CalSAWS

California Statewide Automated Welfare System

Design Document

CA-48397 | DDID 1967 | DDCR 4087

Generate the CW 10 when EDBC fails for a Withdrawal Reason

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Rainier Dela Cruz
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/06/2019	1.0	Initial Revision	Rainier Dela Cruz

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1 OVERVIEW

1.1 Current Design

The CW 10 – Notice of Withdrawn Application form is sent out to inform the applicant that they have withdrawn their application. In C-IV, when the EDBC fails for 'Written Withdrawal' or 'Verbal Withdrawal', the CW 10 form generates and is sent out to the applicant. Currently, CalSAWS does not have this functionality to generate the CW 10 when the EDBC fails for one of the withdrawal reasons.

1.2 Requests

Migrate the C-IV functionality to generate the CW 10 form when the EDBC fails for 'Written Withdrawal' or 'Verbal Withdrawal'.

1.3 Overview of Recommendations

1. Add the CW 10 based on the automated C-IV version that will generate through EDBC. It will not be available from the Template Repository.
2. Add the functionality to generate the CW 10 after the EDBC is saved when all the following is true:
    a. The program type is CalFresh or CalWORKs.
    b. The program status is 'Denied'.
    c. The program status reason is 'Written Withdrawal' or 'Verbal Withdrawal'.
3. Update the logic to suppress the written withdrawal or verbal withdrawal reason fragments from generating on the Notice of Action (NOA) when EDBC fails for 'Written Withdrawal' or 'Verbal Withdrawal'.

1.4 Assumptions

1. When generating the CW 10 from Template Repository, it will use the existing form in CalSAWS.

2 RECOMMENDATIONS

2.1 CW 10 Form and Generation Logic

2.1.1 Overview

This section will cover the changes necessary to update the CalSAWS functionality to dynamically generate the CW 10 when EDBC is saved. A new CW 10 form (based on the automated C-IV form) will be added and will generate through EDBC when it fails for 'Written Withdrawal' or 'Verbal Withdrawal'.

Form: CW 10 (07/01)
Program: CalFresh, CalWORKs
Forms Category: Forms
Languages: English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese
**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.1.2 Description of Change

1. Create a new CW 10 form in CalSAWS that generates after saving the EDBC. The form will use the standard CalSAWS header.
    Form Title: Notice of Withdrawn Application
    Form Number: CW 10
    Include NA Back 9: No
    Print Options: Use the existing print options when generating existing form when EDBC is saved.
    Imaging Barcode: The imaging barcode will be addressed by a separate DDID (**DDID 2302).**
    Spanish Translation: Please refer to **Section 3.0 – Supporting Document #2**.
    Threshold Translation: Please refer to **Section 3.0 – Supporting Document #5**
    Form Mockups: Please refer to **Section 3.0 – Supporting Document #1**.
    Form Examples:
    - For an example of the CW 10 when the program type is CalFresh, please refer to **Section 3.0 – Supporting Document #3**.
    - For an example of the CW 10 when the program type is CalWORKs, please refer to **Section 3.0 – Supporting Document #4**.
2. Make the new form unavailable from Template Repository.
3. Generate the CW 10 after the EDBC is saved when all the following is true:
    a. The program type is CalFresh or CalWORKs.

   b. The program status is ‘Denied’.
   c. The program status reason is ‘Written Withdrawal’ or ‘Verbal Withdrawal’.
4. Populate the CW 10 form as follows:

Variable	Description	Population
EffectiveDate	The effective date of the action.	The variable will be populated with the date the denial action was taken. The format will be MM DD, YYYY (ex. July 26, 2019).
ProgramType	The name of the program.	The variable will be populated with the name of the program.

2.2 Update Withdrawal Reason Fragment Generation Logic

2.2.1 Overview

This section will cover the changes necessary to suppress the written withdrawal reason fragment and the verbal withdrawal reason fragment from generating on the NOA when the EDBC fails for ‘Written Withdrawal’ or ‘Verbal Withdrawal’.

