reviewed Ready to Run EDBC' to 'Complete' with this SCR.

2 RECOMMENDATIONS

2.1 Run EDBC page

2.1.1 Overview

Update the Run EDBC page to display 'Soft Pause/Non-RE' EDBC Run Reason and hide 'RE' EDBC Run Reason for the Medi-Cal program to prevent a CEW from advancing the renewal when an individual is Soft Paused.

2.1.2 Run EDBC Page Mockup

Run EDBC						
* - In	*- Indicates required fields			Run EDBC C		Cancel
Benefit Month: *						
•	Program	Status	Timely Notice Exception	Reason	Run Rea	son
	Medi-Cal	Active		Ru	Soft Pause/ TMC 176 S TMC 176 S/ TMC 176 S/	Non-RE RE Cance
This <u>T</u>	<u>ype 1</u> page took	21.80 seconds t	o load.			

Figure 2.1.2.1 – Run EDBC Page (C-IV)

Run EDBC							
* - Iı	ndicates requi	red fields		Change Reason	Run EDBC	Cancel	
Benefit Processing Range:							
Beg i 01/20	in Month: * 20 🗸		End Month: *			_	
	Program	Status	Timely Notice Exception	Reason	Run Reason		
	Medi-Cal	Active			Soft Pause/Non-RE		
				Change Reason	Run EDBC	Cancel	
This	This <u>Type 1</u> page took 0.33 seconds to load.						

Figure 2.1.2.2 – Run EDBC Page (CalSAWS)

2.1.3 Description of Changes

- 1. **CalSAWS only**: Update CalSAWS to display 'RE' EDBC Run Reason in the Run Reason drop down for the Medi-Cal program when the EDBC benefit month is on or after the current RE begin month.
- 2. Display 'Soft Pause/Non-RE' in the Run Reason drop down for the Medi-Cal program when the valid MAGI Determination for the benefit month has at least one individual on the program with Eligibility Evaluation Reason of Soft Pause. Do not display 'RE' Run Reason if 'Soft Pause/Non-RE' Run Reason is displayed.

2.1.4 Page Location

Global: Eligibility Local: Customer Information Task: Run EDBC

2.1.5 Security Updates

None

2.1.6 Page Mapping No change

2.1.7 Page Usage/Data Volume Impacts

No change

2.2 Negative Action Detail page

2.2.1 Overview

Update the Negative Action Detail page to display 'Soft Pause/Non-RE' EDBC Run Reason and hide 'RE' EDBC Run Reason for the Medi-Cal program to prevent a CEW from advancing the renewal when an individual is Soft Paused.

2.2.2 Negative Action Detail Page Mockup

Neg	Negative Action Detail					
* - In	dicates required fields			Run EDBC		
Benefit Month: *						
Medi	-Cal	Run EDBC for this program				
	Person	SSN	Date of Birth			
	Person One		01/28/1962			
	Person Two		10/26/1958			
	Person Three		08/10/2011			
Negative Action Reason:						
TMC	176 S/RE			Run EDBC		

Figure 2.2.2.1 – Negative Action Detail Page (C-IV)

Neg	ative Action D	etail				
* - In	dicates required fields			Run EDBC		
Bene	fit Month: * 9 ✓					
Medi	-Cal	Run EDBC for this program				
	Person	SSN	Date of Birth			
	Childone One		01/15/1996			
	Person One		02/10/1994			
Neg	Negative Action Reason:					
Run Soft F	Reason:					
				Run EDBC		

Figure 2.2.2.2 – Negative Action Detail Page (CalSAWS)

2.2.3 Description of Changes

- 1. **CalSAWS only**: Update CalSAWS to display 'RE' EDBC Run Reason in the Run Reason drop down for the Medi-Cal program when the EDBC benefit month is on or after the current Re-Evaluation begin month.
- 2. Display 'Soft Pause/Non-RE' in the Run Reason drop down for the Medi-Cal program when the valid MAGI Determination for the benefit month has at least one individual on the program with Eligibility

Evaluation Reason of Soft Pause. Do not display 'RE' Run Reason if 'Soft Pause/Non-RE' Run Reason is displayed.

2.2.4 Page Location

Global: Eligibility Local: Case Summary Task: Negative Action Detail

2.2.5 Security Updates

None

2.2.6 Page Mapping

No change

2.2.7 Page Usage/Data Volume Impacts

No change

2.3 Create Manual EDBC page

2.3.1 Overview

Update Create Manual EDBC page to display 'Soft Pause/Non-RE' EDBC Run Reason.

2.3.2 Create Manual EDBC Mockup



Figure 2.3.2.1 – Create Manual EDBC Page (C-IV)

Create Manual EDB	C					
*- Indicates required fields				Create M	lanual EDBC	Cancel
Benefit Month: *		Manua	I EDBC Reason:	*		
Program	Status		Run Reason			
Medi-Cal	Active		RE Soft Pause/Non-RE			
			С	reate M	anual EDBC	Cancel

Figure 2.3.2.2 – Create Manual EDBC (CalSAWS)

2.3.3 Description of Changes

1. Display 'Soft Pause/Non-RE' in the Run Reason drop down for the Medi-Cal program on Create Manual EDBC page.

2.3.4 Page Location

Global: Eligibility **Local:** Customer Information **Task:** Create Manual EDBC

2.3.5 Security Updates

None

2.3.6 Page Mapping

No change

2.3.7 Page Usage/Data Volume Impacts

No change

2.4 Medi-Cal EDBC Summary page

2.4.1 Overview

Update the Medi-Cal EDBC Summary page to display a notification message when 'Soft Pause/Non-RE' Run Reason is auto-set during the Medi-Cal EDBC evaluation.

2.4.2 Medi-Cal EDBC Summary Page Mockup

Medi-Cal EDBC Summary						
EDBC was ru	ın with Soft Pause/N	Ion-RE and RE will r	not be advanced.			
				Accept	Cancel	
Begin Month	End Month	Run Date	Run Status	Accepted By		
11/2019	11/2019	10/07/2019	Not Accepted			
EDBC Information	ı					
EDBC Run Reason	: Soft Pause/Non-RE					
Type:	Type Reaso	on:				
Read Only	Pending Elig	ible MAGI Renewal				
Recalculation:						
No						
MAGI-Only Mode:						
Yes						

Figure 2.4.2.1 – Medi-Cal EDBC Summary Page

2.4.3 Description of Changes

- Update the Medi-Cal EDBC Summary page to display a notification message, "EDBC was run with Soft Pause/Non-RE Run Reason and RE will not be advanced." when The Systems auto-sets the Run Reason to 'Soft Pause/Non-RE' during EDBC evaluation. (See section 2.5.2.3 for auto-set EDBC Run Reason criteria.)
- 2. **C-IV only**: Remove the page validation "Cancel EDBC must be run with RE Run Reason to complete the redetermination." on Medi-Cal EDBC Summary page that requires the worker to cancel the EDBC and run EDBC with 'RE' Run Reason.

2.4.4 Page Location

Global: Eligibility Local: Customer Information Task: Medi-Cal EDBC Summary

2.4.5 Security Updates

None

2.4.6 Page Mapping

No change

2.4.7 Page Usage/Data Volume Impacts

No change

2.5 Medi-Cal EDBC Rules

2.5.1 Overview

Add 'Soft Pause/Non-RE' EDBC Run Reason for the Medi-Cal program. Update The Systems to auto-set the EDBC Run Reason to either 'Soft Pause/Non-RE' or 'RE' when appropriate.

2.5.2 Description of Change

1. Add a new EDBC Run Reason 'Soft Pause/Non-RE' (CT_744) for the Medi-Cal program.

Note: EDBC will not advance the RE Due Date when run with 'Soft Pause/Non-RE' EDBC Run Reason.

2. Update The Systems to auto-set the EDBC Run Reason to 'RE' during EDBC evaluation when the following conditions are met:

A. Non-MAGI Medi-Cal only

- a. The program selected is Medi-Cal
- All active members on the Medi-Cal program have a Non-MAGI aid code (excluding TMC/CE/CMSP) in the latest 'Accepted' and 'Saved' regular EDBC that's effective for the benefit month being processed.
- c. The EDBC Run Reason is not specified by the worker or batch
- d. The benefit month is equal to:
 - i. the month following the RE Due Date or
 - ii. the come-up month
- e. The appropriate Non-MAGI Medi-Cal RE packet's submit month is for the month of the RE Due Date for the Medi-Cal program. (See Table 2.5.2.2.A)
 - i. The latest status of the MC RE Packet is 'Not Applicable' or 'Reviewed-Ready to Run EDBC'. If more than one MC RE Packet exists for the same Medi-Cal program and same submit month, the latest status of at least one MC RE Packet is 'Not Applicable' or 'Reviewed-Ready to Run EDBC'.
- f. Not an auto-test scenario

C-IV	CalSAWS
Aged, Blind, Disabled (ABD) Medi-Cal Redetermination Packet	ABD MC RE Packet

Regular Medi-Cal/ ABD RE Packet (Signature packet)	MC RE Packet	
Regular Medi-Cal Redetermination Packet	LTC MC RE Packet	
LTC RE Packet (Signature Packet)	MC 604 IPS Packet	
Long Term Care (LTC) Medi-Cal Redetermination Packet	Non-MAGI Turning 65 Packet	
Non-MAGI Turning 65 Packet	Non-MAGI Screening Packet	
Non-MAGI Screening Packet	MSP Packet	

Table 2.5.2.2.A – Appropriate Non-MAGI Medi-Cal RE Packets

B. Mixed MAGI/Non-MAGI Medi-Cal

- a. The program selected is Medi-Cal
- b. At least one active member on the Medi-Cal program has a MAGI Medi-Cal aid code and at least one active member has a Non-MAGI Medi-Cal aid code (excluding TMC/CE/CMSP) in the latest 'Accepted' and 'Saved' regular EDBC that's effective for the benefit month being processed.
- c. The EDBC Run Reason is not specified by the worker or batch
- d. The benefit month is equal to:
 - i. the month following the RE Due Date or
 - ii. the come-up month
- e. The appropriate Mixed MAGI/Non-MAGI Medi-Cal RE packet exists for the month of the RE Due Date for the program.
- f. The appropriate mixed MAGI/Non-MAGI Medi-Cal RE packet's submit month is for the month of the RE Due Date for the Medi-Cal program. (See Table 2.5.2.2.B)
 - i. The latest status of the MC RE Packet is 'Not Applicable' or 'Reviewed-Ready to Run EDBC'. If more than one MC RE Packet exists for the same Medi-Cal program and same submit month, the latest status of at least one MC RE Packet is 'Not Applicable' or 'Reviewed-Ready to Run EDBC'.
- g. The valid DER to be used by EDBC for this Medi-Cal program has 'RE' or 'RM' Run Reason and an accepted and saved regular EDBC was not run for this DER.
 - i. **CalSAWS only**: Because CalSAWS did not have functionality to send 'RM' Run Reason to CalHEERS until the release of this SCR, add an exception for CalSAWS to allow 'CO' Run Reason (in addition to 'RE' and 'RM') for four benefit months after the release of this SCR. After which, the exception to

include 'CO' will expire and the EDBC Run Reason will only be auto-set for DERs with 'RE' or 'RM' Run Reason.

- h. The valid DER for the benefit month does not contain any Soft Pause individual
- i. Not an auto-test scenario

C-IV	CalSAWS
Aged, Blind, Disabled (ABD) Medi-Cal Redetermination Packet	ABD MC RE Packet
MAGI and Non-MAGI Redetermination Packet	Mixed MC RE Packet
Regular Medi-Cal/ ABD RE Packet (Signature packet)	LTC MC RE Packet
Regular Medi-Cal Redetermination Packet	MC RE Packet
LTC Mixed Household RE Packet (Signature Packet)	MC 604 IPS Packet
LTC RE Packet (Signature Packet)	Non-MAGI Turning 65 Packet
Long Term Care (LTC) Medi-Cal Redetermination Packet	Non-MAGI Screening Packet
Non-MAGI Long Term Care (LTC) Mixed Household Redetermination packet	MSP Packet
Non-MAGI Turning 65 Packet	
Non-MAGI Screening Packet	

Table 2.5.2.2.B - Appropriate Mixed MAGI/Non-MAGI Medi-Cal RE Packets

C. MAGI Medi-Cal only

- a. The program selected is Medi-Cal
- b. All active members on the Medi-Cal program have a MAGI Medi-Cal aid code in the latest 'Accepted' and 'Saved' regular EDBC that's effective for the benefit month being processed.
- c. The EDBC Run Reason is not specified by the worker or batch
- d. The benefit month is equal to:
 - i. the month following the RE Due Date or
 - ii. the come-up month
- e. If an appropriate MAGI RE packet exists (see Table 2.5.2.2.C) with submit month equal to the month of the RE Due Date for the Medi-Cal program, the latest status of the appropriate MAGI RE Packet is 'Not Applicable' or 'Reviewed-Ready to Run EDBC'.
 - i. If more than one appropriate MAGI RE Packet exists for the same Medi-Cal program and same submit month, the latest status of at least one MAGI RE Packet is 'Not Applicable' or 'Reviewed-Ready to Run EDBC'.
- f. The valid DER to be used by EDBC for this Medi-Cal program has 'RE' or 'RM' Run Reason and an accepted and saved regular EDBC was not run for this DER.
 - CalSAWS only: Because CalSAWS did not have functionality to send 'RM' Run Reason to CalHEERS until the release of this SCR, add an exception for CalSAWS to allow 'CO' Run Reason (in addition to 'RE' and 'RM') for four benefit months after the release of this SCR. After which, the exception to include 'CO' will expire and the EDBC Run Reason will only be auto-set for DERs with 'RE' or 'RM' Run Reason.
- g. The valid DER for the benefit month does not contain any Soft Pause individual
- h. Not an auto-test scenario.

C-IV	CalSAWS
MAGI RE Packet	MAGI MC Packet

Table 2.5.2.2.C - Appropriate MAGI Medi-Cal RE Packets

Technical Note: If EDBC is run or re-run for a month prior to the RE begin month, the RE period is not re-evaluated as per the current design and is not impacted by this SCR.

- 3. Update The Systems to auto-set the EDBC Run Reason to 'Soft Pause/Non-RE' during EDBC evaluation when the following conditions are met:
 - a. The program selected is Medi-Cal
 - b. The EDBC Run Reason is not specified by the worker or batch
 - c. The benefit month is equal to:
 - i. the month following the RE Due Date or
 - ii. the come-up month
 - d. The valid DER to be used by EDBC for this Medi-Cal program has 'RE' or 'RM' Run Reason and an accepted and saved regular EDBC was not run for this DER.
 - CalSAWS only: Because CalSAWS did not have functionality to send 'RM' Run Reason to CalHEERS until the release of this SCR, add an exception for CalSAWS to allow 'CO' Run Reason (in addition to 'RE' and 'RM') for four benefit months after the release of this SCR. After which, the exception to include 'CO' will expire and the EDBC Run Reason will only be auto-set for DERs with 'RE' or 'RM' Run Reason.
 - e. The valid DER to be used by EDBC for this Medi-Cal program contains at least one Soft Pause individual

2.5.3 Programs Impacted

Medi-Cal

2.5.4 Performance Impacts

No change

2.6 eHIT

2.6.1 Overview

Update eHIT Disposition functionality for the new EDBC Run Reason 'Soft Pause/Non-RE'. CalSAWS only: Update eHIT logic to have 'RM' EDR Run Reason functionality.

2.6.2 Description of Change

1. Update eHIT Disposition logic to not send a Disposition to CalHEERS when a regular Medi-Cal EDBC is Accepted and Saved with 'Soft Pause/Non-RE' EDBC Run Reason.

- 2. **CalSAWS only**: Update eHIT logic to send 'Renewal manual renewal' (RM) EDR Run Reason to CalHEERS beginning with the EDR Benefit Month two months prior to the RE Due Date and beyond.
- 3. **CalSAWS only**: Update eHIT Auto-Disposition logic to not send a Disposition to CalHEERS when the DER has 'RM' Run Reason and all individuals on the DER are MAGI Pending.

Note: The current eHIT Disposition logic will send a Disposition for every DER with the same benefit month as Medi-Cal EDBC when EDBC is run with 'RE' EDBC Run Reason. This functionality will not change.

2.6.3 Interface Partner

CalHEERS

2.7 Batch EDBC (CalSAWS only)

2.7.1 Overview

Add a Batch EDBC Skip Reason 'Soft Paused' that will skip a case from Batch EDBC processing when the valid DER has at least one individual with Eligibility Evaluation Reason of Soft Pause.

2.7.2 Description of Change

- 1. Add a new Batch EDBC Skip reason of "Soft Paused" to the 'Not Processed Reason Codes' category (CT_707).
- 2. Update Batch EDBC Skip logic to skip a case with a new skip reason 'Soft Paused' when all the following are true:
 - a. The program is Medi-Cal.
 - b. The valid DER used by EDBC has at least one individual with Eligibility Evaluation Reason of Soft Pause.

2.7.3 Execution Frequency

No change

2.7.4 Key Scheduling Dependencies

No change

2.7.5 Counties Impacted

CalSAWS counties

2.7.6 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.)

2.8 Batch MAGI Renewal Sweep (CalSAWS only)

2.8.1 Overview

Update the Batch MAGI Renewal Sweep to exclude cases from processing through Batch MAGI if the worker has already initiated the MAGI Renewal manually (RM) from the online page.

2.8.2 Description of Change

- 1. Update Batch MAGI Renewal Sweep (PB00CH203) to exclude cases from processing through Batch MAGI when it meets the following criteria:
 - a. There is a DER for this Medi-Cal program with 'RM' Run Reason for the same benefit month to be processed by Batch MAGI.

2.8.3 Execution Frequency

No change

2.8.4 Key Scheduling Dependencies

No change

2.8.5 Counties Impacted

CalSAWS counties

2.8.6 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.)

2.9 Generate Non-MAGI Screening Packet

2.9.1 Overview

Create a new batch job for CalSAWS and update the existing batch job for C-IV to only generate the Non-MAGI Screening packet through batch for cases which are skipped during Batch EDBC with the reason of Soft Pause. CalSAWS only: Add a journal entry when the Non-MAGI Screening packet is generated through batch.

2.9.2 Description of Change

- 1. Create a new batch job for CalSAWS and update the existing batch job for C-IV (PB00R526) to send the Non-MAGI Screening Packet when the following conditions are true:
 - a. Case is skipped from Batch EBDC due to the reason of "Soft Pause" between the last success date and batch date.

Technical Note: Record exists in BATCH_ELIG_NOT_PROC table with NOT_PROC_RSN_CODE of SP.

b. None of the following packets exist for the same effective month.

C-IV	CalSAWS
Non-MAGI Screening Packet	Non-MAGI Screening Packet
Mixed MC RE Packet	MC 604 IPS Packet
Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet

Note for CIV: The batch job currently checks if the Non-MAGI Screening Packet or Mixed MC RE Packet exist for the same effective month. With this SCR it is being updated to also check for Non-MAGI Turning 65 Packet

2. For each record returned in the driving query, insert a record into the batch transaction table to generate a Non-MAGI Screening Packet during forms processing.

Column	Value
Case ID	Case associated to the skipped EDBC record
Program ID	Medi-Cal program ID
Person ID	Primary Applicant of Active Medi-Cal
	program
Type Code	FR
Sub Type Code	NM
Eff Date	First day of the month following the batch date
	Example: If the batch is run on 05/04/2019, the effective date will be 06/01/2019
	Note for C-IV : The batch job currently populates the effective date as the first day of 2 months following the batch date. With this SCR, the effective date will be populated as first day of the month following the batch date.
	Example: If the batch is run on 05/04/2019, the current functionality populates the effective date as 07/01/2019. With this SCR, the effective date will populate as

	06/01/2019.
Created By	Batch
Updated By	Batch

3. **CalSAWS only:** Add the following custom Journal entry when the Non-MAGI Screening Packet is generated through Batch.

Journal Category: All

Journal Type: Document

Short description: Non-MAGI Screening Packet

Long description: The following forms were included for the {redeterDate} RE: Cover letter, Non-MAGI Informing Letter, MC 604 IPS, MC 007, PUB 10, DHCS 7077, DHCS 7077A, APTC/CSR Brochure, and VRC. These items are due in 30 days.

2.9.3 Variable Population

Variable population through batch will be similar to the variable population when the packet is generated from Template Repository.

2.9.4 Execution Frequency

Daily

2.9.5 Key Scheduling Dependencies

Prior to forms processing

2.9.6 Counties Impacted

CalSAWS Counties

2.9.7 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.)

2.10 MAGI Emulator

2.10.1 Overview

Update the MAGI Emulator to return MAGI Determinations with Soft Pause and Soft Pause Lift. The MAGI Emulator is used for testing purposes only to emulate the results returned from CalHEERS on a MAGI Determination.

2.10.2 Description of Change

- 1. Add Soft Pause functionality to the MAGI Emulator with the following criteria:
 - If the life event code is blank and the second digit of the SSN is a '2', then return a MAGI Determination with Eligibility Evaluation Reason of 'Soft Pause/Non-RE' for that individual (in addition to current functionality that determines the individual eligibility and aid code by last digit of the SSN).
- 2. Add Soft Pause Lift functionality to the MAGI Emulator with the following criteria:
 - If the life event code is blank and the EDR has Soft Pause Lift indicated, then return a MAGI Determination with the individual MAGI Discontinue (no aid code) with Eligibility Evaluation Reason of 'Soft Pause Lift' (regardless of the last digit of their SSN).
 - If the life event code is "Had a Baby" and the EDR has Soft Pause Lift indicated, then return a MAGI Determination with the individual MAGI Eligible to aid code T2 with Eligibility Evaluation Reason of 'Soft Pause Lift' (regardless of the last digit of their SSN).

2.11 Automated Regression Test

2.11.1 Overview

New regression test scripts will be created to verify the Soft Pause validation message on the Run EDBC and negative Action Detail pages, and the RE and Soft Pause Run Reasons on these same pages.

2.11.2 Description of Change

EDBC Validation:

Create new regression test scripts to verify that the appropriate new validation message displays in each of the following scenarios:

- 1. When attempting to run and accept regular EDBC with the 'RE' Run Reason for a benefit month in which the latest DER has one or more individuals with an Eligibility Evaluation Reason Code of Soft Pause.
- 2. When attempting to run and accept Negative Action EDBC with the 'RE' Run Reason for a benefit month in which the latest DER has one or more individuals with an Eligibility Evaluation Reason Code of Soft Pause.

Soft Pause:

Create new regression test scripts to verify that EDBC can be run, and the RE Due Month not updated in each of the following scenarios:

1. When the latest DER for the benefit month has one or more individuals with an Eligibility Evaluation Reason Code of Soft Pause, and regular EDBC is being run with the 'Soft Pause/Non-RE' run reason.