2.2.2 Description of Changes

1. Update generation logic for the Written Withdrawal reason fragment to not generate on the NOA when all the following is true:
   a. The program type is CalFresh or CalWORKs.
   b. The program status is ‘Denied’.
   c. The program status reason is ‘Written Withdrawal’.
2. Update the generation logic for the Verbal Withdrawal reason fragment to not generate on the NOA when all the following is true:
   a. The program type is CalFresh or CalWORKs.
   b. The program status is ‘Denied’.
   c. The program status reason is ‘Verbal Withdrawal’.

3 SUPPORTING DOCUMENTS

Note: The mockups and examples currently shows how the CW 10 is generated in C-IV. When the functionality is migrated over, the CW will use the standard CalSAWS header and address locations.

Number	Functional Area	Description	Attachment
1	Client Correspondence	CW 10 English Mockup	CW 10 English Mockup.pdf
2	Client Correspondence	CW 10 Spanish Mockup	CW 10 Spanish Mockup.pdf
3	Client Correspondence	CW 10 CalFresh Example	CW 10 CalFresh Example.pdf
4	Client Correspondence	CW 10 CalWORKs Example	CW 10 CalWORKs Example.pdf
5	Client Correspondence	CW 10 Threshold Language Mockups	CW 10 Threshold Language Mockups.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	• Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	The logic to generate the CW 10 through EDBC is added.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200450 | DDID 1967 | DDCR 4016

Apply New Young Child Exemption to E2Lite

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nicholas Trusso
	Reviewed By	Yale Yee, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/2/2019	1.0	Initial Document	Nicholas Trusso

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1 OVERVIEW

The WPR (Work Participation Rate) Sample Detail page for an individual contains questions that are answered automatically based on certain criteria. Question 30, 'Was the head-of-household/adult verifiably exempt from participation in CalWORKs WTW activities in the review month?' of the WPR Sample Detail page, is answered based on a status reason of the WTW (Welfare to Work) exemption.

1.1 Current Design

Question 30 on the WPR Sample is answered based on the status reason of the WTW exemption.

Question 30 on the WPR Sample is answered No when the user selects a WTW status reason of 'Care of a child 23 months or younger'.

1.2 Requests

Per DDCR 4016, update the WPR Sample to set the answer to Question 30 as Yes when the 'Care of a child 23 months or younger' WTW status reason is selected on the Work Registration Detail page.

1.3 Overview of Recommendations

Update the WPR Sample to set the answer to question 30 as Yes when the 'Care of a child 23 months or younger' WTW status reason is selected.

1.4 Assumptions

N/A

2 RECOMMENDATIONS

Question 30 will be marked as Yes when the status reason 'Care of a child 23 months or younger' is selected on the Work Registration Detail page.

2.1 Question 30 of the WPR Sample Detail page

2.1.1 Overview

Question 30 will be marked as Yes when the status reason 'Care of a child 23 months or younger' is selected on the Work Registration Detail page.

2.1.2 Description of Change

1. Update the WPR Sample to set the answer to Question 30, 'Was the head-of-household/adult verifiably exempt from participation in CalWORKs WTW activities in the review month?', as Yes when the 'Care of a child 23 months or younger' WTW status reason is selected on the Work Registration Detail page.

   Note: The status of the WTW exemption is 'Exempt.'

2.1.3 Page Location

- **Global:** Special Units
- **Local:** WPR Sample
- **Task:** WPR Sample Detail

2.1.4 Programs Impacted

WTW, CW REP

2.1.5 Performance Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	The WPR Sample sets the answer to Question 30 as Yes when the 'Care of a child 23 months or younger' WTW status reason is selected on the Work Registration Detail page.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200958 | DDID 1967 | DDCR 3071
Add Validation to New / Reapplication Detail

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Tom Lazio
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/29/2019	1.0	Initial Draft	T. Lazio
01/28/2020	2.0	Updated formatting in Section 2.1.4 per ClearBest	Linda Zeng

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1 OVERVIEW

A validation will be added on the New / Reapplication Detail page and a validation message will display when users click the 'Save and Return' button for denied or discontinued members that are already Active in the future.

1.1 Current Design

Currently CalSAWS allows for reapplication of a member that has a current status of 'Denied' or 'Discontinued' when they are active for future months without any validation message appearing on the New / Reapplication Detail page.

1.2 Requests

Per DDCR 3071, migrate the functionality from C-IV SCR 51921 to add a validation to the New / Reapplication Detail page in order to prevent users from processing reapplications for members with a current status of 'Denied' or 'Discontinued' who are already Active in a future month.

1.3 Overview of Recommendations

1. Add validation to the New / Reapplication Detail page to prevent the reapplication of a case person if the case person has a future Active Status.

1.4 Assumptions

1. Fields not mentioned to be modified within the description of changes will retain their current functionality.

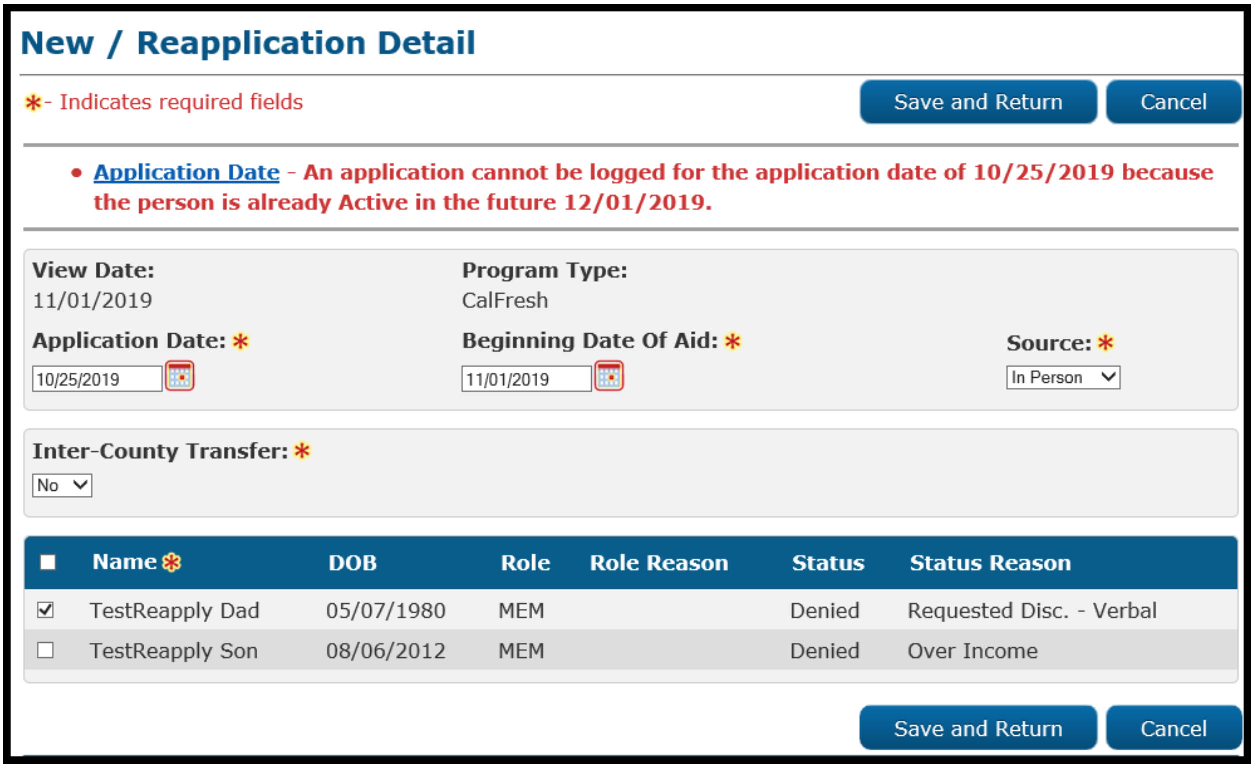
2 RECOMMENDATIONS

2.1 New / Reapplication Detail

2.1.1 Overview

Add validation to the New / Reapplication Detail page to display a validation message to prevent processing a reapplication for members with a current status of 'Denied' or 'Discontinued' who are already active in a future month.