2. When the latest DER for the benefit month has one or more individuals with an Eligibility Evaluation Reason Code of Soft Pause, and Negative Action EDBC is being run with the 'Soft Pause/Non-RE' run reason.

Soft Pause Lift at RE:

Create new regression test scripts to verify that EDBC can be run, and the RE Due Month is updated in each of the following scenarios:

- 1. When the latest DER for the benefit month has one or more individuals with an Eligibility Evaluation Reason Code of 'Soft Pause Lift', and regular EDBC is being run with the 'RE' run reason.
- 2. When the latest DER for the benefit month has one or more individuals with an Eligibility Evaluation Reason Code of Soft Pause, and Negative Action EDBC is being run with the 'RE' run reason.

2.12 Regression Test Reports (CalSAWS Only)

2.12.1 Overview

The DHCS Renewals Master Request report provides counts on: Medi-Cal renewals, Medi-Cal renewals processing, and Medi-Cal continuance and discontinuance as a result of renewal processing. There are two versions of the report in the system. A form that is sent to the State directly and a version that is available to counties. The county version offers a detail sheet with person level information.

One field present on the report is the MAGI – Completed & Resulted in Continued Medi-Cal - Manual Ex-Parte which is defined as:

Manual Ex-Parte: Count those Renewals processed with worker intervention that did not require beneficiary provided information.

Current CalSAWS functionality is to send an EDR to CalHEERS with Renewal (RE) MAGI Run Reason during MAGI no-touch batch renewals. If the "RE" MAGI DER returns with a person MAGI Pending, Batch MAGI/EDBC skips the case and the worker must process the Medi-Cal Renewal manually. When the worker sends the next EDR, it is sent with the Continue (CO) MAGI Run Reason which means the corresponding DER has "CO" MAGI Run Reason.

The CalSAWS functionality will be updated to start sending Renewal - manual renewal (RM) MAGI Run Reason instead of "CO" MAGI Run Reason for MAGI manual renewals.

2.12.2 Description of Change

 Regression test the DHCS Renewals Master Request Report to ensure that the report will collect information pertaining to the MAGI – Completed & Resulted in Continued Medi-Cal – Manual Ex-Parte when an EDR is sent using the following MAGI run reason code:

Code (395)	Short Description
RM	Renewal - manual renewal

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Medi-Cal	ACWDL 17-35 Implementation of the Soft Pause Removal through the Statewide Automated Welfare System	ACWDL 17-35.pdf
2	Test	Current MAGI Emulator Behavior	MAGI Emulator Behavior_08-01-2019
3	Client Correspondence	FDD for Non-MAGI Screening Packet	FD_FRM_NonMAGI ScreeningPacket.doi

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.5.2.42	The LRS shall identify special Medi-Cal processing situations, including Sneede, Retro Medi-Cal, 1931 (b), QMB, SLMB, DDSD, Pickle, Medi-Cal bridging, and STP, and shall ensure that the necessary information is collected in order to determine eligibility for these programs.	LRS will now identify a MAGI Medi-Cal case in Soft Pause during renewal, generate a Non-MAGI Screening Packet to ensure necessary information is collected to determine eligibility.

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.	LRS will now prevent a worker from continuing MAGI Medi-Cal when an individual is in Soft Pause until all required information is collected, eligibility is determined, and share of cost is computed.

5 APPENDIX

5.1 CalHEERS functionality for Soft Pause

Adverse actions for which CalHEERS will trigger Soft Pause include:

- Moving from MAGI Medi-Cal to Advanced Premium Tax Credits/Cost Sharing Reductions/Covered California Programs (APTC/CSR/CCP)
- Moving from non-premium MAGI Medi-Cal to premium MAGI Medi-Cal
- Moving from full scope MAGI Medi-Cal to limited or restricted scope MAGI Medi-Cal
- Moving from full scope MAGI Medi-Cal to pregnancy-related Medi-Cal
- Losing eligibility for MAGI Medi-Cal, including, but not limited to, turning 65 years old, becoming eligible for Medicare before age 65, or experiencing an increase in income that renders the individual ineligible due to being over program income limits

The Soft Pause groups are comprised of individuals who meet one or more of the following criteria:

- aged 65 or older
- attesting to blindness
- attesting to being disabled
- becoming eligible for Medicare
- a parent of a child under age 21
- a caretaker relative of a child under age 21
- a child under age 21
- a pregnant woman with income over 138 percent Federal Poverty Level up to the end of the 60-day post-partum period

Calsaws

California Statewide Automated Welfare System

Design Document

CA-201742 | CIV-100845

CF 296 – CalFresh Monthly Caseload Movement Statistical Report

DOCUMENT APPROVAL HISTORY		
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CUISANIS	Reviewed By	Justin Dobbs, Ravneet Bhatia, Himanshu Jain, Akira Moriguchi, Ana Cruz, Ronald G. Quinn

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/12/2019	1.0	Initial Draft	Farhat Ulain

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1 OVERVIEW

This document describes the requirements and design changes for the 'CF 296 Report'

1.1 Current Design

The monthly CF 296 report contains data on the number of CalFresh applications received, approved, denied and withdrawn. This includes data on the number of CalFresh applications processed under expedited service (ES), processing timeframes and discontinuances due to recipients' failure to complete the application process for ongoing CalFresh benefits. Currently, line 10 of the CF 296 report PART D is not populated with the count of overdue recertifications caused by the CWD.

1.2 Requests

Update the CF 296 report to populate line 10 (Overdue recertifications (CWD caused) during the month).

1.3 Overview of Recommendations

Update the logic of the CF 296 report to populate line 10 (Overdue recertifications (CWD caused) during the month).

Update the text description of Line 3 in the automated CF 296 to comply with ACL 16-39E2.

Update the CF 296 template to adhere to cosmetic standards. (Reference the attached detailed design for report layout).

1.4 Assumptions

N/A

2 RECOMMENDATIONS

2.1 Overview

Update the logic of the CF 296 per ACL 16-39E2.

2.1.2 CF 296 Mockup - Summary

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY CALIFORNIA DEPAR								RTMEN	T OF SOCIALSE	RVICES				
												1		
CALFRESH MONTHLY CASELOAD MOVEMENT								1111.						
STATISTICAL REPORT http://www.cdss.ca.gov/dssd								sdb						
CF 296 E-MAIL COMPLETED REPORT FC								RM TO	D:					
admcf296@dss.ca.gov														
												<u> </u>		
COUNTY NAME	VERSION REPORT MONTH								REPORT YEAR					
Los Angeles		INITIAL INITIAL	REVISED		NOVEMB	ER		2019						
PART A. APPLICATIONS FOR CALFRESH													43340	
Applications received during the Online applications received during the month												2	25102	
2. Applications disposed of during the month (Sum of Items 2a through 2c).												5	47652	
a. Applications approved (Same as Item 5a/Cell 61)													<u>31511</u>	
									PACF (A)	ACF (B)		TOTAL (C)		
1) Applications approved in over 30 days (CWD caused)									<u>125</u> 836	4	<u>317</u> 13816	7	<u>442</u> 14652	
b. Applications denied (Item 2b1 plus Item 2b2)										12	3983	13	4237	
2) Applications denied for procedural reasons.										15	9833	16	10415	
3) Applications denied in over 30 days (CWD caused)									6	18	230	19	236	
c. Applications withdrawn									<u> </u>	21	<u>1393</u>	22	1489	
PART B. APPLICATIONS PROCESSED UNDER EXPEDITED SERVICE (ES)									PACF (A)	N	ACF (B)		TOTAL (C)	
3. Of the applications disposed of during the month in Item 2, applications processed under ES (Item 3a plus Item 3b)									7399	24	40247	25	47646	
a. Found entitled to ES (Sum of items 3a1 through 3a3)									959	21	10933	28 24	11792	
1) Benefits issued in 1-3 days									82	33	855	34	937	
3) Benefits issued in over 7 days								35	163	36	1164	37	1327	
b. Found not entitled to ES.									6235	39	27295	40	33590	
PART C. CERTIFIED CASELOAD MOVEMENT									PACF (A)	N	IACF (B)		TOTAL (C)	
4. Cases brought forward at the beginning	ng of the mo	nth						41	175016	42	458895	43	633911	
a. Item 8 from last month's report, as	reported to	CDSS						44	176196	45	475149	46	651345	
b. Adjustment (Item 4 minus Item 4a,	positive or	legative number,	explain in the	Item 4b Adju	istment Expla	natio	on)	47	-1180	48	-16254	49	-17434	
5. Cases added during the month (sum d	fitems 5a ti	PACE	e or negative r	number)	NAC)F			9212	1	37095	~	46307	
	Federal	Fed/State	State	Federal	Fed/State	<u> </u>	State	-						
a. Applications approved	53 <u>6625</u>	54 44 9	is <u>9</u>	⁵⁶ 24506	57 153	58	174	59	6678	60	24833	61	31511	
b. Change in assistance status from PACF or NACF								62	254	63	-254	64	Q	
c. Inter-County Transfers								65	78	66	285	67	<u>363</u>	
d. Cases with eligibility reinstated and benefits pro-rated during month								68	403	69	<u>4284</u>	70	<u>4687</u>	
e. Other approvals									1799	72	<u>7947</u>	73	9746	
6. Total cases open during the month (Certified eligible to participate during the month)								74	104000	75	405000	76	600010	
a Pure federal cases	ougnioc (77	181735	78	495990	79	670492	
1) Federal persons in Item 6a cases		Federa	Persons	State	Persons	1			101/00	-	100707		0/0/02	
plus federal persons in Item 6b ca	ses	80 11	83278	Singles	Families									
b. Federal/State combined cases		*1 660			⁸² 8807			2137	84	4607	\$5	6744		
C. Pure state cases 86 3404 87 446								91	356	92	2626	90	2982	
 a. Households discontinued due to re 	cipient failu	re to complete a	polication proc	ess for oneo	ing benefits (F	S onl	v)	94	0	95	0	96	0	
8. Cases brought forward at the end of th	he month (It	em 6 minus Item	7)					97	180997	98	475099	99	656096	
PART D. RECERTIFICATIONS														
9. Recertifications disposed of during th	e month (Ite	m 9a plus Item 9i	b)					100	3575	101	14288	102	17863	
		PACF NACF												
	Federal	Fed/State	State	Federal	Fed/State		State			1			17744	
a. Determined continuing	103 <u>3420</u>	104 136		106 13869	107 <u>Z3U</u>	108	58	109	3557	110	14157	111	1//14	
b. Determined ineligible	¹¹² <u>I</u>		14 <u>U</u>	" 129	116 1	nr.	<u>u</u>	118	10	119	0	120	<u>691</u>	
10. Overdue recertifications (UWD caused) during the month										.23	<u>u</u>		<u>u</u>	
Item 4b Adjustment Explanation (If Item	4b is not ze	o, this box must	be completed.	If Item 4b is:	zero, this box	must	be blank.)							
General Comments														
Revised Report Explanation (If Revised is checked, this box must be completed, If Initial is checked, this box must be blank.)														
	- sheened, t													
CONTACT PERSON		TELEPHONE			EXTENSION			FAX						
HTLE/CLASSIFICATION E-MAIL								DA	TESUBMITT	ED				

Figure 2.1.2-1 – CF 296 - Summary Worksheet

2.1.3 Description of Change

- 1. Update logic to populate Line 10 (Overdue recertifications (CWD caused) during the month) on the CF 296 report. A case will be counted in line 10 when all of following conditions are met:
 - The recertification packet was received timely. A recertification is considered timely if it has a received date on or before the 15th of the due month.
 - The CalFresh program recertification was processed after the due month.
 - The RE Packet does not have a status of Incomplete after initially received during the due month.

Example: Case A has a RE due date of 03/31/2020. The RE packet for March was mailed to the household on 2/15/2020 (45 days prior the RE due date). At this point, the Customer Report status is "Sent". On 3/3/2020, the application for recertification is received and the county updates the Customer Report status to "Received". On 3/5/2020, the application is reviewed for the upcoming scheduled interview and the worker determines that there are missing verifications. On 3/6/2020 the interview is conducted, and the missing verifications are listed on the CW 2200 and provided to the household with a due date of 3/13/2020 to provide the verifications. The RE packet status is now updated to "Incomplete". The household provides all missing verifications on 3/13/2020. The CWD processed the RE on 4/4/2020. The CF 296 report for the April report month will include the RE on Line 9 as a recertification disposed during the month but not reported on line 10 as the overdue recertification was Client caused (NOT CWD caused), due to the determination of the RE packet being incomplete for missing verifications after it is received.

Note: The Line 10 population is a subset of the Line 9 population.

- 2. Update the description of Line 3 in the CF 296 Summary worksheet to be "Of the applications disposed of during the month in Item 2, applications processed under ES (Item 3a plus Item 3b).
- 3. Update the CF 296 report template to adhere to the report's cosmetic standards. (Please reference Supporting Documents section (Number 3) for example report mock ups.

2.1.4 Report Location

- Global Navigation: Reports
- Local Navigation: Scheduled
- Task Navigation: State
2.1.5 Counties Impacted

All counties are impacted.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	State	CF 296 - CIV	CF296FS11-01-2019. xls
2	State	CF 296 - LRS	CF296FS11-01-2019. xlsx
3	State	ACL CF 296 19-10	ACL CF 296 19-10.pdf
4	State	Delayed Processing Example Scenarios	DelayedProcessingE xampleScenarios.pd

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXTS	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.	Modifying the field label and extracting the data from one field to another.



California Statewide Automated Welfare System

Design Document

CA-208265 | CIV-104042 Home Visiting Program

	DOCUMENT APPROVAL HISTORY		
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1 OVERVIEW

This SCR provides the changes necessary to collect data for the Home Visiting Program (HVP). The HVP data will be facilitated through the new Home Visiting Program List and Detail page for both the LRS and C-IV systems.

1.1 Current Design

The system currently has no online pages to track HVP data.

1.2 Requests

The HVP component data cannot be tracked and managed. Provide online pages for HVP data tracking and management.

1.3 Overview of Recommendations

A new page flow will be created which will allow a worker to enter information for the HVP component of the case. This will include associated HVP case persons and additional information to track the program.

1.4 Assumptions

- 1. A HVP record with no end date is considered high dated.
- 2. Select calendar icons will be added to date fields when editable in Create/Edit Mode. When selected, will be defaulted to current date and not be limited to any particular date.
- 3. Fields not mentioned in the Description of Changes sections, will not be updated.
- 4. The CW 2224 will be added in English and Spanish only. Threshold language versions will be added in a future effort .
- 5. Home Visiting Records that are created are initially set as visible.

2 RECOMMENDATIONS

2.1 Home Visiting List

2.1.1 Overview

Add the Home Visiting List page to the C-IV and LRS Systems. The Home Visiting List page displays a list of records that have been created through the Home Visiting Detail page and provides access to that page.

2.1.2 Home Visiting List



Figure 2.1.1 – Home Visiting List

2.1.3 Description of Changes

- 1) Display by Name This drop-down will contain an 'All' option, initially selected and case member names for all case persons that are not marked as hidden or duplicate. Name format will be as follows: [Last], [First] [Age][Gender].
- 2) From HVP records with an Offer Date equal to or after this date will be returned in the search results. Also, HVP Detail records with an Accepted Offer set to 'Yes' and an End Date equal to or after this date will be returned in the search results.
- 3) To HVP records with an Offer Date equal to or before this date will be returned in the search results. Also, HVP Detail records with an Accepted Offer set to 'Yes' and a Begin Date equal to or before this date are returned in the search results.
- 4) View button Executes a search for HVP records matching the specified filter criteria. If no filters are specified, it will pull back all HVP records. If a filter is blank, the filter will be ignored when returning the results.

- 5) Add button This button will lead the user to the Home Visiting Detail page in Create mode. This button will only be viewable by users with the security right of 'HomeVisitingDetailEdit'.
- 6) Search Results Summary Section This will be displayed when there is at least one record found. The results will be paginated with 25 results per page.
- 7) Check box The check box will be used to mark records to be removed. The Check box will only be visible when the user has the 'HomeVisitingListRemove' security right.
- 8) Offer Date The date that the client was offered HVP. This will be in 'mm/dd/yyyy' format. The Offer Date will be hyperlinked if the user has the 'HomeVisitingDetailView' security right. This hyperlink will lead to the Home Visiting Detail page for the record in View mode. This will be the primary default sorting, order by date descending. This will be sortable in chronological order. Only records that are marked as visible will be displayed on this page.
- 9) Name The name(s) of the participant(s) of the HVP record. This will be displayed in alphabetical order for the record by Last Name and then First name in ascending order. Name Format should be as follows: [Last], [First] [Age][Gender]. This will be sortable in alphabetical order.

Note: The column value is considered one value, so the first name displayed will be used to sort the records, then the subsequent names.

- 10) Accepted Offer Whether the client accepted the offer of HVP services. This will be sortable in alphabetical order.
- 11) Begin Date The Begin Date for the HVP record. This will be sortable in chronological order and will be in 'mm/dd/yyyy' format.
- 12) End Date The End Date for the HVP record. This will be sortable in chronological order and will be in 'mm/dd/yyyy' format. The default search results when the page is navigated to from the Task Nav Item will display HVP records that have an end date set to high date.
- 13) Edit Button This button will lead to the Home Visiting Detail page in Edit mode for the record. The security right of 'HomeVisitingDetailEdit' is required to view this button.
- 14) Remove button This button will remove all the records that have marked check boxes from the system. These records will become no longer visible. This button

will only display if there are existing HVP records with check boxes. The security right of 'HomeVisitingListRemove' is required to view this button.

- a. When a record is removed, create a Journal entry to document the removal.
 - i. Journal Category: Eligibility
 - ii. Journal Type: Narrative
 - iii. Short Description: Home Visiting List Removed
 - iv. Long Description:

Home Visiting List data was removed for <Worker Name>.

Date Offered: <Date Offered>

Accepted Offer: <Accepted Offer>

Begin Date: <Begin Date>

End Date: <End Date>

Name: <Name>

Date of First Home Visit: <Date of First Home Visit>

Note: Name and Date of First Home Visit may have multiple records depending on the amount of people present on the Home Visiting Detail record. The Name will be followed by that person's Date of First Home Visit if it is populated. Subsequent people will add additional Name and Date of First Home Visit rows below the first person's set. Fields with no value entered will be blank.

2.1.4 Page Location

- Global- Eligibility
- Local- Case Summary
- **Task-** Home Visiting (Directly Above Legacy Case) ('HomeVisitingListView' is required to see this task nav item)

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
HomeVisitingListView	The ability to navigate to the Home Visiting List	Home Visiting List View

Security Right	Right Description	Right to Group Mapping
HomeVisitingListRemove	Remove ability on the Home Visiting List	Home Visiting List Remove
HomeVisitingDetailView	The ability to navigate to the Home Visiting Detail page in View Mode	Home Visiting Detail View, Home Visit Detail Edit
HomeVisitingDetailEdit	The ability to create and edit a Home Visiting Detail record	Home Visiting Detail Edit

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Home Visiting List View	Gives the user the ability to view the Home Visiting List Page	Eligibility Staff, Eligibility Supervisor
Home Visiting List Remove	Gives the user the ability to remove a Home Visiting record from The Home Visiting List Page.	Eligibility Staff, Eligibility Supervisor
Home Visiting Detail View	Gives the user the ability to view a Home Visiting Detail record	Eligibility Staff, Eligibility Supervisor
Home Visiting Detail Edit	Gives the user the ability to create and edit a Home Visiting Detail record	Eligibility Staff, Eligibility Supervisor

2.1.6 Page Mapping

Add page mapping for Home Visiting List page.

2.1.7 Page Validation

- 1. Add a page validation to display when the View button is clicked with the To field populated by a date prior the date in the Display From field.
 - a. <u>To</u> To date must be after From date.

2.2 Home Visiting Detail

2.2.1 Overview

Add the Home Visiting Detail page to the C-IV and LRS Systems. The Home Visiting Detail page captures, displays, and manages the fields for HVP.

2.2.2 Home Visiting Detail

Home Visiting	J Detail			
*- Indicates required fields		Save and Return	Cancel	
Date Offered:* Accepted Offer: *				
Person(s)				
🗖 Name 🍀				
			Add	
Remove				
		Save and Beturn	Cancel	

Figure 2.2.1 – Home Visiting Detail page Create mode

Home Visiting Detail

*- Indicates required fi	ields	Save and Return Cancel
Date Offered:* 10/01/2020 Begin Date:* 10/02/2020	Accepted Offer: * Yes V End Date:	
Person(s)		
🔲 Name 🍀	Date of First Home Visit	
Doe, John 50M	10/05/2020	
Doe, Jane 1F	10/05/2020	
		Add
Remove		
		Save and Return Cancel

Figure 2.2.1 – Home Visiting Detail page Create mode (Accepted Offer)

Home Visiting	Detail		
*- Indicates required fields		Save and Return	Cancel
Date Offered:* Accepted Offer:* 6/15/2020 No			
Person(s)			
Name *			
Doe, John 50M			
Doe, Jane 1F			
			Add
Remove			
		Save and Return	Cancel

Figure 2.2.2 Home Visiting Detail Create mode (Declined Offer)

Home Visiting Detail

*- Indicates required f	ields	Save and Return Car	ncel
Date Offered:* 10/01/2020 Image: Compare the second	Accepted Offer: * ∑es ✓ End Date:		
Person(s)			
Name *	Date of First Home Visit		
Doe, John 50M	10/05/2020		
Doe, Jane 1F	10/05/2020		
		C C	Add
Remove			
		Save and Return Can	cel

Last Updated On 10/01/2020 9:08:43 AM By:321255

Figure 2.2.3 – Home Visiting Detail Page Edit mode (Accepted Offer)

Home Visiting	g Detail	
*- Indicates required	fields	Save and Return Cancel
Date Offered:*	Accepted Offer: *	
Person(s)		
Name *		
🗆 Doe, John 50M		
Doe, Jane 1F		
		Add
Remove		
Last Updated On 06/1	5/2020 9:08:43 AM By: <u>321255</u>	Save and Return Cancel

Figure 2.2.4 – Home Visiting Detail Page Edit mode (Declined Offer)

Home Visiting Detail

- Indicates required fields	5	Edit Close
Date offered: *	Accepted Offer: *	
10/01/2020	Yes	
Begin Date: 粩	End Date:	
10/05/2020	11/15/2020	
Person(s)		
Name 🏶	Date of First Home Visit	
Doe, John 50M	10/05/2020	
Doe, Jane 1F	10/05/2020	
		Edit Close

Figure 2.2.5 – Home Visiting Detail Page View mode

2.2.3 Description of Changes

- 1) Edit Button Clicking the Edit button reloads the page in Edit mode. The security right of 'HomeVisitingDetailEdit' is required to view this button. This button only displays in View mode.
- Close Button Clicking the Close button navigates to the Home Visiting List page, where the previous search results will display. This button only displays in View mode.
- 3) Save and Return Button Clicking the Save and Return button saves a new instance of the Home Visiting record and navigates back to the Home Visiting List page. If the page was in Edit mode, the button will still save a new record, but will also update the existing record that was viewed on the page to no longer be visible. This button only displays in Create and Edit modes.
- 4) Cancel Button Clicking the Cancel button discards any changes made to the Home Visiting record and navigates to the Home Visiting List page, where the previous search results will display. The Cancel button displays in Create and Edit modes.
- 5) Date Offered The date HVP was offered. This will be in 'mm/dd/yyyy' format. This field is only editable in Create and Edit modes. This is a required field.
- 6) Accepted Offer Whether the client accepted the offer of HVP services. This is a required field. The options for this dropdown are:
 - a. No
 - b. Yes

- 7) Begin Date The beginning date for the HVP Detail record. This field will only be available when the Accepted Offer field is set to "Yes". This will be in 'mm/dd/yyyy' format. When this field displays it is required. This field is only editable in Create and Edit modes.
- 8) End Date The end date for the HVP Detail record. This field will only be available when the Accepted Offer field is set to "Yes". This will be in 'mm/dd/yyyy' format. This field is only editable in Create and Edit modes.
- 9) Person(s) This section displays the participants for the HVP Detail record. This section will give the user the option to choose people from the case in the drop down. Primary default sorting for these records will be alphabetical order ascending.
 - a) Check box This will be used to mark person records to be removed. The select all check box will not be available when there are no check boxes to be selected. Once a person has been added to the list and the name is display only, check boxes will be available to all rows. The check boxes only display in Create and Edit modes.
 - b) Name Case person associated with the HVP Detail record. The dropdown selection will display persons who are not marked as hidden or duplicate person and not yet added to the HVP Detail record. Name format should be as follows: [Last], [First] [Age][Gender]. The drop down will only be available when the row is being added. If the row has already been added or saved, this value will be display only.
 - c) Date of First Home Visit The date of the case person's first home visit associated to each individual. This will be in 'mm/dd/yyyy' format. This field will only display when the Accepted Offer value is set to 'Yes'.
 - d) Add Button Clicking the add button will add the selected person to the current row and add an additional row containing the Name dropdown, Date of First Home Visit field and Add Button. When clicking the add button and no person is selected, no action will be taken. This button will only displays in Create and Edit modes.
 - e) Remove Button This button will not be displayed when there are no checkboxes to be selected. When the Remove Button is clicked it will remove all the people that have marked checkboxes from the HVP Detail record. When no person is selected and this button is clicked, no action will be taken. This button will only be displayed in Create and Edit modes.

10) Last Updated On – This tag is used to display the last time the record was updated. The information for the tag will be of the HVP record. This will only display in Edit and View mode.

2.2.4 Page Location

- Global- Eligibility
- Local- Case Summary
- **Task-** Home Visiting (Directly Above Legacy Case) ('HomeVisitingListView' is required to see this task nav item)

2.2.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
HomeVisitingDetailView	Home Visiting Detail	Home Visiting Detail View, Home Visit Detail Edit
HomeVisitingDetailEdit	Gives the user the ability to create and edit a Home Visiting Detail record	Home Visiting Detail Edit

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Home Visiting Detail Edit	Gives the user access to view and edit Home Visiting Detail page.	Eligibility Staff, Eligibility Supervisor
Home Visiting Detail View	Gives the user view access to the Home Visiting Detail List page.	Eligibility Staff, Eligibility Supervisor

2.2.6 Page Mapping

Add page mapping for the Home Visiting Detail page.

2.2.7 Page Validation

- 1) Add a page validation to display when the Save and Return button is clicked with the End Date field populated by a date prior to the date in the Begin Date field.
 - a. <u>Begin Date</u> Begin Date must be before or equal to the End Date.
- 2) Add a page validation to display when the HVP Detail record has an Accepted period overlapping an existing Accepted HVP detail record on the case. The record that is being compared must be visible.
 - a. <u>Begin Date</u> The Home Visiting Detail record being saved overlaps with an existing Home Visiting Detail record.
- 3) Add a page validation to display when the Save and Return button is clicked with the Date of First Home Visit field populated with a date prior to the Begin Date field.
 - a. <u>Date of First Home Visit</u> This Date must be populated with a date after or on the Begin Date.
- 4) Add a page validation to display when the Save and Return button is clicked with the Date of First Home Visit field populated with a date while no person is selected.
 - a. <u>Date of First Home Visit</u> This Date must be associated to a Name.

2.3 Correspondence: Add the CW 2224 Form

2.3.1 Overview

The CW 2224- CalWORKs Home Visiting Program (HVP) form is used to volunteer for Home Visiting Program. The newest state version(2/20) will be added to the Template Repository for LRS/CalSAWS and C-IV.

State Form: CW 2224 - CalWORKs Home Visiting Program (HVP) (2/20)
Programs: CW
Attached Forms: N/A
Forms Category- LRS/CalSAWS: Form
Forms Category- C-IV: Application
Languages: English and Spanish
(Need Spanish translation as CW 2224 - CalWORKs Home Visiting Program (HVP) (2/20)
is not available on state website)

2.3.2 Description of Change

This effort will create CW 2224- CalWORKs Home Visiting Program (HVP) (2/20) and add to the Template Repository.

2.3.2.1 Create CW 2224 Form XDP

Create a XDP for CW 2224 Form. This form will not include a Form Header and will only be available with the Print Local option. The Form will contain editable text boxes, see Mockup for location of text boxes.

Form Header: N/A, This Form will only be available to print locally. Form Title: CALWORKS HOME VISITING PROGRAM (HVP) Form Number: CW 2224 (2/20) Include NA Back 9: No. Form Mockups/Examples: See Supporting Documents #1

2.3.2.2 Add Form Variable Population for CW 2224

CW 2224 (2/20) will populate the following six fields when generated from Template Repository in the context of a case.

Variable Name	Population	Formatting	Editable	Template Repository Population	Populates with Form Generation
Case Name	Populates the Case Name. For Example, "John Doe"	Arial Font 10	Yes	Yes	N/A, only generates from Template Repository.
Case Number	Populates the Case Number. For Example, "809337372"	Arial Font 10	Yes	Yes	N/A, only generates from Template Repository.
Name of Parent or Caretaker Relative	Populates the Person Name based on the Document Parameters Person ID.	Arial Font 10	Yes	Yes	N/A, only generates from Template Repository.

Form Body Variables:

	For Example, "John Doe"				
Phone of Parent or Caretaker Relative	Populates the Person's phone number. For Example, "(555) 555-5555"	Arial Font 10	Yes	Yes	N/A, only generates from Template Repository.
Name of County Contact	Populates the Staff name based on program. For Example, "John Doe"	Arial Font 10	Yes	Yes	N/A, only generates from Template Repository.
Phone of County Contact	Populate the Worker phone number. For Example, "(555) 555- 5555"	Arial Font 10	Yes	Yes	N/A, only generates from Template Repository.

Variables Requiring Translations: N/A

2.3.2.3 Add CW 2224 Form to Template Repository

Add the CW 2224 Form to Template Repository with the following Document Parameters:

Required Document Parameters: Case Number, Customer Name, Program, Language

2.3.2.4 Add CW 2224 Form Print Options and Mailing Requirements

The following Print options will be included for the CW 2224 Form.

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprin t Local	Reprint Central
Y	Y	Y	Ν	Y	Ν

Mailing Requirements:

N/A, Local Print only

Additional Requirements:

Special Paper Stock: None Enclosures: None Electronic Signature: No Post to YBN/C4Y: Yes

2.4 Automated Regression Test

2.4.1 Overview

Create new automated regression test scripts to cover the new data entry options and page level validations on the following pages:

- Home Visiting List
- Home Visiting Detail

2.4.2 Description of Change

Create new automated scripts for each of the following scenarios:

- 1. Successfully create Home Visiting Detail records with the following data combinations:
 - a. Date Offered populated with:
 - i. A past date
 - ii. The current system date
 - iii. A future date
 - b. Accepted Offer set to 'No'
 - c. Accepted Offer set to 'Yes', with the following Begin and End dates:
 - i. Begin Date after the Date Offered, and no End Date
 - ii. Begin Date matching the Date Offered, and no End Date
 - iii. Begin Date after the Date Offered, and no End Date
 - iv. Begin Date matching the Date Offered, and a later End Date
 - v. Begin Date matching the Date Offered, and an End Date matching the Begin Date
- 2. Successfully edit and remove Home Visiting Detail records.
- 3. Attempt to create and save a Home Visiting Detail record meeting each of the following criteria, and verify that the appropriate validation message displays:
 - a. End Date populated with a date prior to the Begin Date
 - b. Accepted period overlapping an existing Accepted Home Visiting Detail record for the same case
 - c. Date of First Home Visit populated with a date prior to the Begin Date

d. Date of First Home Visit populated while no person is selected

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 2224 Mockup English	CW2224.docx
2	Security	Security Matrix	CA-57298 CIV-104042 Security

4 REQUIREMENTS

4.1 **Project Requirements**

REQ #	REQUIREMENT TEXT	How Requirement Met
2.20.1.16	The LRS shall include the ability to compile statistics and generate reports for all interface activities performed, including standard and ad hoc reports.	HVP information will be utilized in reporting that is interfaced to external agencies.

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
	@ 0010 C		

N/A	

5 MIGRATION IMPACTS

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

6 APPENDIX



California Statewide Automated Welfare System

Design Document

CA-208988 | CIV-104367 Housing Support Program

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DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
1/21/2020	1.0	Initial Version	Sarah Steimle

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1 OVERVIEW

This SCR provides the changes necessary to collect data for Housing Support (HSP). The HSP data will be facilitated through the new Housing Support List and Detail page for both the LRS and C-IV systems. From the Housing Support Detail page, the worker can enter data on the status and the associated dates for case members.

1.1 Current Design

The system currently has no online pages to track HSP data.

1.2 Requests

HSP component data cannot be tracked and managed. Provide online pages for HSP data tracking and management.

1.3 Overview of Recommendations

Create a new page flow to allow a worker to enter information for HSP.

1.4 Assumptions

- 1. The worker is responsible for determining the status for the HSP component.
- 2. As needs are person level data elements, they will appear on all cases associated to the person.
- 3. A HSP status with no end date is considered high date.
- 4. Select calendar icons, also known as date pickers, will be added to date fields when editable in Create/Edit Mode. When selected, will be defaulted to current date and only be limited to a minimum date of 05/01/2020.
- 5. HSP records will not be added for a date prior to the implementation month.
- 6. Fields not mentioned in the Description of Changes sections, will not be updated.
- 7. In C-IV, HSP is available for the following programs : CalWORKS, WTW . In LRS, HSP is available for the following programs: CalWORKs, WTW and REP.
- 8. Primary Applicant on WTW/REP is considered the Payee for the FS services.
- 9. The need for HSP should be created for the Program person and the Payments will be issued to the Primary Applicant/Payee on CalWORKs or WTW/REP.
- 10. Eligibility for HSP services will be determined by an Active record for the household on the Housing Support Detail page.
- 11. The 'Issuance Method' drop down will have EBT, warrant and Direct Deposit as selectable choices.
- 12. Housing Support services can be issued if the Payee /Program status meets the following criteria:
 - a. CalWORKs status is 'Active' (or)
 - b. WTW/REP program status is Active/Non-Comp./Exempt

- 13. This program is available for CalWORKs recipients who are experiencing homelessness. For HSP, CDSS defines homeless as:
 - a. Lacking a fixed or regular nighttime residence; and either
 - b. Having a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations; or
 - c. residing in a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings; or
 - d. In receipt of judgment for eviction, as ordered by the court.

2 RECOMMENDATIONS

2.1 Housing Support List

Housing Support List

2.1.1 Overview

Add the Housing Support List page to the C-IV and LRS Systems. The Housing Support List page displays a list of records for the case that have been created through the Housing Support Detail page and provides access to that page.

2.1.2 Housing Support List

Display From: To: Image: Constraint of the image: Constraintof the image: Constraint of the image: Constraint of the

Figure 2.1.1 – Housing Support List No Data Found

Housing Support List

	Display From:	To:		View
Program				
Status	Status Reason	Begin Date	End Date	Request Date
Pending		10/01/2020		10/01/2020
Denied	Family found help with another program	09/01/2020	09/30/2020	09/01/2020
Discontinued	Family no longer has CalWORKs recipient	08/01/2020	08/31/2020	07/01/2020
Active	Family's fixed nighttime residence is a shelter	07/01/2020	07/31/2020	07/01/2020
				Add Status



2.1.3 Description of Changes

- 1. Display From HSP records with an End Date equal to or after this date will be returned in the search results.
- 2. To HSP records with a Begin Date equal to or before this date are returned in the search results.
- 3. View button Executes a search for HSP records matching the specified filter criteria. If no filters are specified, it will pull back all HSP records. If a filter is blank, the filter will be ignored when returning the results.
- 4. Status Displays the status of the HSP program. This will be hyperlinked for users with a security right of 'HousingSupportListView'. When clicked on, the user will be directed to the Housing Support Detail page for the record in view mode. If there are no records for HSP, the table will display 'No Data Found'.
- 5. Status Reason Displays the reason for the status.
- 6. Begin Date– The Begin Date for the HSP record. This will be the primary default sorting, order by date descending.
- 7. End Date The End Date for the HSP record.
- 8. Request Date The date that the customer requested HSP services.
- Add Status button This button will lead the user to the Housing Support Detail page in Create mode. This button will only be viewable by users with the security right of 'HousingSupportDetailEdit'.

2.1.4 Page Location

- Global- Eligibility
- Local- Case Summary
- Task- Housing Support (Directly Above Home Visiting) ('HousingSupportListView' is required to see this task nav item)

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
HousingSupportListView	The ability to navigate to the Housing Support List	Housing Support List View
HousingSupportDetailView	The ability to navigate to the Housing Support Detail page in View Mode record	Housing Support Detail View, Housing Support Detail View
HousingSupportDetailEdit	The ability to create a Housing Support Detail record	Housing Support Detail Edit

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Housing Support List View	Gives the user the ability to view the Housing Support List Page	Eligibility Staff, Eligibility Supervisor
Housing Support Detail View	Gives the user the ability to view a Housing Support Detail record	Eligibility Staff, Eligibility Supervisor
Housing Support Detail Edit	Gives the user the ability to create a Housing Support Detail record	Eligibility Staff, Eligibility Supervisor

2.1.6 Page Mapping

Add page mapping for Housing Support List page.

2.1.7 Page Validation

Add a page validation to display when the View button is clicked with the To field populated by a date prior to the date in the Display From field.

a. <u>To</u> – To date must be on or after From date.

2.2 Housing Support Detail

2.2.1 Overview

Add the Housing Support Detail page to the C-IV and LRS Systems. The Housing Support Detail page captures, displays, and manages the fields for Housing Support.

2.2.2 Housing Support Detail

Housing Support Detail

*- Indicates required fields		Save and Return	Cancel
Status: * - Select - Begin Date: *	End Date:		
		Save and Return	Cancel

Figure 2.2.1 - Housing Support Detail Page Create Mode

Housing Support Detail

*- Indicates required fields		Save and Return	Cancel
Status: *			
Begin Date: *	End Date:		
07/01/2020			
07/01/2020			
		Save and Return	Cancel

Figure 2.2.2 - Housing Support Detail Page Create Mode (Pending)

Housing Support Detail

*- Indicates required fields		Save and Return	Cancel
Status: *	Status Reason: *		
Begin Date: *	End Date:	•	
07/01/2020			
07/01/2020 ✓			
		Save and Return	Cancel



Housing Support Detail

*- Indicates required fields		Save and Return	Cancel
Status: * Discontinued V Begin Date: *	Status Reason: * Family no longer has CalWORKs recipient End Date:	V	
08/01/2020			
		Save and Return	Cancel

Figure 2.2.4 - Housing Support Detail Page Create Mode (Discontinued)

Housing Support Detail

*- Indicates required fields		Save and Return	Cancel
Status: *	Status Reason: * Family found help with another program	~	
Begin Date: *	End Date:		
09/01/2020 V			
		Save and Return	Cancel

Figure 2.2.5 - Housing Support Detail Page Create Mode (Denied)

Housing Support Detail

*- Indicates required fields		Close
Status: * Discontinued	Status Reason: * Family no longer has CalWORKs recipient	
Begin Date: * 08/01/2020	End Date: 08/31/2020	
Request Date: * 07/01/2020		

Close

Close

Last Updated On 08/01/2020 10:24:57 AM By: 987654

Figure 2.2.6 - Housing Support Detail Page View Mode

Housing Support Detail

*- Indicates required fie	elds				Close
Status: * Status Reason: * Active Family's fixed nighttime residence is a shelter			shelter		
Begin Date: * 07/01/2020		End Date: 07/31/2020			
Request Date: * 07/01/2020					
Needs					
Name	Begin Date	Status	Catgeory	Туре	
Doe, John 50M	07/05/2020	Met	Housing Support	Mental Health	1

Last Updated On 07/01/2020 10:24:57 AM By: <u>987654</u>

Figure 2.2.7 - Housing Support Detail Page View Mode with Needs

This is the reco	rd you have added or upda	ited:		
Status	Status Reason	Begin Date	End Date	
Discontinued	Family housing has stabilized	01/28/2020		
The system will	make corrections to your	additions/update	s:	
The system will	adjust the effective dates	of this record:		
Status	Status Reason	Begin Date	End Date	
Active	Family's fixed nighttime residence is	01/01/2020	01/27/2020	
	a shelter			
Click Save to co	ntinue or Cancel to undo t	his action.	Save	Cancel

Figure 2.2.8 Housing Support Effective Dating Confirmation List

2.2.3 Description of Changes

Effective Dating Confirmation List

- 1) Close Button Clicking the Close button navigates to the Housing Support List page, where the previous search results will display. This button only displays in View mode.
- 2) Save and Return Button Clicking the Save and Return button saves any changes made to Housing Support record and navigates back to the Housing Support List page. This button only displays in Create mode.
 - a) The Effective Dating Confirmation List page will display after pressing the Save and Return button when an existing record is being altered. Records affected by the effective dating will be saved in the database for historical reporting. The information available on the Effective Dating Confirmation List page will be as follows:
 - i) Status
 - ii) Status Reason
 - iii) Begin Date
 - iv) End Date

Note: The functionality of the Effective Dating Confirmation List page is to adjust the date of an existing record in order to support the addition/modification of the new/updated record. This page will show the details about affected records and will allow the worker to Cancel the update if there is a concern regarding the adjustment.

Records created will utilize continuous effective dating to ensure there are no gaps in the status.

Additionally, If a record is updated and the Effective Dating Confirmation List page is not used due to no overlapping records, the historical information will still be saved in the database for historical reporting.
- 3) Cancel Button Clicking the Cancel button discards any changes made to the Housing Support record and navigates to the Housing Support List page, where the previous search results will display. The Cancel button displays in Create mode.
- 4) Status Displays the Status outcome for the customer. This is a required field. This field is only editable in Create mode. The possible values of this field are:
 - a) Active
 - b) Denied
 - c) Discontinued
 - d) Pending
- 5) Status Reason The reason for the Status outcome. The options for this field will be dynamic based on the Status field. This field will display when the Status is populated with one of the following: 'Active', 'Discontinued', or 'Denied'. When this field displays it is a required field. This field is only editable in create mode. The options for this field when the Status is 'Active' are:
 - a) Family's fixed nighttime residence is a shelter
 - b) Family's fixed nighttime residence is not a regular sleeping accommodation
 - c) Family is in receipt of judgement for eviction

The options for this field when the status is 'Denied' are:

- a) Family does not have CalWORKs recipient
- b) Family is not in an eligible residence situation
- c) HSP funding is not available
- d) Other denials including withdrawals
- e) Family does not meet additional county plan
- f) Family Self-resolved
- g) Family found help with another program
- h) Family was unreachable

The options for this field when the status is 'Discontinued' are:

- a) Family entered another housing program
- b) Family no longer has CalWORKs recipient
- c) Family has other reason for exiting
- d) Family is no longer eligible per county requirements
- e) Family moved out of the county
- f) Family whereabouts are unknown/unreachable
- g) Family housing has stabilized

Note: The order for the Status Reasons will be as they are displayed in the list.

- 6) Begin Date The date of receipt of services for the HSP Detail record. This will be in 'mm/dd/yyyy' format. This is a required field. This field is only editable in Create mode. The date picker will have a minimum date of 05/01/2020.
- 7) End Date The date that services end for the HSP Detail record. This will be in 'mm/dd/yyyy' format. This field is only editable in Create mode. The date picker will have a minimum date of 05/01/2020.

8) Request Date – The date that the customer requested HSP services. This will be in 'mm/dd/yyyy' format. This is a required field. This field is only editable in Create mode. This field will dynamically display when the Status is set to 'Pending', 'Active', 'Discontinued', or 'Denied'. When the Status is 'Pending', the user will be able to enter a date to signify a new request. When the Status is 'Active', 'Discontinued', or 'Denied'. When the Status is 'Active', 'Discontinued', or 'Denied'. The user will select a date from a drop down containing all of the Request Dates that are associated to a Status. The date picker will have a minimum date of 05/01/2020.

Note: The date picker is only available when the Request Date is an input field instead of a dropdown.

- 9) Needs This section will display needs for the case that are 'Met' or 'Indicated' which have a Begin Date of the HSP need between the HSP Detail Begin Date and End Date. Primary sort order for these records will be the begin date descending. This section will only display in View mode for records where there is a HSP need with a Begin Date between the Begin Date and End Date of the HSP record. An HSP Need is a Need with a Category of 'Housing Support Program (HSP)'.
 - a) Name The participant who has the Need. The Name will be hyperlinked if the user has the security right of 'NeedDetailView'. This hyperlink will lead to the Need Detail page in View mode. Name Format will be as follows: [Last], [First] [Age][Gender].
 - Begin Date The begin date of the Need for the participant. This will be in 'mm/dd/yyyy' format.
 - c) Status Displays the current status of the need.
 - d) Category Displays the category of the need.
 - e) Type Displays the type of the need.
- Last Updated On This tag is used to display the last time the record was updated. The information for the tag will be of the HSP record. This will only display in View mode.

2.2.3 Page Location

- Global- Eligibility
- Local- Case Summary
- Task- Housing Support (Directly Above Home Visiting) ('HousingSupportListView' is required to see this task nav item)

2.2.4 Security Updates

2. Security Rights

, .		
Security Right	Right Description	Right to Group Mapping
	40	

HousingSupportDetailView	The ability to navigate to the Housing Support Detail page in View Mode record	Housing Support Detail View, Housing Support Detail View
HousingSupportDetailEdit	The ability to create a Housing Support Detail record	Housing Support Detail Edit

3. Security Groups

Security Group	Group Description	Group to Role Mapping
Housing Support Detail View	Gives the user the ability to view a Housing Support Detail record	Eligibility Staff, Eligibility Supervisor
Housing Support Detail Edit	Gives the user the ability to create a Housing Support Detail record	Eligibility Staff, Eligibility Supervisor

2.2.5 Page Mapping

Add page mapping for Housing Support Detail page.