2.1.2 New / Reapplication Detail Page Mockup



New / Reapplication Detail

*- Indicates required fields

Save and Return Cancel

- Application Date - An application cannot be logged for the application date of 10/25/2019 because the person is already Active in the future 12/01/2019.

View Date: 11/01/2019

Program Type: CalFresh

Application Date: * 10/25/2019

Beginning Date Of Aid: * 11/01/2019

Source: * In Person

Inter-County Transfer: * No

	Name *	DOB	Role	Role Reason	Status	Status Reason
☑	TestReapply Dad	05/07/1980	MEM		Denied	Requested Disc. - Verbal
☐	TestReapply Son	08/06/2012	MEM		Denied	Over Income

Save and Return Cancel

Figure 2.1.1 – Validation Message When Member with a current status of 'Denied' or 'Discontinued' is already Active in future month

2.1.3 Description of Changes

1. Update the New / Reapplication Detail page to display a validation when a user clicks 'Save and Return' and the following conditions are met:
    a. Program person has a status of 'Denied' or 'Discontinued' for the Beginning Date of Aid (BDA) month.
    b. Program person has a status of 'Active', 'Pending', or 'Ineligible' in a future month after the BDA month.

The validation message displayed will read:

'Application Date - An application cannot be logged for the application date of <New Application Date> because the person is already Active in the future <Date of Next Future Active Status>.'

2.1.4 Page Location

Global: Case Info/ Eligibility

Local: Case Summary

Task: Various

Note: This New/Reapplication page is reached when adding a new application, program or reapplying on an existing case. It can also be accessed through the linking flow.

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	Requirement Text	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. •For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	The New / Reapplication Detail page will display validation message when user attempts to reapply a 'Denied' or 'Discontinued' program person who is active in a future month.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-201314 | DDID 1967 | DDCR 3018

Add Validation to Customer Appointment when Worker is not Valid

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Erika Kusnadi-Cerezo
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/08/2019	1.0	Original	Erika Kusnadi-Cerezo
12/13/2019	2.0	Added Assumption	Erika Kusnadi-Cerezo
02/04/2020	3.0	Updated Description of Changes so that validation only occurs when workers tries to save the page.	Erika Kusnadi-Cerezo

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1 OVERVIEW

The Customer Appointment Detail page allows users to view, modify, and cancel an appointment. This SCR updates the Customer Appointment Detail page to indicate when a worker position is no longer assigned to a staff member.

1.1 Current Design

In the C-IV system, a validation message displays on the Customer Appointment Detail page when the user attempts to reschedule an appointment with a worker position that is no longer valid.

In CalSAWS, when the user attempts to reschedule an appointment with a worker position that is no longer valid, the following functionalities are missing:

1. When the appointment is being edited via "Reschedule", the Add button is not available.
2. When the appointment is being edited via "Reschedule", the Remove button is not available.
3. When the worker is removed from the position, 'No Staff Assigned' does not display. Instead the page displays the last staff member assigned to that worker position.

1.2 Requests

Per DDCR 3018, migrate existing validation and functionality from C-IV SCR 42667 to indicate when the worker position is no longer assigned to a staff and to add a validation message to the Customer Appointment Detail in "Edit" mode when the Worker is not valid.

1.3 Overview of Recommendations

Update the Customer Appointment Detail page to indicate when a worker position is no longer assigned to a staff member.

1. Add the "Add" and "Remove" button when the page is edited via the "Reschedule" button.
2. Indicate when a staff is no longer assigned to that worker position.
3. Display a validation message when a worker attempts to modify or reschedule an appointment and a staff is no longer assigned to that worker position.