2.2.6 Page Validation

- Add a page validation to display when the Save and Return button is clicked with the End Date field populated by a date prior to the date in the Begin Date field.
 - a) <u>Begin Date</u> Begin Date must be before End Date.
- 2) Add a page validation to display when the Save and Return button is clicked with the Begin Date field populated by a date prior to the date of May 1, 2020.

a) <u>Begin Date</u> – Begin Date must be on or after 05/01/2020.

- Add a page validation to display when the Save and Return button is clicked with the Request Date field populated by a date prior date of May 1, 2020.
 a) Request Date Request Date must be on or after 05/01/2020.
- 4) Add a page validation to display when the Save and Return button is clicked while the Status of the record is not 'Active' and the Begin Date field value of the record overlaps an existing record with an 'Active' Status and a HSP Need with a Begin Date after the Begin Date of the record being added.

- a) <u>Begin Date</u> A Need for the Housing Support program exists during this time and must be tied to an Active Status.
- 5) Status Add a page validation to display when the Save and Return button is clicked while the Status is set to 'Pending' or 'Active' and the CalWORKs program is in a Status other than 'Active' during the period between the HSP Begin Date and End Date.
 - a) <u>Status</u> The CalWORKs program must be Active to set the Housing Support Program to Pending or Active.
- 6) Request Date Add a page validation to display when the Save and Return button is clicked and the Request Date field is populated by a date after the Begin Date field.
 - a) <u>Request Date</u> Request Date must be on or before the Begin Date.
- 7) Request Date Add a page validation to display when the Save and Return button is clicked while the Status is 'Pending' and the Request Date is already associated to another Status.
 - a) <u>Request Date</u> This date is currently associated to an existing Status.
- 8) Request Date Add a page validation to display when the Save and Return button is clicked and the Request Date for the record is a date more than three months prior to the system date.
 - a) <u>Request Date</u> This date cannot be more than three months in the past.

2.3 Need Detail

2.3.1 Overview

a. The Need Detail page allows user to view the needs associated to the person receiving Housing Support service payments. The need person should have an Active record on the Housing Support detail page for HSP needs to be issued.

2.3.2 Need Detail

 *- Indicates required fields 		Close
Name: *		
Alma Aguilar		
Category: *	Type: <mark>*</mark>	
Housing Support program (HSP)	Security Deposits	
Begin Date: *	End Date: *	
12/16/2019	12/16/2019	
Description:		
Status: *	Status Reason: *	
Met	Service Arrangement Created	

Figure 2.3.1– Need Detail (View Only)

2.3.3 Description of Change

This section describes the updates to the Need Detail page when the Need category of 'Housing Support Program (HSP)' is selected.

- 1. If the user navigates from Housing Support Detail page, the Need Detail page will be displayed in a 'View Only" mode "Edit" button will not be displayed.
- The "Close" button will be the only button displayed on the Need Detail page when navigating from the Housing Support detail page. Clicking on this 'Close' Button will navigate the user back to the Housing Support Detail page if the page was initially navigated to from the Housing Support Detail page.

2.3.4 Page Location

- Global: Eligibility / Employment Services
- Local: Customer Information/Supportive Services
- Task: Needs

2.3.5 Page Usage/Data Volume Impacts

Approximately 2000 records are estimated to be created monthly for Housing Support by all CalSAWS counties from this page. Please note that this is an approximation and this number may vary.

2.4 Service Arrangement Detail

2.4.1 Overview

The Service Arrangement Detail page allows users to create a service arrangement for a requested supportive service need. This section will describe the changes to allow service arrangements to be created for HSP needs.

2.4.2 Description of Changes

2.4.3 Page Location

- Global: Eligibility / Employment Services
- Local: Customer Information/Supportive Services
- Task: Service Arrangements

2.4.4 Page Validation

- Add a page validation when a Need category of Housing Support Program is selected on the Service Arrangement Detail page and there is no record in "Active" status for the case on the Housing Support Detail page for at least one day during the Arrangement period.
 - a. <u>From</u> No Active Housing Support record found for the case on Housing Support Detail page. Cannot create a Service Arrangement.

2.5 Automated Regression Test

2.5.1 Overview

 Create new automated regression test scripts to cover the new data entry options and page level validations on the following pages:

 a) Housing Support List

- b) Housing Support Detail
- c) Need Detail
- d) Service Arrangement Detail

2.5.2 Description of Change

Create new automated scripts for each of the following scenarios:

- 1) Successfully create Housing Support Detail records with the following data combinations:
 - i. Status is Pending, with no End Date
 - ii. Status is Pending, with an End Date
 - iii. Status is Active, with a Begin Date matching the Request Date, and no End Date
 - iv. Status is Active, with a Begin Date prior to the Request Date, and an End Date later than the Request Date
 - v. Status is Denied
 - vi. Status is Discontinued
- 2) Successfully edit and remove Housing Support Detail records.
- 3) Attempt to create and save a Housing Support Detail record meeting each of the following criteria, and verify that the appropriate validation message displays:
 - i. Begin Date equal to or after the End Date
 - ii. Begin Date prior to May 1, 2020
 - iii. Begin Date with a Status of Pending, which overlaps an existing records with a Status of Active and an HSP Need
 - iv. Status is Pending or Active and no CalWORKs program exists on the same case
 - v. Status is Pending and CalWORKs is Pending, Denied, or Discontinued for the date range
 - vi. Status is Active and CalWORKs is Pending, Denied, or Discontinued for the date range
 - vii. Request Date is after the Begin Date
 - viii. Status is Pending, Request Date matches the Request Date of another record
 - ix. Request date is more than three months in the past
- 4) Successfully create a Need and associated Service Arrangement record with a Need Category of Housing Support Program (HSP).

3 SUPPORTING DOCUMENTS

Number Functional Description Area Attachment

1	Security	Security Matrix	CA-208988 CIV-104367 HSP Sect

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.20.1.16	The LRS shall include the ability to compile statistics and generate reports for all interface activities performed, including standard and ad hoc reports.	HS information will be utilized in reporting that is interfaced to external agencies.

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
	N/A		

5 MIGRATION IMPACTS

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

APPENDIX

Calsaws

California Statewide Automated Welfare System

Design Document

CA-210307 | CIV-104986 Deactivating Pre-ACA Aid Codes

	DOCUMENT APPROVAL HISTORY		
CalSAWS Prepared By		Antony Lerner	
	Reviewed By	Renee Gustafson, Maksim Volf, William Baretsky	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/01/2019	1.0	Initial version	Antony Lerner
01/07/2020	1.1	Updated version after CRPC for aid code 55.	Antony Lerner
01/08/2020	1.2	Reformatted and edited	Renee Gustafson
01/10/2020	1.3	Design Modified	Antony Lerner

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1 OVERVIEW

The purpose of this document is to implement all necessary changes to The Systems to prevent new enrollment of beneficiaries into any of the obsolete Pre-Affordable Care Act (ACA) aid codes as outlined by DHCS in MEDIL 19-13.

1.1 Current Design

The Systems Medi-Cal EDBC rules no longer grant the obsolete Pre-ACA aid codes in MEDIL 19-13 except for aid code 55 to Long Term Care (LTC) - Medically Indigent Adult (MIA) age 21-65.

The following obsolete Pre-ACA aid codes are available in the Other Program Assistance (OPA) and Manual EDBC pages:

• 3N, 3V, 44, 47, 48, 55, 69, 72, 74, 7A, 7C, 7S, 7U, 7W, 8N, 8P, 8R, 8T, H1, H2, H3, H4 and H5

The following obsolete Pre-ACA aid codes are available in EDBC Override page:

• 55, 7S, 7U, 7W

Note: Pre-ACA aid codes 58 and 5F mentioned in MEDIL 19-13 are deactivated in The Systems.

1.2 Requests

- 1. Deactivate the obsolete Pre-ACA aid codes in The Systems so they are no longer granted in Medi-Cal EDBC rules and no longer available for OPA, Manual EDBC or EDBC Override.
- 2. Create a one-time list for county follow-up of individuals active in the deactivated Pre-ACA aid codes.

1.3 Overview of Recommendations

- 1. Deactivate the obsolete Pre-ACA aid codes.
- 2. Create a one-time list for county follow-up of individuals active in the deactivated Pre-ACA aid codes.

1.4 Assumptions

County Workers will reevaluate all beneficiaries currently active in the Pre-ACA aid codes. No automated batch process will transition the existing beneficiaries.

2 RECOMMENDATIONS

2.1 Eligibility Rules Updates

2.1.1 Overview

Deactivate the obsolete Pre-ACA aid codes and create a one-time list for county follow-up of individuals active in the deactivated Pre-ACA aid codes.

2.1.2 Description of Changes

- Update The Systems Medi-Cal EDBC rules to no longer grant the obsolete Pre-ACA aid code 55 LTC - Medically Indigent Adult (MIA) (age 21 - 65) effective the EDBC benefit month that follows SCR implementation.
- 2. Deactivate the following obsolete Pre-ACA aid codes from OPA and Manual EDBC pages effective the EDBC benefit month that follows SCR implementation:
 - 3N, 3V, 44, 47, 48, 55, 69, 72, 74, 7A, 7C, 7S, 7U, 7W, 8N, 8P, 8R, 8T, H1, H2, H3, H4 and H5
- 3. Deactivate the following obsolete Pre-ACA aid codes from EDBC Override page effective the EDBC benefit month that follows SCR implementation:
 - 55, 7S, 7U, 7W
- 4. Create a one-time list for county follow-up of individuals active in the deactivated Pre-ACA aid codes. (See outreach 5.1)

2.1.3 Programs Impacted

Medi-Cal

2.1.4 Performance Impacts

No performance impacts.

2.2 Automated Regression Test

2.2.1 Overview

Create new automated scripts to verify that Medi-Cal eligibility under the obsolete aid codes:

- 1. Can be granted (via Regular EDBC Override) for the benefit month of the release.
- 2. Cannot be granted (via Regular EDBC Override) for the benefit month after the release.

2.2.2 Description of Change

Create new automated scripts to verify that Medi-Cal eligibility (1) can be granted under the obsolete aid codes in the benefit month of the release of this SCR, and (2) cannot be granted under these aid codes in the benefit month after the release of this SCR.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Eligibility	MEDIL 19-13 Contains Attachment 1 with Transition Aid Code Crosswalk	MEDIL 119-13.pdf
2	Eligibility	ACWDL 08-19 Contains Enclosure for Aid code 55 transition	ACWDL 08-19.pdf
3	Eligibility	CRPC 2052 Aid Code 55	CRPC 2052 Aid Code 55 122019.doc

4 REQUIREMENTS

4.1 **Project Requirements**

REQ #	REQUIREMENT TEXT	How Requirement Met
2.4.3.2	The LRS shall determine an applicant's/participant's eligibility for a program or programs.	Medi-Cal EDBC Rules are updated to grant appropriate aid codes per ACWDL 08-19. Obsolete Pre-ACA aid codes are removed from CalSAWS.

5 OUTREACH

5.1 Lists

Create a one-time list for county follow-up of individuals active in the deactivated Pre-ACA aid codes

List Name: Beneficiaries active in obsolete Pre-ACA aid codes

List Criteria: Active Medi-Cal program persons with high-dated EDBC and/or highdated OPA record in any of the following aid codes:

• 3N, 3V, 44, 47, 48, 55, 69, 72, 74, 7A, 7C, 7S, 7U, 7W, 8N, 8P, 8R, 8T, H1, H2, H3, H4, and H5

Standard Columns:

- Case Name
- Case Number
- County
- Unit
- Unit Name
- Office Name
- Worker

Additional Column(s): CIN, Aid Code

Frequency: One-time

County Action: Workers should follow their county business processes to transition beneficiaries into an appropriate Medi-Cal program or terminate eligibility if continued eligibility cannot be established.

The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CA-210307
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CIV-104986

6 APPENDIX

6.1 'The Systems' Definition

'The Systems' refers to both CalSAWS and C-IV systems.

For instance, if the document mentions the below:

- Update The Systems to...

That implies:

- Both CalSAWS and C-IV Systems will be updated with the same changes.

Calsaws

California Statewide Automated Welfare System

Design Document

CA-210948 | CIV-105277

Auto assign task to the MC Worker for the IEVS NHR combo (CW/CF and MC) only case

	DOCUMENT APPROVAL HISTORY		
CalSAWS	Prepared By	Howard Suksanti	
	Reviewed By	Balakumar Murthy	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/14/2019	.1	Initial Draft	Howard
			Suksanti
11/27/2019	.2	Updated the document with review	Howard
		comments	Suksanti
12/12/2019	.3	Updated the document with review	Howard
		comments	Suksanti
1/10/2020	.4	Updated the document with review	Howard
		comments	Suksanti
2/4/2020	.5	Updated the document with review	Howard
		comments	Suksanti

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1 OVERVIEW

When an Income and Eligibility Verification System (IEVS) New Hire Registry (NHR) Abstract is loaded into The System for a case that is simultaneously receiving CalWORKs (CW)/CalFresh (CF) and Medi-Cal (MC), referred to here as a "(CW/CF) and MC combo case", The System will automatically send out a SAWS 30 Form and disposition/close the NHR Abstract. The System auto dispositions/closes the Abstract since there is no further action required on the worker after the SAWS 30 Form is sent out. Per ACL 19-52, the SAWS 30 does not require a recipient response. Also, County Welfare Departments (CWDs) must not contact third-party and/or income/benefit sources to verify information obtained from the NHR match. However, there is concern that once the Abstract is closed (and not assigned to the MC worker), the MC worker will not be made aware that there may be some action required for the MC block based on the received NHR Abstract.

As part of this SCR, there will be new batch job to assign task to the current MC program assigned worker to review the case.

1.1 Current Design

There is no task created for the MC worker when The System auto-dispositions the NHR Abstract for the (CW/CF) and MC combo cases.

1.2 Requests

Add a new Task Sweep batch job to assign task to the current MC program assigned worker when an NHR Abstract for a (CW/CF) and MC combo case is loaded into The System.

1.3 Overview of Recommendations

Add a new Task Sweep batch job to create task for the current MC program assigned worker when an NHR Abstract for a (CW/CF) and MC combo case is loaded into The System.

1.4 Assumptions

- 1. The ad hoc list for the CF and MC combo case as part of CA-206520 CIV-103772 will no longer be required to be generated after the implementation of this SCR.
- 2. CalSAWS only: The new task can be generated on the following night if The System received the NHR file late in the night or the number of Abstract

received in the file is high. The new task job will not hold the Batch Operation process.

2 **RECOMMENDATIONS**

Add a new Task Sweep job to notify the worker when The System created and auto disposition/close the NHR Abstract on a (CW/CF) and MC combo case.

2.1 Add a new Task Sweep batch job to assign task when NHR Abstracts are loaded into The System for a (CW/CF) and MC combo case.

2.1.1 Overview

Create a new daily Task Sweep job to assign task to the MC worker to review the case when an NHR Abstract is close for a combo case. The System normally receives an NHR file monthly from the Medi-Cal Eligibility Data System (MEDS), however it is unknown as to the exact date on which the file will be received. Therefore, on most days the job will run and not process any records. This new job will be scheduled to run after the nightly NHR Inbound job to create tasks to the MC worker on the same night the NHR file is processed.

2.1.2 Description of Change

Add a new Task Sweep job to assign task to the current MC program worker when all the following are true.

a. The person is active with a role of member on CF program. CF program is active.

Or

The person is not active in CW program and has one of the following role in CW program (Financially Responsible - Excluded (FRE), Financially Responsible - Included (FRI), or Medi-Cal Member Only (MMO)). And CW program is active.

- b. The person is active with a role of member on MC program.
- c. The IEVS NHR Abstract was created for the person in the last 30 days from batch run date.
- d. SAWS 30 Form was generated in the last 30 days from batch run date.
- e. An NHR Abstract has been auto dispositioned/closed by batch on the same night or since the last Task Sweep job ran.

<u>Technical Note</u>: The job will also create a linkage between the task and the Abstract by inserting a record in Task_Attr table to store the IEVS Abstract ID.

<u>Task Details</u>:

CalSAWS Task Details			
Trigger Condition	Trigger when NHR Abstracts are load into The System for a (CW/CF) and MC combo case.		
Task Type	IEVS NHR combo case review		
Task Category	Case Update		
PR/RE Worklist Page Visible	No		
Task Priority	Medium		
Task Due Date	30 Calendar Days		
Task Expiration Date	90 Calendar Days		
Task Long Description	NHR Abstract/report is dispositioned/closed for a CalWORKs/CalFresh and Medi-Cal combo case. Please review.		
Office Distribution	No		
Task Initial Assignment	Current MC program assigned worker.		
Task Navigation Template	IEVS New Hire Abstract page		

C-IV Task Details	
Trigger Condition	Trigger when NHR Abstracts are load into The System for a CW/CF and MC combo case.
Automated Action Name	IEVS NHR combo case review
Automated Action Scenario	Batch has loaded NHR Abstracts on a CalWORKs/CalFresh and Medi-Cal combo case.
Automated Action Program	МС
Automated Action Source	Batch
Automated Action Run Date	Daily (Mon-Fri)
Automated Action Type	Create Task
Automated Action Due Date	Default Due Date
Task Initial Assignment	Current MC program assigned worker
Task Due Date	30 Calendar days.
Task Long Description	NHR Abstract/report is dispositioned/closed for a CalWORKs/CalFresh and Medi-Cal combo case. Please review.
Automated Action Status	Inactive
Task Type	N/A
Task Sub-Type	N/A

Task Priority	N/A
Task Expiration	N/A
Task Available Online	N/A
Task Available for Automation	N/A
Task Newly Assigned Indicator	N/A

Note: The C-IV Automated Action will be delivered with a Status of 'Inactive'. To opt-in to the functionality, Counties must update the Automated Action Status to 'Active'.

2.1.3 Execution Frequency

Daily (Mon-Fri).

2.1.4 Key Scheduling Dependencies

The new job will run after the NHR Abstract Disposition job and the IEVS NHR inbound job.

2.1.5 Counties Impacted

All Counties.

2.1.6 Data Volume/Performance

NA.

2.1.7 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...)

3 REQUIREMENTS

The SCR will create a new Task Sweep batch job to trigger task to the MC worker to review the case.

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.19.1.4	The LRS shall generate alerts, reminders, and controls that may not directly affect eligibility.	The SCR will create new Task Sweep batch job to trigger task to the MC worker to review the case.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-211066 | CIV-105302 Run Batch EDBC with 2020 FPL Values

	DOCUMENT APPROVAL HISTORY		
CalSAWS	Prepared By	Tisha Mutreja	
	Reviewed By	Prashant Goel, Maksim Volf, Appalaraju Indala, Naga Chinduluru, Geetha Ramalingam, Parul Dhawan, Stephanie Hugo, Ronak Bhatt, Ryan O'Mary	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/13/2020	1.0	Initial Draft	Tisha Mutreja
01/23/2020	1.1	Added correspondence changes	Imran Bashir
01/28/2020	1.2	Added Batch Run Dates to the Design	Tisha Mutreja
02/04/2020	1.3	Updates made based on Analysts' comments and updated Batch Operations to include Targeted Population For MC Program Only for C-IV	Tisha Mutreja
02/07/2020	1.4	Updated ACWDL #	Tisha Mutreja

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1 OVERVIEW

With minor release 20.02.19, **The System** was updated with the 2020 Federal Poverty Level (FPL) values based on ACWDL 20-03. Any 2020 Medi-Cal EDBC run prior to the update used the previous 2019 Federal Poverty Level (FPL) values. This SCR will automate re-running Medi-Cal EDBC for 2020 benefit months to update the budget to use the 2020 values per the directive in the ACWDL.

1.1 Current Design

The System recently updated the 2020 FPL values based on ACWDL 20-03 with CA-211064/CIV-105301. Any 2020 Medi-Cal EDBC run prior to the update used the 2019 FPL values per ACWDL 19-06.

LRS/CalSAWS only: Current Batch EDBC functionality allows Batch EDBC with Sub-Type Code 'PL' to automatically add a standard Journal Entry to cases processed by Batch EDBC with:

Short Description: Batch EDBC ran for [MONTH/YEAR].

Long Description: Batch EDBC ran for [MONTH/YEAR]. Batch EDBC processed for the Medi-Cal program for the following reasons: Annual FPL Limit Changes

CIV only: Current functionality puts NOAs on hold when run with a FPL COLA run reason.

1.2 Requests

- 1. Run Batch EDBC for Medi-Cal cases in accordance with ACWDL 20-03 so that the new FPL values are correctly applied. The effective date of the 2020 FPL values vary as follows:
 - Effective retroactively to January 01, 2020
 - Applicants and recipients in Medicare Savings Programs (MSP): Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), Qualified Individual 1 (QI-1) who do not receive Title II - Retirement, Survivors and Disability Insurance (RSDI) income
 - Effective retroactively to March 01, 2020
 - Applicants and recipients in MSP (QMB, SLMB, QI-1) who are receiving Title II - RSDI income
 - Effective April 01, 2020
 - Applicants in an active, Non-MAGI program not included in the groups above
 - LRS/CalSAWS only: Exclude Medi-Cal cases from Batch EDBC processing if the Medi-Cal program is assigned to a DCFS worker.
- 2. Provide lists of cases to the county when a case or individual is discontinued from Medi-Cal, a Medi-Cal EDBC is Read-Only or when a case is not processed

through Batch EDBC either from being skipped or because a MAGI Determination was requested on the case, but Medi-Cal EDBC has never been run against any MAGI Determination.

3. **CIV only:** No NOAs will be put on Hold. NOAs will be sent out via the EDBC batch after they are generated.

1.3 Overview of Recommendations

LRS/CalSAWS only: On March 06,2020, after scheduled batch completes run Batch EDBC to apply updated FPL COLA values to Medi-Cal programs. Generate lists to aid the counties after Batch EDBC completes.

C-IV only: On March 07,2020, place scheduled batch on hold and operationally run Batch EDBC to apply updated FPL COLA values to Medi-Cal programs. Generate lists to aid the counties after Batch EDBC completes.

NOAs will be released the same night by changing the existing logic which currently put NOAs on hold.