1.4 Assumptions

County workers will continue to follow existing business protocol to address scenarios where appointments were rescheduled to a worker id with no staff assigned to the position prior to this change being implemented.

2 RECOMMENDATIONS

2.1 Customer Appointment Detail

2.1.1 Overview

The Customer Appointment Detail page allows the user to view, modify, and cancel an appointment. An indication when a worker position is no longer assigned to a staff member should be added to the Customer Appointment Detail page so the user can take appropriate actions.

2.1.2 Customer Appointment Detail Mockup

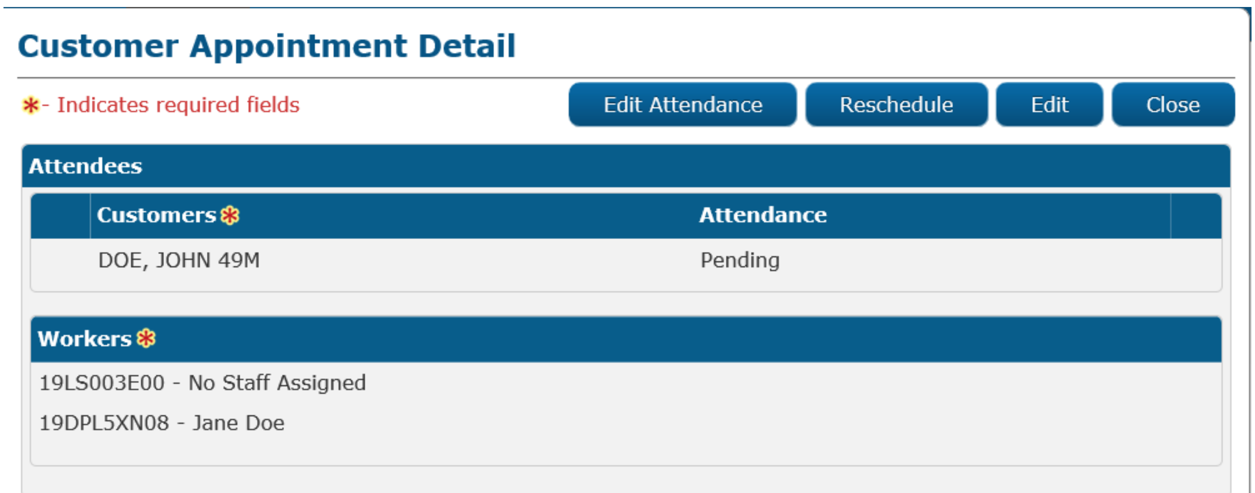

Figure 2.1.1 – Customer Appointment Detail View Mode

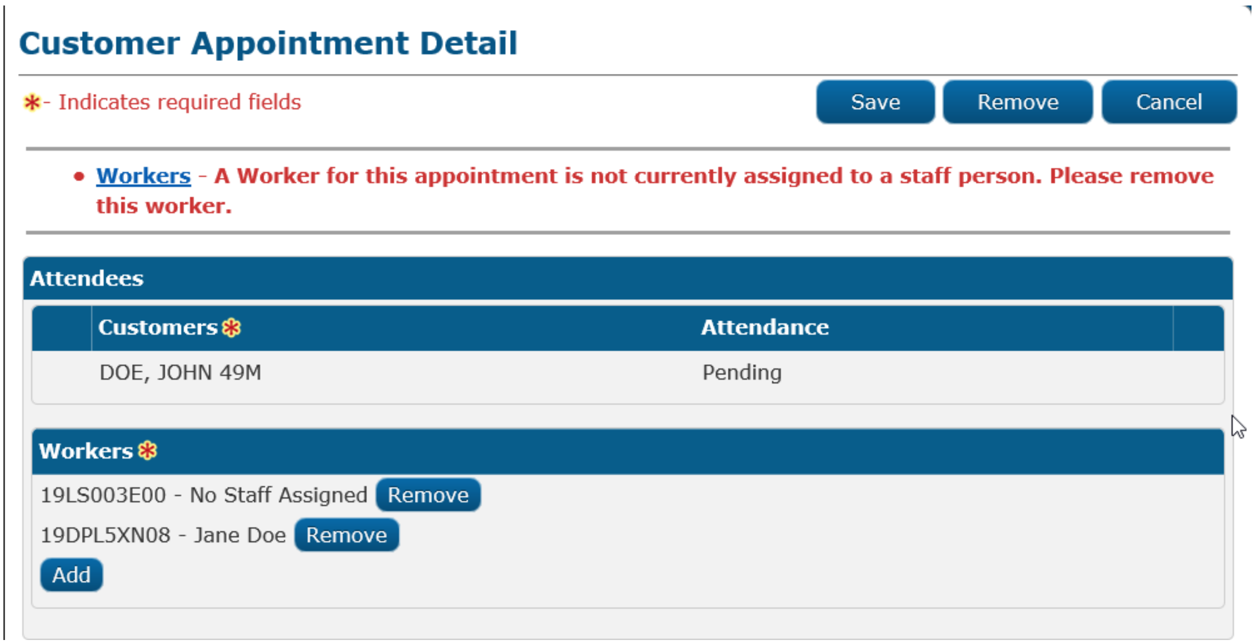

Figure 2.1.2 – Customer Appointment Detail Reschedule Mode

Figure 2.1.3 – Customer Appointment Detail Edit Mode

2.1.3 Description of Changes

1. Update the Customer Appointment Detail to indicate when a worker position is no longer assigned to a staff member as shown in Figure 2.1.1. This update will be incorporated to all Customer Appointment Detail page modes.
    a. In the "Workers" section, display the message: "No Staff Assigned" instead of displaying the last staff member name that was assigned to it.
2. Update the Customer Appointment Detail "Reschedule" and "Edit" mode as shown in Figure 2.1.2
    a. In the "Workers" section display the "Add" button which allows the user to add a new worker that has a staff assigned to it, and the "Remove" button which allows the user to remove the invalid worker that does not have a staff assigned to it. This is the same functionality that is available when user is in "Edit" mode or when creating a new appointment.

b. Display the following validation message as show on Figure 2.1.3 when the user attempts to "save" without removing the worker that is not assigned to a staff person:
    i. "Workers – A worker for this appointment is not currently assigned to a staff person. Please remove this worker."
    ii. Clicking on the Workers hyperlink will focus on the Workers section.

2.1.4 Page Location

- **Global: Case Info**
- **Local: Customer Schedule**
- **Task: Person Search**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	• Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	CalSAWS is updated to indicate when the worker position in no longer assigned to a staff and a validation message is added to the Customer Appointment Detail page in "Reschedule" and "Edit" mode when the worker is not valid.

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CalSAWS

California Statewide Automated Welfare System

Design Document

CA-201444 | DDID 1967 | DDCR 4042

Allow Specific Households to be MCE Eligible

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nicholas Trusso
	Reviewed By	Yale Yee

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
09/27/2019	1.0	Initial Document	Nicholas Trusso

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1 OVERVIEW

Per ACL 14-56 and ACL 15-42, a Non-Assistance CalFresh (NACF) household with at least one person who has a non-compliance record with a status reason of Fleeing Felon or Probation/Parole Violator should be eligible to modified categorical eligibility (MCE). Currently LRS prevents the household from being MCE if there is a person in the household who has one of these status reasons. The C-IV system implemented this change with SCR 1175.

1.1 Current Design

NACF households with a Fleeing Felon or Probation/Parole Violator are not eligible to MCE.

1.2 Requests

Per DDCR 4042, remove the Fleeing Felon and Probation/Parole Violator status reasons preventing the household from being determined MCE.

1.3 Overview of Recommendations

The CalFresh EDBC will determine NACF households, with a Fleeing Felon or Probation/Parole Violator, to be MCE eligible.