1.4 Assumptions

- 1. Batch EDBC will use the existing MAGI Determination which is relevant to the benefit month and will not trigger a new Eligibility Determination Request (EDR) to CalHEERS.
- 2. LRS/CalSAWS only: DCFS Medi-Cal programs will be identified through the worker associated to the program. The workers for DCFS programs are associated to positions that have unit department type of "DCFS". These workers can be identified by the prefix of "19DC" in their worker ID numbers.
- 3. **C-IV only**: March 07,2020, will be a system down day and Batch EDBC will run throughout normal business hours.
- 4. **C-IV** will inherit the **LRS/CalSAWS** Batch EDBC functionality for Run Reason "Medi-Cal FPL COLA" post migration.
- 5. In **LRS/CaISAWS**, a standard Journal Entry will be created when Batch EDBC is run. In **C-IV**, a Journal Entry will not be created; CIV-100452 was created to address the functionality. The SCR has not yet been prioritized.
- 6. C-IV only: No NOAs are required to be placed on hold with this effort.
- 7. LRS/CalSAWS only: As Medi-Cal NOAs will use existing NOA functionality, no updates are required for this effort.
- 8. Batch EDBC process should skip any overridden budgets.

2 RECOMMENDATIONS

2.1 Run Batch EDBC to apply FPL COLA values to Medi-Cal Programs

2.1.1 Overview

- Identify Medi-Cal cases for which Batch EDBC must run for 2020 benefit months according to the guidelines in the ACWDL 20-03 (described in Section 1.2 Requests) to apply the updated 2020 FPL values. Insert identified Medi-Cal cases into SYS_TRANSACT for Batch EDBC processing.
- 2. Operationally execute Batch EDBC. Batch EDBC will run only for the cases identified.
- 3. **CIV only:** Updates to NOA logic to prevent the NOAs from being put on hold for this and future FPL COLAs.

2.1.2 Description of Changes

 Identify cases for Batch EDBC processing by inserting a record into SYS_TRANSACT for Medi-Cal Program(s) only with below mentioned Run Reason and Sub Type Code for the specified benefit months processed until come-up month for all Active Medi-Cal programs that meet the following requirements (A-C):

System	Run Reason	Code Table	Sub Type Code
LRS/CalSAWS	Medi-Cal FPL COLA	CT744 ML	PL
C-IV	FPL COLA	CT744 FP	PL

A. Benefit Months: January and February 2020

- i. Medi-Cal EDBC has not been processed since updated 2020 FPL values have been deployed to production with CA-211064 and CIV-105301.
- ii. There is a Regular Medi-Cal EDBC for the program for the month being run where there exists at least one individual receiving aid from MSP (QMB, SLMB, or QI-1).
- iii. None of the individuals receiving aid from MSP receive Title II -Retirement, Survivors and Disability Insurance (RSDI) income.
- iv. If MAGI has been requested on the case, a Medi-Cal EDBC has been run against at least one MAGI Determination.
- v. LRS/CalSAWS only: The program is not assigned to a DCFS worker.

B. <u>Benefit Months: March 2020</u>

- i. Medi-Cal EDBC has not been processed since updated 2020 FPL values have been deployed to production with CA-211064 and CIV-105301.
- ii. There is a Regular Medi-Cal EDBC for the program for the month being run where there exists at least one individual receiving aid from MSP (QMB, SLMB, or QI-1).
 - iii. If MAGI has been requested on the case, a Medi-Cal EDBC has been run against at least one MAGI Determination.
- iv. LRS/CalSAWS only: The program is not assigned to a DCFS worker.

C. Benefit Month: April 2020

- i. Medi-Cal EDBC has not been processed since updated 2020 FPL values have been deployed to production with CA-211064 and CIV-105301.
- ii. There exists at least one individual on the program receiving Non-MAGI Medi-Cal aid.
- iii. If MAGI has been requested on the case, a Medi-Cal EDBC has been run against at least one MAGI Determination.
- iv. There are no individuals on the Medi-Cal program receiving aid with an Express Lane aid code.
- v. LRS/CalSAWS only: The program is not assigned to a DCFS worker.
- 2. Generate lists to aid the counties after Batch EDBC completes (see Outreach section 5.1)

3. Update the NOA logic for On Hold Status Change (C-IV Only):

Update the NOA logic to no longer set the NOAs to the 'Batch - On Hold' status when EDBC is run for the FPL Batch. Remove the FPL COLA run reason as one of the run-reason that update the NOAs to an 'On Hold' status.

Note: This update will change both the FPL Batch run in this effort and all ongoing FPL Batch effort to no longer default NOAs to the 'On Hold' status for the FPL run reason.

2.1.3 Batch Operations:

Steps of Operation:

- i. Identify Medi-Cal cases for Batch EDBC processing as mentioned in section 2.1.2.1(A-C).
- ii. Operationally execute Batch EDBC processing.

2.1.4 Execution Frequency

This is a one-time change.
2.1.5 Key Scheduling Dependencies

LRS/CalSAWS only: Expected start of Batch EDBC processing is on March 06,2020 during Regular Batch Operation hours.

C-IV only: Expected start of Batch EDBC processing is on March 07,2020 6:00 AM and Expected completion of Batch EDBC processing is on March 07,2020 4:00 PM.

2.1.6 Counties Impacted

All 40 counties.

2.1.7 Data Volume/Performance

Batch EDBC will run approximately below mentioned Medi-Cal EDBCs for the months of January 2020 through April 2020.

BENEFIT MONTH	C-IV	LRS/CalSAWS
January,2020	17,967	86,611
February,2020	17,780	86,308
March,2020	158,630	226,540
April,2020	290,416	401,698
TOTAL	484,793	801,157

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Eligibility	Draft ACWDL 20-03	2020 FPL ACWDL 20-03.pdf
2	Eligibility	Monthly FPL Chart and Annual FPL Chart	2020 Annual FPL.pdf 2020 Monthly FPL.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.1.2	The LRS shall include an automated method for implementing mass updates triggered by policy changes or mass participant financial changes, including Social Security or Veterans benefits cost of living adjustments (COLAs).	This SCR runs Batch EDBC to update Medi-Cal Eligibility based on the 2020 FPL values.

5 OUTREACH

5.1 Lists

Generate lists to aid the counties after Batch EDBC completes.

The listing will consist of below columns:

- Case Name
- Case Number
- County
- Unit
- Unit Name
- Office Name
- Worker

Also, add County Action text mentioned below on the posted list 'County Action' tab.

1. List Name: Closed Program

Generate a list of cases in which Batch EDBC resulted in the closure of the Medi-Cal program. Counties can use this list to verify that the program's discontinuance is appropriate. If available, display the closure reason (for example: Over Income). **Additional Columns:** Closure Reason, Benefit Month

County Action: These are likely the result of household changes or ongoing data collection which was not yet processed through EDBC by the user. Since the purpose of this Batch EDBC process was not to close households, review these cases to verify the closure was accurate.

2. List Name: Closed Individual

Generate a list of cases in which Batch EDBC resulted in a individual being discontinued from Medi-Cal but the Medi-Cal program remains open. Counties can use this list to verify that the individual's discontinuance is appropriate. If available, display the closure reason.

Additional Columns: Individual Name, CIN, Closure Reason, Benefit Month County Action: These are likely the result of household changes or ongoing data collection which was not yet processed through EDBC by the user. Since the purpose of this Batch EDBC process was not to close individuals, review these cases to verify the closure was accurate.

3. List Name: Read-Only EDBC

Generate a list of cases in which Batch EDBC resulted in a Read-Only Medi-Cal EDBC. Counties can use this list to run Medi-Cal EDBC for those cases and take the appropriate action.

Additional Column: Read-Only Reason, Benefit Month

County Action: Since Batch EDBC couldn't automatically apply the intended change to these cases, users may process EDBC to apply intended changes if applicable.

4. List Name: MAGI Run with EDBC Never Linked

Generate a list of cases that were excluded from Batch EDBC processing because the Medi-Cal program had requested a MAGI Determination, but Medi-Cal EDBC never ran against any MAGI Determination on the case.

County Action: In this situation, a user has never run EDBC to establish the CalHEERS link for this case. To avoid having Batch EDBC processing do so automatically, these cases were not processed. For cases in this list, run Medi-Cal EDBC to apply the FPL COLA Changes, taking note that this EDBC will establish the link to CalHEERS.

5. List Name: Batch EDBC skipped with a reason

Generate a list of cases in which Batch EDBC was skipped, including the reason for the skip. These cases will be the responsibility of the worker to address. **Additional Column**: Skip Reason, Benefit Month

County Action: Batch could not process these cases because of the skip reasons listed in the list. Review each case and take appropriate action based on the skip reason.

6. List Name: Denials and Discontinuance for January - April 2020

Generate a list of cases for individuals that were denied or discontinued prior to the 2020 FPL value updates although may be eligible with the latest updated 2020 FPL values.

Additional Column: Individual Name, CIN, Benefit Month

County Action: Review all denials and discontinuances and re-evaluate eligibility based on the 2020 FPL values.

Criteria:

i. Medi-Cal EDBC was processed prior to the updated 2020 FPL values (CA-

- 211064/CIV-105301) is deployed.
- ii. One of the following failed income budgets exists in the EDBC:
 - a. QMB
 - b. SLMB
 - c. QI-1
 - d. ABD FPL
 - e. 250% Working Disabled

iii. There is a denied or discontinued individual who is also in one of the failed income budgets identified above.

iv. The Income value of the failed budget is less than the 2020 FPL value for the appropriate effective month. (Refer to the Technical Note)

v. There is a latest EDBC processed for the denied or discontinued individual for any of the months January through April 2020. (Refer to the Technical Note for budget type corresponding to the benefit month).

Technical Note:

The "Total net non-exempt income" value of the failed budget is less than the 2020 FPL "Maintenance Need" value.

Refer to recommendation 2.1.2.1 (A-C) for corresponding benefit month and criteria (e.g. RSDI income, Budget type)

Budget Type - FPL% reference QMB – 100% FPL SLMB – 120% FPL QI-1 – 135% FPL ABD FPL – 100% FPL 250% Working Disabled – 250% FPL

vi. LRS/CalSAWS only: The program is not assigned to a DCFS worker.

Above Mentioned Lists will be posted on March 09,2020 at following locations:

System	Path
LRS/CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CA-211066
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CIV-105302

6 APPENDIX

6.1 'The System' Definition

- 1. '**The System**' refers to both LRS/CalSAWS and C-IV systems. For instance, if the document mentions the below:
- Update The System to...

That implies:

Both LRS/CalSAWS and C-IV Systems will be updated with the same changes.

- 2. 'LRS/CalSAWS' refers to Leader Replacement System (LRS)
- 3. 'C-IV' refers to C-IV systems.

Calsaws

California Statewide Automated Welfare System

Design Document

CA-212650 | CIV-106060

ABAWD Geographical Waiver and Discretionary Waiver Updates

DOCUMENT APPROVAL HISTORY		
Prepared By	Jason Francis, Gabriel Trejo, Connor Gorry	
Reviewed By	Eligibility Build, Batch Build, Correspondence Build, and System Test Teams	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
1/30/2020	1.0	Initial Version	Jason Francis
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1 OVERVIEW

An Able-Bodied Adult Without Dependents (ABAWD) is a non-assistance CalFresh recipient who is a work registrant aged 18 to 50 without dependent children. ABAWD eligibility for CalFresh is time limited to any three full months of benefits in a 36-month period unless the individual:

- Satisfies the ABAWD work requirement;
- Is exempt from the ABAWD time limit;
- Qualifies for an additional three consecutive month period of eligibility;
- Receives a 15 percent exemption; or
- Lives in a county or area with a waiver of the ABAWD time limit.

1.1 Current Design

Under current SNAP regulations, all ABAWDs subject to the time limit are eligible to no more than three full months of CalFresh benefits in a 36-month period, unless they are exempt from the time limit or are satisfying the ABAWD work requirement. Federal discretionary exemptions are only available to individuals at risk of losing federal SNAP benefits due to the ABAWD time limit. These exemptions are manually applied in the Time Limit records. Marin is the only C-IV county subject to the ABAWD work requirement.

1.2 Requests

Per ACL 20-XX, changes to time limit waiver criteria are effective April 1, 2020. In addition, the new rule limits carry over of unused discretionary exemptions, previously known as "percentage exemptions" or "15 percent exemptions." Changes to discretionary exemptions are effective October 1, 2020.

1.3 Overview of Recommendations

With the exception of the list, the following recommendations will occur the evening of 2/19/2020:

- 1. Update the Counties with ABAWD Geographical Waiver as of April 2020.
- 2. Run the ABAWD Batch job for the April 2020 and May 2020 Effective Months to remove the geographical waiver exemption for affected counties.
- 3. Update the Countable Month NOA job to not generate for the April 2020 or May 2020 effective months. This will prevent the CF 377.11B (CalFresh Countable Month Letter) from being generated for those months.
- 4. Suppress the ABAWD Discontinuance Sweep Job
- 5. Update the Time Limit Sync Job to Apply a Discretionary Exemption for nonexempt ABAWDs in the April 2020 and May 2020 effective months.
- 6. Add the CF 377.11C (updated in C-IV), CF 377.11D, and CF 377.11E forms to the Template Repository.
- 7. Provide a list of cases with a CalFresh person who was determined to be nonexempt ABAWDs and are subject to the Discretionary Exemption for either April 2020 or May 2020.

1.4 Assumptions

- 1. After 3/19, the user will be responsible for generating and sending the 377.11C, 377.11D, and 377.11E, forms as appropriate for any new case or case changes.
- 2. Worker will not be marking the time limit month as "Not Met" for the effective months of April 2020, May 2020.
- 3. With the automation of the discretionary exemptions and the suppression of the ABAWD Discontinuance Sweep Job, no persons should be discontinued per ABAWD requirements in Marin county, unless the worker takes manual action.

2 **RECOMMENDATIONS**

2.1 Update the Counties with ABAWD Geographical Waiver as of April 2020

2.1.1 Overview

The system maintains a list of counties and the time periods in which they qualify for the ABAWD geographical waiver. This list must be updated for the 34 counties that no longer qualify for that waiver as of April 2020.

2.1.2 Description of Changes

2.1.2.1 Update the 'Counties with ABAWD Geographical Waiver' (CT 2620) to set the following counties as having no wavier as of 04/01/2020:

2.1.2.1.1 Alpine, Amador, Butte, Calaveras, Del Norte, El Dorado, Humboldt, Inyo, Lake, Lassen, Los Angeles, Mariposa, Mendocino, Mono, Napa, Nevada, Orange, Placer, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Luis Obispo, Santa Barbara, Santa Cruz, Shasta, Solano, Sonoma, Tehama, Trinity, Tuolumne, Ventura, Yolo.

Note: Alameda, Contra Costa, Marin, San Francisco, San Mateo, and Santa Clara counties have previously lost their wavier.

2.2 Run the ABAWD Batch job for the April 2020 and May 2020 Effective Months

2.2.1 Overview

The ABAWD Batch job identifies all CalFresh persons that should be reevaluated for ABAWD due to data changes that may result in a change to the recipient's current ABAWD status. As a change to a county's wavier does not automatically run this batch job, the system will operationally run

this job to identify ABAWDs that no longer qualify for the geographical wavier.

2.2.2 Description of Change

- 1. Suppress the ABAWD Batch sweep the night of deployment. This keeps processing limited to the target population specified below.
 - a. Allow the sweep job to run as normal the following night to catch up processing for prior day workload.
- 2. Insert records into SYS_TRANSACT of type 'ABAWD' (CT 626) for April and May 2020 for each CalFresh program in a non-geographically waived county (including Marin county) with a person that meets the following criteria:
 - a. Person is an active or ineligible Member in the CF program
 - b. Person's age is at least 18, but less than 50
 - c. Person does not have a Work Registration record of type CFWR and Status of Exempt
 - d. There is no other open Member in the program who is less than 18 years old and is considered In the Home. Note: There are slight differences in LRS/CalSAWS and C-IV definitions based on the absence of a defined Household Status record.
- 3. Allow the ABAWD batch job to process SYS_TRANSACT records of type 'ABAWD'.

2.2.3 Execution Frequency

One-time

2.2.4 Key Scheduling Dependencies

This batch job must run after the 'Counties with ABAWD Geographical Waiver' (CT 2620) have been updated.

2.2.5 Counties Impacted

All non-geographically waived counties as of 4/1/2020

2.2.6 Data Volume/Performance

Approximately 125,000 ABAWD statuses will be determined for LRS/CalSAWS.

Approximately 75,000 ABAWD statuses will be determined for C-IV.

2.3 Update the CF 377.11B Batch Sweep to not Generate for the April 2020 or May 2020 Effective Months

The CF 377.11B Batch Sweep (LRS/CalSAWS and C-IV name: PB00R536) runs daily to the generate Form CF 377.11B – CalFresh Countable Month Letter. This sweep must be updated as to not generate Form 377.11B if Time Limit begin month is April or May 2020.

Technical note: The exemption months should be implemented with a reference table, so that they can be adjusted if and as needed.

2.4 Suppress ABAWD Discontinuance Sweep Job

Update the batch scheduler to disable the ABAWD Discontinuance Sweep job (PB00E904) for the April 2020 and May 2020 benefit months.

2.5 Update the ABAWD Time Limit Status Sync Job

2.5.1 Overview

The ABAWD Time Limit Status Sync Job (LRS job name: PB00E307, C-IV job name: PB00T621) runs daily to align individual ABAWD time limit months with the latest ABAWD Status determination data from the ABAWD_STAT table. The Sync Job creates/updates individual month statuses to reflect updates made to any individual's ABAWD status throughout the current 36-Month ABAWD Calendar.

This job is updated to apply Discretionary Exemptions for Non-Exempt ABAWDs in the April 2020 and May 2020 Effective Months, that would otherwise receive a countable month.

2.5.2 Description of Change

- 1. Update the ABAWD Time Limit Status Sync job to set the Time Limit month status to '15' (15% ABAWD Exemption) and the status reason to 'blank' when <u>ALL</u> of the following conditions are met:
 - a. The ABAWD Time Limit month is either April 2020 or May 2020
 - i. Implementation Note: These months must be implemented in a configurable way that is easy to remove in the event of an injunction. For example, a reference table with the months that have been approved for discretionary exemption automation.
 - b. The tracked ABAWD's case associated to the ABAWD_STAT record DOES NOT belong to a waived County
 - c. The ABAWD Time Limit month was not updated by a worker
 - d. <u>Either</u> of the following is true:

- i. The effective ABAWD_STAT record has a status of 'AB' (ABAWD) and a Work Requirement equal to 'Not Met', 'Geographically Waived', or is blank. This includes scenarios when the previous ABAWD Time Limit month is 'NN' (Did not meet work requirement)
- ii. The ABAWD Time Limit month cannot be determined from previous ABAWD Time Limit months or an effective ABAWD_STAT record (Default Condition)
- 2. Operational Note: For the first run of this job after the changes have been applied, the batch date must be set in the future (3/23/2020) to evaluate May 2020 (and prior) ABAWD Time Limit months. After the batch completes, the last successful date for this job must be modified to the day the batch job completed.

2.5.3 Execution Frequency

No Change. This Batch Job runs every business day (Monday – Saturday).

2.5.4 Key Scheduling Dependencies

This job must execute after the completion of the ABAWD Sweep and Batch jobs.

2.5.5 Counties Impacted

All C-IV and LRS/CalSAWS counties.

2.5.6 Data Volume/Performance

Additional 1 month of processing volume in February, representing approximately 150,000 time limit months across C-IV and LRS/CalSAWS.

2.5.7 Failure Procedure/Operational Instructions

Batch Support/Operations staff will diagnose the nature of the failure and determine the appropriate action.

2.6 Update Form CF 377.11C in C-IV

2.6.1 Overview

Update the CF 377.11C CalFresh Informational Notice – CalFresh Time Limit for Able-Bodied Adults Without Dependents (ABAWDs) – in C-IV. The new iteration contains substantial verbiage changes from the previous 6/18 version of the Form.

State Form: CF 377.11C Programs: CF Attached Forms: C-IV: COVER.xdp Forms Category: Informing Notice Existing Languages: English and Spanish

2.6.2 Update CF 377.11C Form XDP

There have been significant verbiage changes between CF 377.11C (6/18) and CF 377.11C (1/20)

Updated Languages:

English and Spanish

Form Mockups/Examples: For Form Mockup, see <u>Supporting Documents #1.</u> For a comparison of verbiage, see <u>Supporting Documents #2.</u>

2.6.3 Updates to Form Variable Population

Variable generation has been changed slightly from the 6/18 version of the Form. The variable for County Name has been removed, while two new variables for the Current 36-month Period and the Worker Number have been added. The Person Name variable remains unchanged from the previous iteration.

Variable Name	Population	Formatting	Template Repository Population	Populates with Form Generation
<person Name></person 	Unchanged from previous version.	Arial, Size 10	Ν	Y
<current 36-<br="">month period></current>	Populates with the current static three-year window from the ABAWD calendar. Currently, this is '1/1/2020 – 12/31/2022' Note: 36-month time clock period begin and	Arial, size 10 mm/dd/yyyy	Y	Y

Form Body Variables:

	end dates are stored in CT_2621			
<worker phone<br="">Number></worker>	Populates based on the phone number associated to the worker's position for both C-IV.	Arial, size 10	Ν	Y
	Note: This should be the same population that displays in the header/cover sheet.			

Variables Requiring Translations: N/A

2.7 Add Form CF 377.11C in LRS/CalSAWS

2.7.1 Overview

The CF 377.11C ABAWD Informing Notice must also be added to LRS/CalSAWS.

State Form: CF 377.11C Programs: CF Attached Forms: System Standard Mailing Cover Sheet LRS/CalSAWS: Header_1_[Language].xdp Forms Category: Form (LRS/CalSAWS) Languages: English, Spanish

2.7.2 Create Form XDP

The CF 377.11C informs ABAWDs of a change to federal rules affecting the CalFresh program.

Form Header: N/A (This form has a mailing Cover Sheet attached) Form Title: CalFresh Time Limit for ABAWDs Form Number: CF 377.11C Include NA Back 9: No Form Mockups/Examples: See <u>Supporting Documents #1</u>

2.7.3 Add Form Variable Population

CF 377.11C will pre-populate with three variables when generated for massmailer (SCR CA-212648/CIV-106058), or in future batch sweeps implemented in ABAWD Phase 3.

Variable Name	Population	Formatting	Editable?	Template Repository Population	Populates with Form Generation
<person Name></person 	Unchanged from previous version.	Arial, Size 10	Y	Z	Y
<current 36-month period></current 	Populates with the current static three-year window from the ABAWD calendar. Currently, this is '1/1/2020 – 12/31/2022' Note: 36-month time clock period begin and end dates are stored in CT_2621	Arial, size 10 mm/dd/yyyy	Ν*	Y	Y
<worker Phone Number></worker 	Populates based on the phone number associated to the worker's position for LRS. Note: This should be the same population that displays in the header/cover sheet.	Arial, size 10	Y	Ν	Y

Form Body Variables:

Variables Requiring Translations: N/A

*Note: <Current 36-month period> variable will be editable when generated from the Template Repository as a blank template.

2.7.4 Add Form Control

CF 377.11C is an Informing Notice, and will not be returned by the recipient.

Tracking Barcode	BRM Barcode	Imaging Barcode
N	Ν	Ν

2.7.5 Add Form to Template Repository

Required Document Parameters: Case Number, Customer Name, Language, Program

2.6.7 Add Form Print Options and Mailing Requirements

The print options checked below will be available for this form:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Y	Y	Y	Y	Y	Y

The PRINT LOCALLY WITHOUT SAVE option is only available when printing a blank template.

The PRINT AND SAVE options are only available when printing a document containing case or resource information.

Mailing Requirements:

Mail-To (Recipient): Primary Applicant

Mailed From (Return): CalFresh Regional Office Name and Address/CalFresh District Office Name and Address

Mail-back-to Address: CalFresh Regional Office Name and Address/CalFresh District Office Name and Address

Outgoing Envelope Type: Standard Return Envelope Type: N/A

Additional Requirements:

Special Paper Stock: N/A Enclosures: N Electronic Signature: N Post to YBN/C4Y: Y

2.8 Add Form CF 377.11D in C-IV and LRS/CalSAWS

2.8.1 Overview

CF 377.11D – CalFresh Discretionary Exemption for Able-Bodied Adults Without Dependents (ABAWD) – is a new Form that must be added to both systems as a full-page NOA Fragment. The CF 377.11D must be used anytime a discretionary exemption is provided to an individual ABAWD.

State Form: CF 377.11D (1/20) Programs: CF Attached Forms: N/A Forms Category: Informing Notice (C-IV), Form (LRS/CalSAWS)

Languages:

English and Spanish

2.8.2 Create Form XDP

CF 377.11D informs participants of a Discretionary Exemption from the ABAWD Time Limit. Two variables indicate the start date and end date of this exemption. During this window, participants will keep getting CalFresh benefits; However, after the end date ABAWDs must meet the 20 hours per week / 80 hours per month work requirement in order to continue to receive benefits.

Form Header: System Standard Header

LRS/CalSAWS: Header_1

C-IV: Header_Standard

Form Title: CalFresh Discretionary Exemption for Able-Bodied Adults Without Dependents (ABAWD)

Form Number: CF 377.11D

Include NA Back 9: Yes

Form Mockups/Examples: See Supporting Documents #3

2.8.3 Add Form Variable Population

CF 377.11D populates with four variables. Two of them – the Person Name and the Worker Phone Number – use the same logic as CF 377.11C.

The other two are new variables, marking the start and end date of the participant's Discretionary Exemption from the ABAWD work requirements.

Form Body Variables:

Variable Name	Population	Formatting	Editable?	Template Repository Population	Populates with Form Generation
<person Name></person 	The name of the household member identified as an ABAWD.	Arial, size 10	Y	Ν	Y
<exemption Start Date></exemption 	Populate with the Start Date of the most recent Time Limit period that has a status of '15' (15% ABAWD Exemption)	Arial, size 10 mm/dd/yyyy	Υ	Ν	Υ
<exemption End Date></exemption 	Populate with the End Date of the most recent Time Limit period that has a status of '15' (15% ABAWD Exemption)	Arial, size 10 mm/dd/yyyy	Y	Ν	Y
<worker Phone Number></worker 	Populates based on the phone number associated to the worker's position for both C-IV and LRS. Note: This should be the same population that displays in the header/cover sheet.	Arial, size 10	Y	Ν	Y

2.8.4 Add Form Control

While the CF 377.11D has an NA Back 9 attached, it is not expected to be returned, and no Form Control is required.

Due Date: N/A

Tracking Barcode	BRM Barcode	Imaging Barcode
Ν	Ν	Ν

2.8.5 Add Form to Template Repository

Required Document Parameters: Case Number, Customer Name, Language, Program

2.7.6 Add Form Print Options and Mailing Requirements

The print options checked below will be available for this form:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local (LRS Only)	Reprint Central
Y	Y	Y	Y	Y	Y

The PRINT LOCALLY WITHOUT SAVE option is only available when printing a blank template.

The PRINT AND SAVE options are only available when printing a document containing case or resource information.

Mailing Requirements:

Mail-To (Recipient): Primary Applicant Mailed From (Return): CalFresh Regional Office Name and Address/CalFresh District Office Name and Address Mail-back-to Address: CalFresh Regional Office Name and Address/CalFresh District Office Name and Address Outgoing Envelope Type: Standard Return Envelope Type: N/A

Additional Requirements:

Special Paper Stock: N/A Enclosures: N Electronic Signature: N Post to YBN/C4Y: Y

2.9 Add Form CF 377.11E to C-IV and LRS/CalSAWS

2.9.1 Overview

Form CF 377.11E – CalFresh Able-Bodied Adult Without Dependents (ABAWD) Time Limit Exemption Screening Form – must also be added to both systems.

This Form is intended to be filled out and returned by the customer by mail or in person in order to determine whether they are eligible for any of the exemptions listed in Form CF 311.11C.

State Form: CalFresh Able-Bodied Adult Without Dependents (ABAWD) Time Limit Exemption Screening Form

Programs: CF

Attached Forms:

Standard Mailing Cover Sheet

LRS/CalSAWS: Header_1_[Language].xdp

C-IV: COVER.xdp

Forms Category: Application

Languages:

English and Spanish

2.9.2 Create Form XDP

CF 377.11E opens with a brief introduction, before a section prompting for household information, a second lengthy section with a series of checkboxes and write-in lines asking for reasons and details as to why the participant should be exempted, and a final section in which the participant can indicate if and how they are already meeting the work requirement.

Form Header: N/A (the Form will have a Cover Letter)

Form Title: CalFresh Able-Bodied Adult Without Dependents (ABAWD) Time Limit Exemption Screening Form

Form Number: CF 377.11E

Include NA Back 9: No

Form Mockups/Examples: See Supporting Documents #4

	State of California – Health and Human Services Agency California Department of Social Services			
Removed word "at" ("al" in	CALFRESH ABLE-BODIED ADULT WITHOUT DEPENDENTS (ABAWD) TIME LIMIT EXEMPTION SCREENING FORM			
for more intuitive wording.	Federal CalFresh rules say that you must work, volunteer, or participate in certain employment and training activities. If you do not, you may be limited to three months of CalFresh benefits in a 36-month period, Some people may be excused from these rules.			
r	PLEASE COMPLETE THIS FORM AND SELECT ALL BOXES THAT APPLY TO YOUR SITUATION			
	Please give this completed form and any proof to your county			
	Jy munt: complete this form and main it to. In Person: Visit our office at			
	If you have questions or need help, call your county at(Phone Number)			
CE 377 11E will	TION ONE: HOUSEHOLD INFORMATION			
populate with two	B:			
separate addresses	Const Number			
for office mailing				
address and office	TION TWO: EXEMPTIONS			
physical address –	alFresh for as long as you are eligible. Check all that apply to you and provide proof if you			
rather than just one.	it.			
For an example of fl	have a physical or mental health issue that stops me from working at least 20 hours per week or total of 80 hours or more per month. Please provide more detail:			
MC 0210.	nere a personal issue that stops me from working at least 20 hours per week or a total of 80 hours			
	or more per month because:			
With the addition of	I am experiencing homelessness and I am unable to meet my basic needs (adequate shelter, heating and cooling, electricity, running water, food, and clothing).			
section, the Form is t	ESS I am in a drug or alcohol abuse treatment program, or I am struggling with a drug or alcohol problem. Image: treatment program, or I am struggling with a drug or alcohol problem.			
long! Top/Bottom	Program name:			
margins must be	program.			
shrunk, and content	I am a victim of domestic violence.			
slightly to create	O Other, Please explain:			
space.	live in a CalFresh household with a child under age 18 (this can be your own child, sibling, or any			
	priner child in your Call tesh household).			
	CF 377.11E (1/20) Required Form - Substitutes Permitted			
This is the first is a star	jikist = 01 +			
Form but the third n				
the Form as it will ae	character CF 377 11F Address Mockup			
with its cover letter.				

2.9.3 Add Form Variable Population

The first variables that appear in this form are the addresses at which to submit it. Unlike the state-supplied version, we will split this address into two separate addresses – one for mailing, and one for physically turning in the Form. This will make the means of returning this Form consistent with how other C-IV and LRS/CalSAWS Forms are submitted (eg MC-0216), as well as giving participants multiple means to submit.

The other required variable population is the Worker Phone Number. It appears twice – at the end of the opening section, and at the very end of the second impression.

Variable Name	Population	Formatting	Editable?	Template Repository Population	Populates with Form Generation
<return Mailing Address></return 	Mailing address of the Office associated to the worker's position	Arial, size 10	Y	Ν	Y
<in-person Visit Address></in-person 	Physical address of the Office associated to the worker's position	Arial, size 10	Y	Z	Y
<worker Phone Number></worker 	Populates based on the phone number associated to the worker's position for both C-IV and LRS. Note: This should be the same population that displays in the header/cover sheet.	Arial, size 10	Y	Ν	Y

Form Body Variables:

Variables Requiring Translations: N/A

2.9.4 Add Form Control

Participants can return the screening form in the enclosed BRM to apply to be excused from the ABAWD work requirement.

Due Date: N/A

Tracking Barcode	BRM Barcode	Imaging Barcode
Ν	Y	Y

Note: Customers with electronic communications will still receive a paper copy of this correspondence in the mail so that they are also provided a return envelope.

BRM Barcode is for C-IV only. In LRS/CalSAWS there will be a pre-paid envelope.

2.9.5 Add Form to Template Repository

Add CF 377.11E to the Template Repository as a NOA Form.

Required Document Parameters: Case Name, Customer Name, Language, Program

Add Form Print Options and Mailing Requirements

The print options checked below will be available for this form:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local (LRS Only)	Reprint Central
Y	Y	Y	Y	Y	Y

The PRINT LOCALLY WITHOUT SAVE option is only available when printing a blank template.

The PRINT AND SAVE options are only available when printing a document containing case or resource information.

Mailing Requirements:

Mail-To (Recipient): Primary Applicant

Mailed From (Return): CalFresh Regional Office Name and Address/CalFresh District Office Name and Address

Mail-back-to Address: CalFresh Regional Office Name and Address/CalFresh District Office Name and Address

Outgoing Envelope Type: Standard

Return Envelope Type:

C-IV: BRM

LRS/CalSAWS: Prepaid Envelope

Additional Requirements:

Special Paper Stock: N/A

Enclosures: N

Electronic Signature: N

Post to YBN/C4Y: Y (this Form will only be posted to C4Y/YBN. Submission functionality will be added with a future effort.)

2.9.6 C-IV Imaging Document Type Mapping

Add CF 377.11E to the Map forms to doctypes csv as an Assessment.

3 SUPPORTING DOCUMENTS

Ref. #	Document	Functional Area	Description	Attachment
1	CF 377.11C State Version	CF	The State-provided version of CF 377.11C – CalFresh Time Limit For Able-Bodied Adults Without Dependents (ABAWD)	CF 377.11C
2	CF 377.11C Verbiage Changes	CF	Table containing all verbiage changes for CF 377.11C from the 6/18 version to the new 1/20 version.	CF 377.11C Verbiage Compariso
3	CF 377.11D State Version	CF	The State-provided version of CF 377.11D – CalFresh Discretionary Exemption for Able-Bodied Adults Without Dependents	CF 377.11D
4	CF 377.11E State Version	CF	The State-provided version of CF 377.11E – CalFresh Able- Bodied Adults Without Dependents (ABAWD) Time Limit Exemption Screening Form. The versions to be added to C- IV and LRS/CalSAWS will look <i>almost</i> identical, except for splitting and reformatting the Address section on the first page, and the removal of the word "at"/"al" for clarity.	CF 377.11E (State Version)
5	CF 377.11E Address Section Mockup	CF	PNG Image from page XX depicting a rough mockup of how the first page of Form CF 377.11E will look with the separated address section.	CF377.11Emockup. png

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.8.1.21	The LRS shall automate eligibility determination and benefit calculation for certain individual and case changes.	The EDBC, ABAWD Status, Time Limit Detail, and forms will be updated based on changes to the counties no longer eligible for the ABAWD geographical wavier.
2.18.3.3	The LRS shall produce various notices, NOAs, forms, letters, stuffers, and flyers, including: g. Information notices and stuffers; o. Time limit notices;	Mass generation of Time Limit Informing notice.
2.18.3.20	The LRS shall support multiple means of communicating appointments, appointment reminders, and critical dates and/or information that may affect a participant's eligibility, using the following means: a. E-Mail; b. Text messaging; c. Automated phone reminder; d. USPS mail; and e. YBN.	Mass Mailing of three Forms in order to communicate critical dates of eligibility changes will occur as a part of this change.

5 OUTREACH

5.1 Lists

Provide a list of CalFresh persons who were determined to be non-exempt ABAWDs and are subject to the Discretionary Exemption.

List Name: [SCR #] - List of ABAWDs Subject to the Discretionary Exemption **List Criteria:** Person has an ABAWD Time Limit Month Detail record with a Status of '15% ABAWD Exemption' for either the April 2020 or May 2020 Effective Months. Only include cases in which the ABAWD is active on the CalFresh program. Set the Fed/Non-Fed column based on the person's Claim Code for that Effective Month. **Standard Columns:**

- Case Name
- Case Number
- County
- Unit
- Unit Name
- Office Name
- Worker
- Benefit Month

Additional Column(s):

- Person Name
- Fed/Non-Fed
- CF 377.11D Generated (an indicator; not present at initial release as none will have been generated)

Frequency: Generated with the initial release, a second time on May 1, 2020, and a final time on June 1, 2020.

The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CA-212650
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CIV-106060



Design Document

SCR CIV-103674 – Migrate Stanislaus County IVR to Amazon Connect

	DOCUMENT APPROVAL HISTORY		
CalACES	Prepared By	Jared Kuester	
CALIFORNIA AUTOMATED CONSONTIAN ELIZIOLITY AVITEM	Reviewed By	Raji Sanuvala & Pramod Ramesh	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/26/2019	1.0	Initial Draft	Jared Kuester



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1 OVERVIEW

Stanislaus County's interactive voice response (IVR) system, currently hosted on Cisco Customer Voice Portal (CVP) and contact center software will be migrated from the Cisco Unified Contact Center Enterprise (UCCE) to the cloud-based Amazon Connect software as a service (SAAS) contact center.

1.1 Current Design

Currently all phone calls to 1-877-652-0734 are routed to the Cisco UCCE contact center software. All the software and hardware required to operate the contact center are installed in the C-IV Datacenters, and the Stanislaus county contact center site. Phone calls are routed through T1 PRI lines that are located at the Stanislaus County contact center.

1.2 Requests

- 1. Recreate the existing Call Flow (see attached) in the Amazon Connect environment.
- 2. Recreate all IVR Web Service interactions using AWS Lambda.
- 3. Update Useful links in CCP for Stanislaus County specific links (see CIV-103540 for Stanislaus URLs)

1.3 Overview of Recommendations

- 1. Migrate the Toll-Free Number 1-877-652-0734 to route through Amazon Connect
- 2. Record the listed prompts as way files, instead of using text to speech.
- 3. Migrate the CVP IVR from Cisco to Amazon Connect.
- 4. Recreate existing Cisco Skill Groups as Amazon Connect queues.
- 5. Update the Amazon Connect Hours of Operations to match the existing Contact Center Open Hours.
- 6. Recreate all Finesse Phone Book Entries as Quick Connects
- 7. Import all existing agents from Cisco environments as Agents in Amazon Connect.
- 8. Create Routing Profiles for both English and Spanish queues.

1.4 Assumptions

- All existing IVR functionality will carry over from Cisco to Amazon Connect
 - This includes Voice Biometrics, and Self-Service Benefits information.
 - This also includes the new functionality not currently available in Cisco, Professional Voice Talent.

2 RECOMMENDATIONS

2.1 Phone Numbers

2.1.1 Overview

Amazon Connect requires a phone number to route calls to agents. A new phone number can be claimed, or an existing phone number can be ported into Amazon Connect. After claiming a new phone number, or porting an existing phone number you can also choose what kinds of calls you intend to take, either inbound calls, outbound calls, or both.

2.1.2 Description of Changes

The existing phone number 1-877-652-0734 will be migrated from the vendor TPX to Amazon Connect. This is accomplished through a support ticket opened with Amazon.

Once the phone number has been ported to Amazon Connect and associated with our Connect instance, we can choose how that phone number is routed, with Contact Flows.

2.2 Contact Flows

2.2.1 Overview

A contact flow defines the customer experience with a contact center from start to finish. Contact flows have multiple template types to interact with the caller in different manners. For a visual representation of the flows, please see the attachment Visio call flow, CIV-103674 - AWS C50 Detailed Call Flow.

2.2.2 Welcome Contact Flow

When a caller dials 1-877-652-0734 they are directed to the Welcome Contact Flow. If an informational message has been enable through the remote management application, it will be played following the language selection.

2.2.3 Person Lookup Contact Flow

All callers are directed to the Person Lookup Lambda. Initially the caller's phone number is sent to the IVR Webservice to determine if that phone number is associated with a person that has a voice print. If the Webservice doesn't return anything, they are sent to the General Menu. If the Webservice returns a list of Pers_ID's larger than 0, we first check if the list is larger than 15. We check the size of the BVP list to keep the response time minimal when comparing voice prints. If a caller returns to the person lookup contact flow, the system will attempt to identify the caller with either their social security number or the case number.

2.2.4 General Menu Contact Flow

Callers are directed to the General menu if they do not have a voice print, or they've opted to return to this menu. Callers are offered four options on this page, making a new application, calling about an existing case, listening to office hours and location, and general questions.

2.2.5 Login Menu Contact Flow

If callers select the options to indicate they are calling about their existing case, we first check to see if that caller already failed to login with their voice. If that's true we immediately send them to the Collect Case contact flow. If that is not true we give the caller three options, login using their voice, enroll their voice, or login using their case number and IVR PIN.

2.2.6 Voice Login Menu Contact Flow

If a caller selects to login using their voice, they are asked if they would like to enter their case number or social security number. This is used to locate a pers_id to identify what voice print to compare the voice print with.

2.2.7 Collect Voice Contact Flow

If a caller is identified with their phone number by the Person Lookup Lambda, or opted to login with their voice and successfully identified themselves with their case number or social security number the system asks them to speak their passphrase, "my voice is my password, please verify me." The passphrase is streamed to the Nuance Security server to compare the passphrase with previously enrolled voice prints. If the voice print doesn't match the previously recorded voice prints, they are eventually sent to the General Menu.

2.2.8 Collect Voice Case Lookup Contact Flow

If a caller successfully authenticates with their voice, we check if the Pers_ID that the voice print is associated with is associated with a Stanislaus County Case. If the lambda doesn't return an active case, they are sent back to the general menu. If the lambda returns more than one case for that Pers_ID they are asked to enter the Case number they are calling about.

2.2.9 Collect Case Contact Flow

If a caller selects to login with their case number and PIN, we first need to gather their case number to start the login process. After the caller enters their case number the system verifies that they entered seven digits.

2.2.10 Case Validation Contract Flow

If a caller successfully entered seven digits, the system verifies if that is a valid case number. If it is valid, it then checks if the caller came from the Voice Login Menu. If they didn't we send the caller to the collect PIN contact flow.

2.2.11 Collect PIN Contact Flow

Callers are asked to enter their IVR PIN to complete the login process. After they enter their four-digit PIN, the system validates that it's four digits in length, or if they entered a star (*).

2.2.12 Collect DOB Contact Flow

In the event a caller has the same IVR PIN as another member on their case, we require their date of birth to determine which person is calling. Once they enter their date of birth, we validate that it is the correct format before sending it to Login results contact flow.

2.2.13 Collect SSN Contact Flow

If a caller is requesting a new IVR PIN or are attempting to login with their voice and we didn't identify them by their calling phone number, we require they enter their social security number. Once the caller enters their SSN we validate that it's nine digits in length. If the caller presses star indicating they do not have or do not know their SSN, we check if they were requesting a new PIN. If that is true, we send the caller to an agent.

2.2.14 Collect ZIP Contact Flow

Callers that request to listen to their office hours an locations information, they are required to enter their primary residence ZIP code so the system can locate the closest office to them.

2.2.15 Login Results Contact Flow

Once a caller authenticates with either their voice or with their case number and IVR PIN, we check where to send the caller. If the caller is the primary applicant, or MediCal is active on the case and has a voice print, we send them to the case self-service menu. If a caller successfully authenticates, but are not primary and MediCal is not active, we send the caller to the Program Menu. If the caller authenticates with their case number and IVR PIN, and there is a duplicate PIN on that case, we send the caller to the Collect DOB contact flow. If the caller has failed to login three times, we send them to the No PIN Program Menu. If a caller successfully authenticates (primary or not), and they do not have a voice print enrolled, we send them to the Voice Enroll Menu.

2.2.16 Voice Enroll Menu Contact Flow

If a caller opted into enrolling their voice from the login menu contact flow they are informed that they will need their case number and IVR PIN. If they successfully logged in, but did not have a voice print we check if their BVP_Code equals "P". If that is the case, we delete the voice print associated with the pers_id. If their BVP_Code does not match Y or P, the system attempts to delete any possible voice recording for the caller in case they successfully record one or two voice prints, but didn't complete the enrollment process with three recordings.

2.2.17 Voice Enroll Contact Flow

Once a caller opts into enrolling their voice print, we ask them to state the phrase "My voice is my password, please verify me" three times. Between each recording we check the quality of the recording and let the caller know if the recording isn't high enough quality. After a total of six failed attempts, across all recording attempts, the enrollment process is abandoned, and the caller is sent to the next menu.

2.2.18 Program Menu Contact Flow

If a caller that is calling about an existing case but fails to successfully authenticate, or opts to skip the authentication process, they are asked about the program and purpose of their call today to assist the agent with that call. If the caller successfully authenticated and requested to speak to an agent the caller is given the same set of options, but also has the option to go back to the Case Self Service Menu.

2.2.19 No PIN Program Menu Contact Flow

When a caller indicates that they are calling about an existing case but does not authenticate, they are given the option to request a new IVR PIN, or to indicate the program they are calling about.

2.2.20 Program Menu Agent Service Contact Flow

After a caller selects what program they are calling about, they are given the same set of options to indicate what they need help with. This information is passed onto the worker. If the caller indicates they wish to return to the previous menu, we check which path they took to get here.

2.2.21 No Case Service Contact Flow

If a caller selects the option for all other questions from the general menu, they are sent here. The caller is presented with two options to move forward in the contact flow.

2.2.22 No Case Program Contact Flow

If a caller indicated they are an outside agency or requesting general questions from the No Case contact flow, they are given the options to indicate what program they are calling about before being transferred to an agent.

2.2.23 Apply for Benefits Contact Flow

Callers that select the option to apply for benefits from the general menu contact flow, they are sent here. Callers are only given the options to speak to a worker or to go back to the general menu.

2.2.24 Office Info Contact Flow

Callers are given the office information that relates to the ZIP code they entered. For more information on what ZIP code gives what information, see CIV-103674 – Stanislaus County ZIP Codes.