1.4 Assumptions

In LRS the Drug/Fleeing Felon is the type of non-compliance record and Fleeing Felon and Probation/Parole Violator are the status reasons available when the Drug/Fleeing Felon type is selected from the drop down menu.

2 RECOMMENDATIONS

NACF households with a person who has a status reason of Fleeing Felon or Probation/Parole Violator will be eligible to MCE.

2.1 Update MCE Determination

2.1.1 Overview

NACF households with a Fleeing Felon or Probation/Parole Violator will be eligible to MCE.

2.1.2 Description of Changes

1. Update CF EDBC to determine NACF households, with a Fleeing Felon or Probation/Parole Violator, to be MCE eligible.

2.1.3 Programs Impacted

CalFresh

2.1.4 Performance Impacts

None

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	The CF EDBC determines NACF households, with a Fleeing Felon or Probation/Parole Violator, to be MCE eligible.

4 OUTREACH

Provide a list of active persons on an active CF program with a non-compliance type of 'Drug/Fleeing Felon'.

4.1 Lists

A list of cases with an active person on a CF program that has a non-compliance record with the type 'Drug/Fleeing Felon'.

List Name: Cases_With_Drug_FleeingFelon_Record
List Criteria: Cases with an active person on an active CF program who also have a non-compliance record type of 'Drug/Fleeing Felon'.
Standard Columns:

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

Additional Column(s):
Frequency: One-time

The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CA-201444

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-201451 | DDID 1967 | DDCR 4074

Increase Job Readiness hours to reflect California's Needy State

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nicholas Trusso
	Reviewed By	Yale Yee

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/8/2019	1.0	Initial Document	Nicholas Trusso
11/13/2019	2.0	Updated Current Design section.	Nicholas Trusso

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1 OVERVIEW

California is currently categorized as a needy state. As such, clients are entitled to perform Job Readiness activities for up to 240 hours for a client in a single custodial parent household and 360 hours for clients in all other households.

1.1 Current Design

Work Participation Rate Determination (WPRD) logic currently limits Job Readiness hours counted to 120 hours for a client in a single custodial parent household and 180 hours for clients in all other households for a 12-month period. WPRD is calculated by totaling the Job Readiness time track hours for a person, if that person's time limits total is less than the household limit, the hours are added to the Job Readiness hours for the household.

1.2 Requests

Per DDCR 4074, update the Job Readiness hour limits to 240 hours for a client in a single custodial parent household and 360 hours for clients in all other households.

1.3 Overview of Recommendations

Update the Job Readiness hours counted for a client in a single custodial household to 240 hours and 360 hours for clients in all other households.

1.4 Assumptions

N/A

2 RECOMMENDATIONS

WPRD logic determines if hours in a Job Readiness activity can be used. Job Readiness is limited to 240 or 360 hours, depending on household composition.

2.1 Update the Job Readiness time limits

2.1.1 Overview

Update the Job Readiness time limits for all households.

2.1.2 Description of Changes

1. Update the Job Readiness time limit for clients in a single custodial household to 240 hours.
2. Update the Job Readiness time limit for clients in all other households to 360 hours.

2.1.3 Page Location

- **Global:** Empl. Services
- **Local:** Case Summary
- **Task:** Job Readiness

2.1.4 Programs Impacted

WTW, CW REP

2.1.5 Performance Impacts

None

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	Job Readiness time limit for clients in a single custodial household are updated to 240 hours. Job Readiness time limit for clients in all other households are updated to 360 hours.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-201525 | DDID 1967 | DDCR 5015, 5516

Update the Manual EDBC process to allow Run Reasons to be used

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nicholas Trusso
	Reviewed By	Yale Yee, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/16/2019	1.0	Initial Document	Nicholas Trusso
12/16/2019	2.0	Updates to remove references of ARC and Probation	Nicholas Trusso
01/28/2020	3.0	Updated formatting in sections 2.2.1 and 2.2.4 per ClearBest	Linda Zeng

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1 OVERVIEW

When a worker processes a Manual EDBC, the Manual EDBC will run with a Redetermination (RE) Run Reason under certain scenarios. When the EDBC being processed is run with the RE Run Reason and the worker accepts and saves the EDBC, the RE packet under the Customer Reporting List is marked as Complete – EDBC Accepted and a new RE period is created for the program. This completes the redetermination for the current period.