2.2.25 New PIN Contact Flow

If a caller selects the option to request a new PIN they are first sent to the Collect SSN contact flow. Once they return from the collect SSN, they system attempts to request a new PIN.

2.2.26 Case Self Service Menu Contact Flow

If a caller successfully authenticates, through their voice or case number and PIN, they are given options to access the self-service options.

2.2.27 Get Dynamic Benefits Menu Contact Flow

This lambda call calculates how many programs are active on the case they logged in with. If only one program is active they are sent to the 3 options menu, to allow the caller to select that program plus option 7 to repeat and option 8 to return to the previous menu. The total number of programs that can be active on a single case that the IVR can play information on is four.

2.2.28 Dynamic Benefits Information Menu Contact Flow

If a caller selects to hear their benefit information, they are sent to a menu to select what program they would like to hear the information for. The menu is dynamic and only offers the caller to listen to programs that the IVR has information for. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.29 CalWORKs Benefits Information Contact Flow

If a caller selects to hear their CalWORKs program information, they hear all relevant information on their CalWORKs program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.30 CalFresh Benefits Information Contact Flow

If a caller selects to hear their CalFresh program information, they hear all relevant information on their CalFresh program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.31 MediCal Benefits Information Contact Flow

If a caller selects to hear their MediCal program information, they hear all relevant information for all members on the case for their MediCal program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.32 Welfare to Work Benefits Information Contact Flow

If a caller selects to hear their Welfare to Work program information, they are played the status of the program. The system then checks if there are any pending activities. If there are, they are played, if not the caller is sent to the WTW Reimbursements contact flow.

2.2.33 Welfare to Work Reimbursement Contact Flow

After listening to their program status, the system then checks if callers have any reimbursements to report to the caller. If the they do not have any reimbursements on their case, the caller is sent to the WTW End Menu.

2.2.34 Welfare to Work End Menu Contact Flow

After listening to their welfare to work benefit information, callers are given an option to speak to a worker. If they choose this option the system will determine if the case worker's phone number is available. If it is available the system will transfer the caller to their desk phone. If it is not available it will transfer to a static phone number.

2.2.35 Document Request Contact Flow

If the caller selects the option to request a form, the system will determine how many forms are on file that will be offered. If there are no forms on file they will be sent to the three options menu, as the GEN 2000 form is always able to be requested.

2.2.36 Dynamic Document Request Contact Flow

After determining how many forms are available to be requested, the caller is given an option to request up to three forms, the GEN 2000, the SAR 7, and the TMC status report, depending on how many forms are available. This menu is dynamic and will only play the options available on the case. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.37 Document Request Resend Forms Contact Flow

If a caller requests either the SAR 7 or the TMC Status report, the system attempts to resend the selected form to the caller's address on file. If it is successful, the caller is given the option to request another form or return to the case self-service menu. If it fails, the caller is given the options to speak to a worker, or return the case self-service menu.

2.2.38 Document Request GEN 2000 Form Contact Flow

If the caller requests the GEN 2000 to be sent, the system attempts to generate the GEN 2000. If it is successful they inform the user that it will be mailed to their address on file or accessible through C4Yourself.com if their case is associate to their account. They are then given the option to request another form, or return to the case self-service menu. If the request is a failure the caller is given the option to speak to a work, or return to the case self-service menu.

2.2.39 Document Status Contact Flow

If the caller requested to listen to their document status, the system first checks to see if they have any forms on file. If they don't, they are returned to the case self-service menu. If they have greater than zero forms on file, the system checks to see how many they have, then sends it to the correct dynamic menu based on the amount of forms they have.

2.2.40 Dynamic Document Status Contact Flow

If the caller has one or more forms on file, they are given a list of forms to listen to choose from. For the CalFresh, CalWORKs, or CalWORKs CalFresh redetermination packets, only one will ever be given as an option. In the unlikely event that more than one of those three are on the case, the CalWORKs CalFresh redetermination packet takes president. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.41 Check Document Status Contact Flow

After the caller selects what documents they want to hear the status of, they are given the information based on what the status of their document is. After the information is played, the caller is given the option to check the status of another document, or speak to a worker. If they wish to speak to a worker, they will be given the exit reason that aligns with the document status they just listened to.

2.2.42 Change PIN Contact Flow

If a user requests to change their IVR PIN from the case self-service menu they are asked to enter a new PIN that meets the security requirements. If the change is successful they are returned to the case self-service menu. If it fails the caller is sent to a worker.

2.2.43 Exit Reasons Contact Flow

If the caller requests to speak to a worker, or are directed to a worker for another reason such as an error, it is determined what queue to route the call to based on the exit code. The exit codes are applied throughout all the contact flows right before it sends the caller to the exit reasons contact flow. Exit codes 0088, and 0099 are both released after playing a brief message. Several other exit codes are sent to the same queue.

2.2.44 Queue Transfer Contact Flow

Once callers are set to the correct working queue, we then proceed to check if the contact center is currently open. If the contact center is open a message is played informing the user to wait for the next available worker.

2.2.45 Customer Queue Contact Flow

If an agent is not currently in the Ready status, the caller is placed into a queue. All calls are answered in the order that they were received, and they hear music and informational messages while they wait for the next available agent. If the queue is backed up enough to where the longest call in queue is greater than seven minutes, we will offer the caller courtesy call back.

2.3 Prompts

2.3.1 Overview

Amazon Connect has the option to upload WAV files to play messages to the caller, or use the built in Text-To Speech service. To present a better experience, the Amazon Connect IVR will use pre-recorded wav files for all the prompts, unless the prompt doesn't include a wav file name.

2.3.2 Description of Change

Record all existing prompts from Cisco CVP as wav files, so customers will still receive the same information but in a more understandable manner.

2.3.3 Wav Files

For a complete list of prompts, in both English and Spanish, please reference the attached Excel spreadsheet, Stanislaus Verbiage.

2.4 Queues

2.4.1 Overview

When a caller requests to speak to a worker, Amazon Connect will place the caller into a queue based on the selection they've made in the IVR. A queue is 'waiting area' that holds contacts to be answered by workers.

2.4.2 Description of Change

Create queues in Amazon Connect that match the Skill Groups in the Cisco Environment. The queues to be created in Amazon Connect are listed below.



Language	Queue	
English	C50_EN_CalFresh	
English	C50_EN_CalWORKs	
English	C50_EN_Clerical	_
English	C50_EN_MediCal	
English	C50_EN_Supervisor	
English	C50_EN_SPD_LTC_MediCal	
Spanish	C50_SP_CalFresh	
Spanish	C50_ SP_CalWORKs	
Spanish	C50_SP_Clerical	
Spanish	C50_SP_MediCal	
Spanish	C50_SP_Supervisor	
Spanish	C50_SP_SPD_LTC_MediCal	

2.5 Hours of Operation

2.5.1 Overview

Hours of operation define when a queue is available and may be referenced in contact flows. Hours of operation are a required component when setting up queues. Callers can reach the IVR and self-service options 24 hours a day, but workers are only available during working business hours.

2.5.2 Description of Change

Create the Hours of Operations that match the existing Open Times for the queues in Amazon Connect. Those times are Monday through Friday 8:00 AM to 5:00 PM.

2.6 Quick Connects

2.6.1 Overview

Quick connects are "speed-dials" for transferring calls between queues. If a caller connected with a worker and needs to be sent to a different queue the worker will select the queue to transfer to through their list of Quick Connects in their Call Control Panel (CCP).

2.6.2 Description of Change

Create a quick connect to match the current Phone Book entries in Cisco Finesse. This will allow workers to transfer calls between queues.

2.7 Agents

2.7.1 Overview

All workers in the Cisco contact center that handle calls will need an account in Amazon Connect. The credentials for the agent account will match the worker's C-IV application credentials.

2.7.2 Description of Change

Build an agent for all existing workers that handle calls in the Cisco Contact Center within the Amazon Connect environment. These agents will login using their C-IV application credentials. For more information please see SCR 103540.

2.8 Routing Profiles

2.8.1 Overview

A routing profile is a collection of queues that determines how contacts are routed to agents. Routing profiles are used to prioritize contacts across specific queues and manage the priority in which contacts are handled based on the queues they are routed to. An agent can only be assigned a single routing profile at a time; however, they may serve multiple queues, based on rules defined in the routing profile.

2.8.2 Description of Change

Create two routing profiles, one for English queues and one for Spanish queues. All agents created will be defaulted to the English routing profile. County work force management will have the rights to create their own routing profiles to better serve their customers.

3 OUTREACH

Onsite training will be conducted to go over the changes to the Contact Center and how end users will interact with it. The training will be broken out based on level of access to the system.

3.1 Agents

All agents in the Contact Center will be trained onsite on the differences between Cisco Finesse, and the Amazon Connect Customized Call Control Panel (CCP) [SCR 103540].

3.2 Supervisors

Supervisors will be trained onsite on the differences between Cisco Finesse, and the Amazon Connect customized CCP. They will also be trained on how to live monitor their staff and switch the state of their agents when needed.

3.3 Work Force Management

Work Force Management (WFM) will be trained onsite on the differences between Cisco Finesse and Amazon Connect customized CCP.

Training will also go over how routing profiles are created and how to create the most effective routing profiles to better serve their customers.

4 APPENDIX

- 1. Voice Biometrics will remain in place in the same capacity as it does in Cisco.
 - a. Existing Voice Prints will be usable in Amazon Connect without needing to reenroll their voice.
- 2. Stanislaus county opted to not go live with the post call survey functionality.
- 3. Courtesy Call Back functionality will remain as Stanislaus county currently has it.
 - a. Callers will be offered CCB as soon as they Call Center opens.
 - b. CCB will stop being offered at 2:00 PM each day.
- 4. Stanislaus county has the Agent Transfer contact flows, but it's the same as previous counties.
- 5. Stanislaus County has opted to remove Welfare to Work from their Benefit Information Self Service functionality.





Design Document

SCR CIV-103675 – Migrate Monterey County IVR to Amazon Connect

	DOCUMENT APPROVAL HISTORY		
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DRAFT

1 OVERVIEW

Monterey County's interactive voice response (IVR) system, currently hosted on Cisco Customer Voice Portal (CVP) and contact center software will be migrated from the Cisco Unified Contact Center Enterprise (UCCE) to the cloud-based Amazon Connect software as a service (SAAS) contact center.

1.1 Current Design

Currently all phone calls to 1-877-410-8823 are routed to the Cisco UCCE contact center software. All the software and hardware required to operate the contact center are installed in the C-IV Datacenters, and the Monterey county contact center site. Phone calls are routed through T1 PRI lines that are located at the Monterey County contact center.

1.2 Requests

- 1. Recreate the existing Call Flow (see attached) in the Amazon Connect environment.
- 2. Recreate all IVR Web Service interactions using AWS Lambda.

1.3 Overview of Recommendations

- 1. Migrate the Toll-Free Number 1-877-410-8823 to route through Amazon Connect
- 2. Record the listed prompts as way files, instead of using text to speech.
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 - This includes Voice Biometrics, and Self-Service Benefits information.
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Amazon Connect requires a phone number to route calls to agents. A new phone number can be claimed, or an existing phone number can be ported into Amazon Connect. After claiming a new phone number, or porting an existing phone number you can also choose what kinds of calls you intend to take, either inbound calls, outbound calls, or both.

2.1.2 Description of Changes

The existing phone number 1-877-410-8823 will be migrated from the vendor TPX to Amazon Connect. This is accomplished through a support ticket opened with Amazon.

Once the phone number has been ported to Amazon Connect and associated with our Connect instance, we can choose how that phone number is routed, with Contact Flows.

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A contact flow defines the customer experience with a contact center from start to finish. Contact flows have multiple template types to interact with the caller in different manners. For a visual representation of the flows, please see the attachment Visio call flow, CIV-103675 - AWS C27 Detailed Call Flow.

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When a caller dials 1-877-410-8823 they are directed to the Welcome Contact Flow. If an informational message has been enable through the remote management application, it will be played following the language selection.

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All callers are directed to the Person Lookup Lambda. Initially the caller's phone number is sent to the IVR Webservice to determine if that phone number is associated with a person that has a voice print. If the Webservice doesn't return anything, they are sent to the General Menu. If the Webservice returns a list of Pers_ID's larger than 0, we first check if the list is larger than 15. We check the size of the BVP list to keep the response time minimal when comparing voice prints. If a caller returns to the person lookup contact flow, the system will attempt to identify the caller with either their social security number or the case number.

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Callers are directed to the General menu if they do not have a voice print, or they've opted to return to this menu. Callers are offered five options on this page, calling about an existing case, listening to office hours and location, indicating you're an outside agency, calling about hearings or foster care, and general questions.

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If callers select the options to indicate they are calling about their existing case, we first check to see if that caller already failed to login with their voice. If that's true we immediately send them to the Collect Case contact flow. If that is not true we give the caller three options, login using their voice, enroll their voice, or login using their case number and IVR PIN.

2.2.6 Voice Login Menu Contact Flow

If a caller selects to login using their voice, they are asked if they would like to enter their case number or social security number. This is used to locate a pers_id to identify what voice print to compare the voice print with.

2.2.7 Collect Voice Contact Flow

If a caller is identified with their phone number by the Person Lookup Lambda, or opted to login with their voice and successfully identified themselves with their case number or social security number the system asks them to speak their passphrase, "my voice is my password, please verify me." The passphrase is streamed to the Nuance Security server to compare the passphrase with

previously enrolled voice prints. If the voice print doesn't match the previously recorded voice prints, they are eventually sent to the General Menu.

2.2.8 Collect Voice Case Lookup Contact Flow

If a caller successfully authenticates with their voice, we check if the Pers_ID that the voice print is associated with is associated with a Monterey County Case. If the lambda doesn't return an active case, they are sent back to the general menu. If the lambda returns more than one case for that Pers_ID they are asked to enter the Case number they are calling about.

2.2.9 Collect Case Contact Flow

If a caller selects to login with their case number and PIN, we first need to gather their case number to start the login process. After the caller enters their case number the system verifies that they entered seven digits.

2.2.10 Case Validation Contract Flow

If a caller successfully entered seven digits, the system verifies if that is a valid case number. If it is valid, it then checks if the caller came from the Voice Login Menu. If they didn't we send the caller to the collect PIN contact flow.

2.2.11 Collect PIN Contact Flow

Callers are asked to enter their IVR PIN to complete the login process. After they enter their four-digit PIN, the system validates that it's four digits in length, or if they entered a star (*).

2.2.12 Collect DOB Contact Flow

In the event a caller has the same IVR PIN as another member on their case, we require their date of birth to determine which person is calling. Once they enter their date of birth, we validate that it is the correct format before sending it to Login results contact flow.

2.2.13 Collect SSN Contact Flow

If a caller is requesting a new IVR PIN or are attempting to login with their voice and we didn't identify them by their calling phone number, we require they enter their social security number. Once the caller enters their SSN we validate that it's nine digits in length. If the caller presses star indicating they do not have or do not know their SSN, we check if they were requesting a new PIN. If that is true, we send the caller to an agent.

2.2.14 Login Results Contact Flow

Once a caller authenticates with either their voice or with their case number and IVR PIN, we check where to send the caller. If the caller is the primary applicant, or MediCal is active on the case and has a voice print, we send them to the case self-service menu. If a caller successfully authenticates, but are not primary and MediCal is not active, we send the caller to the Program Menu. If the caller authenticates with their case number and IVR PIN, and there is a duplicate PIN on that case, we send the caller to the Collect DOB contact flow. If the caller has failed to login three times, we send them to the No PIN Program Menu. If a caller successfully authenticates (primary or not), and they do not have a voice print enrolled, we send them to the Voice Enroll Menu.

2.2.15 Voice Enroll Menu Contact Flow

If a caller opted into enrolling their voice from the login menu contact flow they are informed that they will need their case number and IVR PIN. If they successfully logged in, but did not have a voice print we check if their BVP_Code equals "P". If that is the case, we delete the voice print associated with the pers_id. If their BVP_Code does not match Y or P, the system attempts to delete any possible voice recording for the caller in case they successfully record one or two voice prints, but didn't complete the enrollment process with three recordings.

2.2.16 Voice Enroll Contact Flow

Once a caller opts into enrolling their voice print, we ask them to state the phrase "My voice is my password, please verify me" three times. Between each recording we check the quality of the recording and let the caller know if the recording isn't high enough quality. After a total of six failed attempts, across all recording attempts, the enrollment process is abandoned, and the caller is sent to the next menu.

2.2.17 Program Menu Contact Flow

If a caller that is calling about an existing case but fails to successfully authenticate, or opts to skip the authentication process, they are asked about the program and purpose of their call today to assist the agent with that call. If the caller successfully authenticated and requested to speak to an agent the caller is given the same set of options, but also has the option to go back to the Case Self Service Menu.

2.2.18 No PIN Program Menu Contact Flow

When a caller indicates that they are calling about an existing case but does not authenticate, they are given the option to request a new IVR PIN, or to indicate the program they are calling about.

2.2.19 Program Menu Agent Service Contact Flow

After a caller selects what program they are calling about, they are given the same set of options to indicate what they need help with. This information is passed onto the worker. If the caller indicates they wish to return to the previous menu, we check which path they took to get here.

2.2.20 No Case Service Contact Flow

If a caller selects the option for all other questions from the general menu, they are sent here. The caller is presented with three options to move forward in the contact flow.

2.2.21 No Case General Contact Flow

If a caller indicated they are interested in applying for benefits, they are given two options to proceed.

2.2.22 Office Info Contact Flow

Callers are asked to select what office they would like to hear the information for. They can select either Salinas, Sea Side, or King City.

2.2.23 New PIN Contact Flow

If a caller selects the option to request a new PIN they are first sent to the Collect SSN contact flow. Once they return from the collect SSN, they system attempts to request a new PIN.

2.2.24 Case Self Service Menu Contact Flow

If a caller successfully authenticates, through their voice or case number and PIN, they are given options to access the self-service options.

2.2.25 Get Dynamic Benefits Menu Contact Flow

This lambda call calculates how many programs are active on the case they logged in with. If only one program is active they are sent to the 3 options menu, to allow the caller to select that program plus option 7 to repeat and option 8 to return to the previous menu. The total number of programs that can be active on a single case that the IVR can play information on is four.

2.2.26 Dynamic Benefits Information Menu Contact Flow

If a caller selects to hear their benefit information, they are sent to a menu to select what program they would like to hear the information for. The menu is dynamic and only offers the caller to listen to programs that the IVR has information for. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.27 CalWORKs Benefits Information Contact Flow

If a caller selects to hear their CalWORKs program information, they hear all relevant information on their CalWORKs program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.28 CalFresh Benefits Information Contact Flow

If a caller selects to hear their CalFresh program information, they hear all relevant information on their CalFresh program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.29 MediCal Benefits Information Contact Flow

If a caller selects to hear their MediCal program information, they hear all relevant information for all members on the case for their MediCal program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.30 Welfare to Work Benefits Information Contact Flow

If a caller selects to hear their Welfare to Work program information, they are played the status of the program. The system then checks if there are any pending activities. If there are, they are played, if not the caller is sent to the WTW Reimbursements contact flow.

2.2.31 Welfare to Work Reimbursement Contact Flow

After listening to their program status, the system then checks if callers have any reimbursements to report to the caller. If the they do not have any reimbursements on their case, the caller is sent to the WTW End Menu.

2.2.32 Welfare to Work End Menu Contact Flow

After listening to their welfare to work benefit information, callers are given an option to speak to a worker. If they choose this option the system will determine if the case worker's phone number is available. If it is available the system will transfer the caller to their desk phone. If it is not available it will transfer to a static phone number.

2.2.33 Document Request Contact Flow

If the caller selects the option to request a form, the system will determine how many forms are on file that will be offered. If there are no forms on file they will be sent to the three options menu, as the GEN 2000 form is always able to be requested.

2.2.34 Dynamic Document Request Contact Flow

After determining how many forms are available to be requested, the caller is given an option to request up to three forms, the GEN 2000, the SAR 7, and the TMC status report, depending on how many forms are available. This menu is dynamic and will only play the options available on the case. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.35 Document Request Resend Forms Contact Flow

If a caller requests either the SAR 7 or the TMC Status report, the system attempts to resend the selected form to the caller's address on file. If it is successful, the caller is given the option to request another form or return to the case self-service menu. If it fails, the caller is given the options to speak to a worker, or return the case self-service menu.

2.2.36 Document Request GEN 2000 Form Contact Flow

If the caller requests the GEN 2000 to be sent, the system attempts to generate the GEN 2000. If it is successful they inform the user that it will be mailed to their address on file or accessible through C4Yourself.com if their case is associate to their account. They are then given the option to request another form, or return to the case self-service menu. If the request is a failure the caller is given the option to speak to a work, or return to the case self-service menu.

2.2.37 Document Status Contact Flow

If the caller requested to listen to their document status, the system first checks to see if they have any forms on file. If they don't, they are returned to the case self-service menu. If they have greater than zero forms on file, the system checks to see how many they have, then sends it to the correct dynamic menu based on the amount of forms they have.

2.2.38 Dynamic Document Status Contact Flow

If the caller has one or more forms on file, they are given a list of forms to listen to choose from. For the CalFresh, CalWORKs, or CalWORKs CalFresh redetermination packets, only one will ever be given as an option. In the unlikely event that more than one of those three are on the case, the CalWORKs CalFresh redetermination packet takes president. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.39 Check Document Status Contact Flow

After the caller selects what documents they want to hear the status of, they are given the information based on what the status of their document is. After the information is played, the caller is given the option to check the status of another document, or speak to a worker. If they wish to speak to a worker, they will be given the exit reason that aligns with the document status they just listened to.

2.2.40 Change PIN Contact Flow

If a user requests to change their IVR PIN from the case self-service menu they are asked to enter a new PIN that meets the security requirements. If the change is successful they are returned to the case self-service menu. If it fails the caller is sent to a worker.

2.2.41 Exit Reasons Contact Flow

If the caller requests to speak to a worker, or are directed to a worker for another reason such as an error, it is determined what queue to route the call to based on the exit code. The exit codes are applied throughout all the contact flows right before it sends the caller to the exit reasons contact flow. Exit codes 0088, and 0099 are both released after playing a brief message. Several other exit codes are sent to the same queue.

2.2.42 Queue Transfer Contact Flow

Once callers are set to the correct working queue, we then proceed to check if the contact center is currently open. If the contact center is open a message is played informing the user to wait for the next available worker.

2.2.43 Customer Queue Contact Flow

If an agent is not currently in the Ready status, the caller is placed into a queue. All calls are answered in the order that they were received, and they hear music and informational messages while they wait for the next available agent. If the queue is backed up enough to where the longest call in queue is greater than 10 minutes, we will offer the caller courtesy call back.

2.3 Prompts

2.3.1 Overview

Amazon Connect has the option to upload WAV files to play messages to the caller, or use the built in Text-To Speech service. To present a better experience, the Amazon Connect IVR will use pre-recorded wav files for all the prompts, unless the prompt doesn't include a wav file name.

2.3.2 Description of Change

Record all existing prompts from Cisco CVP as wav files, so customers will still receive the same information but in a more understandable manner.

2.3.3 Wav Files

For a complete list of prompts, in both English and Spanish, please reference the attached Excel spreadsheet, Monterey Verbiage.

2.4 Queues

2.4.1 Overview

When a caller requests to speak to a worker, Amazon Connect will place the caller into a queue based on the selection they've made in the IVR. A queue is 'waiting area' that holds contacts to be answered by workers.

2.4.2 Description of Change

Create queues in Amazon Connect that match the Skill Groups in the Cisco Environment. The queues to be created in Amazon Connect are listed below.



Language	Queue		
English	C27_EN_CalFresh		
English	C27_EN_General		
English	C27_EN_MediCal		
English	C27_EN_E_Specialist		
English	C27_EN_Thirdparty		
Spanish	C27_SP_CalFresh		
Spanish	C27_SP_General		
Spanish	C27_SP_MediCal		
Spanish	C27_SP_E_Specialist		
Spanish	C27_SP_Thirdparty		
Spanish	C27_SP_CalFresh		
N/A	C27_CSC_Unit_E2		
N/A	C27_CSC_Unit_R1		

2.5 Hours of Operation

2.5.1 Overview

Hours of operation define when a queue is available and may be referenced in contact flows. Hours of operation are a required component when setting up queues. Callers can reach the IVR and self-service options 24 hours a day, but workers are only available during working business hours.

2.5.2 Description of Change

Create the Hours of Operations that match the existing Open Times for the queues in Amazon Connect. Those times are Monday through Friday 8:00 AM to 5:00 PM.

2.6 Quick Connects

2.6.1 Overview

Quick connects are "speed-dials" for transferring calls between queues. If a caller connected with a worker and needs to be sent to a different queue the worker will select the queue to transfer to through their list of Quick Connects in their Call Control Panel (CCP).

2.6.2 Description of Change

Create a quick connect to match the current Phone Book entries in Cisco Finesse. This will allow workers to transfer calls between queues.

2.7 Agents

2.7.1 Overview

All workers in the Cisco contact center that handle calls will need an account in Amazon Connect. The credentials for the agent account will match the worker's C-IV application credentials.

2.7.2 Description of Change

Build an agent for all existing workers that handle calls in the Cisco Contact Center within the Amazon Connect environment. These agents will login using their C-IV application credentials. For more information please see SCR 103540.

2.8 Routing Profiles

2.8.1 Overview

A routing profile is a collection of queues that determines how contacts are routed to agents. Routing profiles are used to prioritize contacts across specific queues and manage the priority in which contacts are handled based on the queues they are routed to. An agent can only be assigned a single routing profile at a time; however, they may serve multiple queues, based on rules defined in the routing profile.

2.8.2 Description of Change

Create two routing profiles, one for English queues and one for Spanish queues. All agents created will be defaulted to the English routing profile. County work force management will have the rights to create their own routing profiles to better serve their customers.

3 OUTREACH

Onsite training will be conducted to go over the changes to the Contact Center and how end users will interact with it. The training will be broken out based on level of access to the system.

3.1 Agents

All agents in the Contact Center will be trained onsite on the differences between Cisco Finesse, and the Amazon Connect Customized Call Control Panel (CCP) [SCR 103540].

3.2 Supervisors

Supervisors will be trained onsite on the differences between Cisco Finesse, and the Amazon Connect customized CCP. They will also be trained on how to live monitor their staff and switch the state of their agents when needed.

3.3 Work Force Management

Work Force Management (WFM) will be trained onsite on the differences between Cisco Finesse and Amazon Connect customized CCP.

Training will also go over how routing profiles are created and how to create the most effective routing profiles to better serve their customers.
4 APPENDIX

- 1. Voice Biometrics will remain in place in the same capacity as it does in Cisco.
 - a. Existing Voice Prints will be usable in Amazon Connect without needing to reenroll their voice.
- 2. Courtesy Call Back functionality will be added to Monterey county.
 - a. Callers will be offered starting at 9AM, once there is a call in that exceeds 10 minutes.
 - b. CCB will stop being offered at 3:00 PM each day.
- 3. Monterey county has the Agent Transfer contact flows, but it's the same as previous counties.



Design Document

SCR CIV-103676 – Migrate Kings County IVR to Amazon Connect

	DOCUMENT APPROVAL HISTORY	
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DRAFT

1 OVERVIEW

Kings County's interactive voice response (IVR) system, currently hosted on Cisco Customer Voice Portal (CVP) and contact center software will be migrated from the Cisco Unified Contact Center Enterprise (UCCE) to the cloud-based Amazon Connect software as a service (SAAS) contact center.

1.1 Current Design

Currently all phone calls to 1-877-410-8813 are routed to the Cisco UCCE contact center software. All the software and hardware required to operate the contact center are installed in the C-IV Datacenters, and the Kings county contact center site. Phone calls are routed through T1 PRI lines that are located at the Kings County contact center.

1.2 Requests

- 1. Recreate the existing Call Flow (see attached) in the Amazon Connect environment.
- 2. Recreate all IVR Web Service interactions using AWS Lambda.

1.3 Overview of Recommendations

- 1. Migrate the Toll-Free Number 1-877-410-8813 to route through Amazon Connect
- 2. Record the listed prompts as way files, instead of using text to speech.
- 3. Migrate the CVP IVR from Cisco to Amazon Connect.
- 4. Recreate existing Cisco Skill Groups as Amazon Connect queues.
- 5. Update the Amazon Connect Hours of Operations to match the existing Contact Center Open Hours.
- 6. Recreate all Finesse Phone Book Entries as Quick Connects
- 7. Import all existing agents from Cisco environments as Agents in Amazon Connect.
- 8. Create Routing Profiles for both English and Spanish queues.

1.4 Assumptions

- All existing IVR functionality will carry over from Cisco to Amazon Connect
 - This includes Voice Biometrics, and Self-Service Benefits information.
 - This also includes the new functionality not currently available in Cisco, Professional Voice Talent.

2 RECOMMENDATIONS

2.1 Phone Numbers

2.1.1 Overview

Amazon Connect requires a phone number to route calls to agents. A new phone number can be claimed, or an existing phone number can be ported into Amazon Connect. After claiming a new phone number, or porting an existing phone number you can also choose what kinds of calls you intend to take, either inbound calls, outbound calls, or both.

2.1.2 Description of Changes

The existing phone number 1-877-410-8813 will be migrated from the vendor TPX to Amazon Connect. This is accomplished through a support ticket opened with Amazon.

Once the phone number has been ported to Amazon Connect and associated with our Connect instance, we can choose how that phone number is routed, with Contact Flows.

2.2 Contact Flows

2.2.1 Overview

A contact flow defines the customer experience with a contact center from start to finish. Contact flows have multiple template types to interact with the caller in different manners. For a visual representation of the flows, please see the attachment Visio call flow, CIV-103676 - AWS C16 Detailed Call Flow.

2.2.2 Welcome Contact Flow

When a caller dials 1-877-410-8813 they are directed to the Welcome Contact Flow. If an informational message has been enable through the remote management application, it will be played following the language selection.

2.2.3 Person Lookup Contact Flow

All callers are directed to the Person Lookup Lambda. Initially the caller's phone number is sent to the IVR Webservice to determine if that phone number is associated with a person that has a voice print. If the Webservice doesn't return anything, they are sent to the General Menu. If the Webservice returns a list of Pers_ID's larger than 0, we first check if the list is larger than 15. We check the size of the BVP list to keep the response time minimal when comparing voice prints. If a caller returns to the person lookup contact flow, the system will attempt to identify the caller with either their social security number or the case number.

2.2.4 General Menu Contact Flow

Callers are directed to the General menu if they do not have a voice print, or they've opted to return to this menu. Callers are offered three options on this page, calling about an existing case, listening to office hours and location, and general questions.

2.2.5 Login Menu Contact Flow

If callers select the options to indicate they are calling about their existing case, we first check to see if that caller already failed to login with their voice. If that's true we immediately send them to the Collect Case contact flow. If that is not true we give the caller three options, login using their voice, enroll their voice, or login using their case number and IVR PIN.

2.2.6 Voice Login Menu Contact Flow

If a caller selects to login using their voice, they are asked if they would like to enter their case number or social security number. This is used to locate a pers_id to identify what voice print to compare the voice print with.

2.2.7 Collect Voice Contact Flow

If a caller is identified with their phone number by the Person Lookup Lambda, or opted to login with their voice and successfully identified themselves with their case number or social security number the system asks them to speak their passphrase, "my voice is my password, please verify me." The passphrase is streamed to the Nuance Security server to compare the passphrase with previously enrolled voice prints. If the voice print doesn't match the previously recorded voice prints, they are eventually sent to the General Menu.

2.2.8 Collect Voice Case Lookup Contact Flow

If a caller successfully authenticates with their voice, we check if the Pers_ID that the voice print is associated with is associated with a Kings County Case. If the lambda doesn't return an active case, they are sent back to the general menu. If the lambda returns more than one case for that Pers_ID they are asked to enter the Case number they are calling about.

2.2.9 Collect Case Contact Flow

If a caller selects to login with their case number and PIN, we first need to gather their case number to start the login process. After the caller enters their case number the system verifies that they entered seven digits.

2.2.10 Case Validation Contract Flow

If a caller successfully entered seven digits, the system verifies if that is a valid case number. If it is valid, it then checks if the caller came from the Voice Login Menu. If they didn't we send the caller to the collect PIN contact flow.

2.2.11 Collect PIN Contact Flow

Callers are asked to enter their IVR PIN to complete the login process. After they enter their four-digit PIN, the system validates that it's four digits in length, or if they entered a star (*).

2.2.12 Collect DOB Contact Flow

In the event a caller has the same IVR PIN as another member on their case, we require their date of birth to determine which person is calling. Once they enter their date of birth, we validate that it is the correct format before sending it to Login results contact flow.

2.2.13 Collect SSN Contact Flow

If a caller is requesting a new IVR PIN or are attempting to login with their voice and we didn't identify them by their calling phone number, we require they enter their social security number. Once the caller enters their SSN we validate that it's nine digits in length. If the caller presses star indicating they do not have or do not know their SSN, we check if they were requesting a new PIN. If that is true, we send the caller to an agent.

2.2.14 Login Results Contact Flow

Once a caller authenticates with either their voice or with their case number and IVR PIN, we check where to send the caller. If the caller is the primary applicant, or MediCal is active on the case and has a voice print, we send them to the

case self-service menu. If a caller successfully authenticates, but are not primary and MediCal is not active, we send the caller to the Program Menu. If the caller authenticates with their case number and IVR PIN, and there is a duplicate PIN on that case, we send the caller to the Collect DOB contact flow. If the caller has failed to login three times, we send them to the No PIN Program Menu. If a caller successfully authenticates (primary or not), and they do not have a voice print enrolled, we send them to the Voice Enroll Menu.

2.2.15 Voice Enroll Menu Contact Flow

If a caller opted into enrolling their voice from the login menu contact flow they are informed that they will need their case number and IVR PIN. If they successfully logged in, but did not have a voice print we check if their BVP_Code equals "P". If that is the case, we delete the voice print associated with the pers_id. If their BVP_Code does not match Y or P, the system attempts to delete any possible voice recording for the caller in case they successfully record one or two voice prints, but didn't complete the enrollment process with three recordings.

2.2.16 Voice Enroll Contact Flow

Once a caller opts into enrolling their voice print, we ask them to state the phrase "My voice is my password, please verify me" three times. Between each recording we check the quality of the recording and let the caller know if the recording isn't high enough quality. After a total of six failed attempts, across all recording attempts, the enrollment process is abandoned, and the caller is sent to the next menu.

2.2.17 Program Menu Contact Flow

If a caller that is calling about an existing case but fails to successfully authenticate, or opts to skip the authentication process, they are asked about the program and purpose of their call today to assist the agent with that call. If the caller successfully authenticated and requested to speak to an agent the caller is given the same set of options, but also has the option to go back to the Case Self Service Menu.

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When a caller indicates that they are calling about an existing case but does not authenticate, they are given the option to request a new IVR PIN, or to indicate the program they are calling about.

2.2.19 Program Menu Agent Service Contact Flow

After a caller selects what program they are calling about, they are given the same set of options to indicate what they need help with. This information is passed onto the worker. If the caller indicates they wish to return to the previous menu, we check which path they took to get here.

2.2.20 No Case Service Contact Flow

If a caller selects the option for all other questions from the general menu, they are sent here. The caller is presented with three options to move forward in the contact flow.

2.2.21 No Case General Contact Flow

If a caller indicated they are interested in applying for benefits, they are given two options to proceed.

2.2.22 No Case Program Contact Flow

If a caller indicated they're an outside Government agency or are interested in general question, they are sent to this contact flow. Callers are asked to indicate the program they are calling about before being sent to an agent.

2.2.23 Office Info Contact Flow

All callers are given the same office information, then given the option to hear it again or go back to the previous menu.

2.2.24 New PIN Contact Flow

If a caller selects the option to request a new PIN they are first sent to the Collect SSN contact flow. Once they return from the collect SSN, they system attempts to request a new PIN.

2.2.25 Case Self Service Menu Contact Flow

If a caller successfully authenticates, through their voice or case number and PIN, they are given options to access the self-service options.

2.2.26 Get Dynamic Benefits Menu Contact Flow

This lambda call calculates how many programs are active on the case they logged in with. If only one program is active they are sent to the 3 options menu, to allow the caller to select that program plus option 7 to repeat and option 8 to return to the previous menu. The total number of programs that can be active on a single case that the IVR can play information on is four.

2.2.27 Dynamic Benefits Information Menu Contact Flow

If a caller selects to hear their benefit information, they are sent to a menu to select what program they would like to hear the information for. The menu is dynamic and only offers the caller to listen to programs that the IVR has information for. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.28 CalWORKs Benefits Information Contact Flow

If a caller selects to hear their CalWORKs program information, they hear all relevant information on their CalWORKs program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.29 CalFresh Benefits Information Contact Flow

If a caller selects to hear their CalFresh program information, they hear all relevant information on their CalFresh program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.30 MediCal Benefits Information Contact Flow

If a caller selects to hear their MediCal program information, they hear all relevant information for all members on the case for their MediCal program. Once played, they are given the option to speak to a worker if they have questions on the information that was given to them.

2.2.31 Welfare to Work Benefits Information Contact Flow

If a caller selects to hear their Welfare to Work program information, they are played the status of the program. The system then checks if there are any pending activities. If there are, they are played, if not the caller is sent to the WTW Reimbursements contact flow.

2.2.32 Welfare to Work Reimbursement Contact Flow

After listening to their program status, the system then checks if callers have any reimbursements to report to the caller. If the they do not have any reimbursements on their case, the caller is sent to the WTW End Menu.

2.2.33 Welfare to Work End Menu Contact Flow

After listening to their welfare to work benefit information, callers are given an option to speak to a worker. If they choose this option the system will determine if the case worker's phone number is available. If it is available the system will transfer the caller to their desk phone. If it is not available it will transfer to a static phone number.

2.2.34 Document Request Contact Flow

If the caller selects the option to request a form, the system will determine how many forms are on file that will be offered. If there are no forms on file they will be sent to the three options menu, as the GEN 2000 form is always able to be requested.

2.2.35 Dynamic Document Request Contact Flow

After determining how many forms are available to be requested, the caller is given an option to request up to three forms, the GEN 2000, the SAR 7, and the TMC status report, depending on how many forms are available. This menu is dynamic and will only play the options available on the case. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.36 Document Request Resend Forms Contact Flow

If a caller requests either the SAR 7 or the TMC Status report, the system attempts to resend the selected form to the caller's address on file. If it is successful, the caller is given the option to request another form or return to the case self-service menu. If it fails, the caller is given the options to speak to a worker, or return the case self-service menu.

2.2.37 Document Request GEN 2000 Form Contact Flow

If the caller requests the GEN 2000 to be sent, the system attempts to generate the GEN 2000. If it is successful they inform the user that it will be mailed to their address on file or accessible through C4Yourself.com if their case is associate to their account. They are then given the option to request another form, or return to the case self-service menu. If the request is a failure the caller is given the option to speak to a work, or return to the case self-service menu.

2.2.38 Document Status Contact Flow

If the caller requested to listen to their document status, the system first checks to see if they have any forms on file. If they don't, they are returned to the case self-service menu. If they have greater than zero forms on file, the system checks to see how many they have, then sends it to the correct dynamic menu based on the amount of forms they have.

2.2.39 Dynamic Document Status Contact Flow

If the caller has one or more forms on file, they are given a list of forms to listen to choose from. For the CalFresh, CalWORKs, or CalWORKs CalFresh redetermination packets, only one will ever be given as an option. In the unlikely event that more than one of those three are on the case, the CalWORKs CalFresh redetermination packet takes president. The dynamic menu will ignore selections that do not match any available selections until after all menu options have been played. There is a two second pause between each menu option where callers can select what they are calling about, but any other selection will just move them to the next menu option. Only on the final selection will it play the No Match prompt.

2.2.40 Check Document Status Contact Flow

After the caller selects what documents they want to hear the status of, they are given the information based on what the status of their document is. After the information is played, the caller is given the option to check the status of another document, or speak to a worker. If they wish to speak to a worker, they will be given the exit reason that aligns with the document status they just listened to.

2.2.41 Change PIN Contact Flow

If a user requests to change their IVR PIN from the case self-service menu they are asked to enter a new PIN that meets the security requirements. If the change is successful they are returned to the case self-service menu. If it fails the caller is sent to a worker.

2.2.42 Exit Reasons Contact Flow

If the caller requests to speak to a worker, or are directed to a worker for another reason such as an error, it is determined what queue to route the call to based on the exit code. The exit codes are applied throughout all the contact flows right before it sends the caller to the exit reasons contact flow. Exit codes 0088, and 0099 are both released after playing a brief message. Several other exit codes are sent to the same queue.

2.2.43 Queue Transfer Contact Flow

Once callers are set to the correct working queue, we then proceed to check if the contact center is currently open. If the contact center is open a message is played informing the user to wait for the next available worker.

2.2.44 Customer Queue Contact Flow

If an agent is not currently in the Ready status, the caller is placed into a queue. All calls are answered in the order that they were received, and they hear music and informational messages while they wait for the next available agent. If the queue is backed up enough to where the longest call in queue is greater than 10 minutes, we will offer the caller courtesy call back.

2.3 Prompts

2.3.1 Overview

Amazon Connect has the option to upload WAV files to play messages to the caller, or use the built in Text-To Speech service. To present a better experience, the Amazon Connect IVR will use pre-recorded wav files for all the prompts, unless the prompt doesn't include a wav file name.

2.3.2 Description of Change

Record all existing prompts from Cisco CVP as wav files, so customers will still receive the same information but in a more understandable manner.

2.3.3 Wav Files

For a complete list of prompts, in both English and Spanish, please reference the attached Excel spreadsheet, Kings Verbiage.

2.4 Queues

2.4.1 Overview

When a caller requests to speak to a worker, Amazon Connect will place the caller into a queue based on the selection they've made in the IVR. A queue is 'waiting area' that holds contacts to be answered by workers.

2.4.2 Description of Change

Create queues in Amazon Connect that match the Skill Groups in the Cisco Environment. The queues to be created in Amazon Connect are listed below.



Language	Queue	
English	C16_EN_CalFresh	
English	C16_EN_CalWORKs	
English	C16_EN_EW3	
English	C16_EN_General	
English	C16_EN_ MediCal	
English	C16_EN_Supervisor	
Spanish	C16_SP_CalFresh	
Spanish	C16_SP_CalWORKs	
Spanish	C16_SP_EW3	
Spanish	C16_SP_General	
Spanish	C16_SP_ MediCal	1
Spanish	C16_SP_Supervisor	

2.5 Hours of Operation

2.5.1 Overview

Hours of operation define when a queue is available and may be referenced in contact flows. Hours of operation are a required component when setting up queues. Callers can reach the IVR and self-service options 24 hours a day, but workers are only available during working business hours.

2.5.2 Description of Change

Create the Hours of Operations that match the existing Open Times for the queues in Amazon Connect. Those times are Monday through Friday 8:00 AM to 4:30 PM.

2.6 Quick Connects

2.6.1 Overview

Quick connects are "speed-dials" for transferring calls between queues. If a caller connected with a worker and needs to be sent to a different queue the worker will select the queue to transfer to through their list of Quick Connects in their Call Control Panel (CCP).

2.6.2 Description of Change

Create a quick connect to match the current Phone Book entries in Cisco Finesse. This will allow workers to transfer calls between queues.

2.7 Agents

2.7.1 Overview

All workers in the Cisco contact center that handle calls will need an account in Amazon Connect. The credentials for the agent account will match the worker's C-IV application credentials.

2.7.2 Description of Change

Build an agent for all existing workers that handle calls in the Cisco Contact Center within the Amazon Connect environment. These agents will login using their C-IV application credentials. For more information please see SCR 103540.

2.8 Routing Profiles

2.8.1 Overview

A routing profile is a collection of queues that determines how contacts are routed to agents. Routing profiles are used to prioritize contacts across specific queues and manage the priority in which contacts are handled based on the queues they are routed to. An agent can only be assigned a single routing profile at a time; however, they may serve multiple queues, based on rules defined in the routing profile.

2.8.2 Description of Change

Create two routing profiles, one for English queues and one for Spanish queues. All agents created will be defaulted to the English routing profile. County work force management will have the rights to create their own routing profiles to better serve their customers.

3 OUTREACH

Onsite training will be conducted to go over the changes to the Contact Center and how end users will interact with it. The training will be broken out based on level of access to the system.

3.1 Agents

All agents in the Contact Center will be trained onsite on the differences between Cisco Finesse, and the Amazon Connect Customized Call Control Panel (CCP) [SCR 103540].

3.2 Supervisors

Supervisors will be trained onsite on the differences between Cisco Finesse, and the Amazon Connect customized CCP. They will also be trained on how to live monitor their staff and switch the state of their agents when needed.

3.3 Work Force Management

Work Force Management (WFM) will be trained onsite on the differences between Cisco Finesse and Amazon Connect customized CCP.

Training will also go over how routing profiles are created and how to create the most effective routing profiles to better serve their customers.

4 APPENDIX

- 1. Voice Biometrics will remain in place in the same capacity as it does in Cisco.
 - a. Existing Voice Prints will be usable in Amazon Connect without needing to reenroll their voice.
- 2. Kings County opted to not go live with Courtesy Call Back functionality.
- 3. Kings county has the Agent Transfer contact flows, but it's the same as previous counties.
- 4. Kings County has opted to go live with Post Call Survey, but it's a global contact flow and there are no changes.

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