For CalWORKs (CW) and CalFresh (CF) the RE Run Reason is automated when the benefit month being processed is one month after the RE Due Month and there is a RE packet with a status of 'Reviewed – Ready to Run EDBC'. For Foster Care (FC), Kin-GAP (KG) and the Adoption Assistance Program (AAP) the RE Run Reason is not automated.

1.1 Current Design

A worker is required to process a redetermination for CW for the month following the RE Due Month in order to mark the RE packet as complete and create a new redetermination period for the program. When a worker processes a Manual EDBC for CW and selects a benefit month that is two or more months past the RE Due Date and the redetermination for the current period has not been completed yet, there is no validation message to inform the worker that they must process the redetermination before accepting the current EDBC.

If a worker is attempting to run a Manual EDBC for FC, KG or AAP there is no option to select the RE Run Reason.

When a Manual EDBC is run with the RE/SAR7 Run Reason, the Customer Reporting List status of 'Reviewed – Ready to Run EDBC' is changed to 'Complete – EDBC Accepted' only if the EDBC is not discontinued.

1.2 Requests

1. Add a validation message that prevents the worker from saving the Manual EDBC when the Manual EDBC being processed is two or more months past the RE Due Month and the current redetermination period has not been completed.
2. Update the Manual EDBC page to add the RE Run Reason for FC, KG, and AAP programs. Additionally, the recertification date needs to be advanced 1 year for FC or 2 years for KG and AAP programs.
3. When running with the RE/SAR7 Run Reason the Customer Reporting List will be updated to change the status 'Reviewed – Ready to Run EDBC' to 'Complete – EDBC Accepted' when the program is discontinued.

1.3 Overview of Recommendations

1. Add a validation message to the CalWORKs EDBC (Manual) page when the redetermination has not been completed for the current period and the benefit month is two or more months past the RE Due Month. This validation will

be added when the worker clicks the Accept button. This will use the same validation that CF currently has for this scenario.

2. Update the Manual EDBC page to add the RE Run Reason for FC, KG, and AAP programs and advance the redetermination date 1 year for FC, and 2 years for KG and AAP.
3. When running with the RE/SAR7 Run Reason for FC, KG or AAP, the Customer Reporting List needs to be updated to change the status 'Reviewed – Ready to Run EDBC' to 'Complete – EDBC Accepted'. This status needs to be updated even if the EDBC results in a discontinuance.

1.4 Assumptions

1. When a worker is processing a Manual EDBC, the RE/SAR7 Run Reason will be applied automatically for CW when a RE or SAR7 packet has a status of 'Reviewed – Ready to Run EDBC' and the benefit month being processed is one month after the RE Due Month.

2 RECOMMENDATIONS

Add the validation message 'The Redetermination needs to be completed.' for CalWORKs when a Manual EDBC is being ran and the benefit month selected is two or more months past the RE Due Date.

Modify the Manual EDBC logic to add the RE Run Reason for FC, KG, and AAP programs and advance the Redetermination date 1 or 2 years depending on the program.

Update the logic to change 'Received - Ready to Run' on the Customer Reporting List, to 'Complete - EDBC Accepted' when the Manual EDBC has been run with the RE/SAR7 Run Reason and the EDBC results in a discontinuance.

2.1 CalWORKs EDBC (Manual)

2.1.1 Overview

Add a validation on the CalWORKs EDBC (Manual) page to display when the user clicks Accept, and the benefit month is two or more months past the RE Due Date and the current redetermination period has not been completed to prevent the user from accepting the CalWORKs Manual EDBC.

2.1.2 CalWORKs EDBC (Manual) Mockup

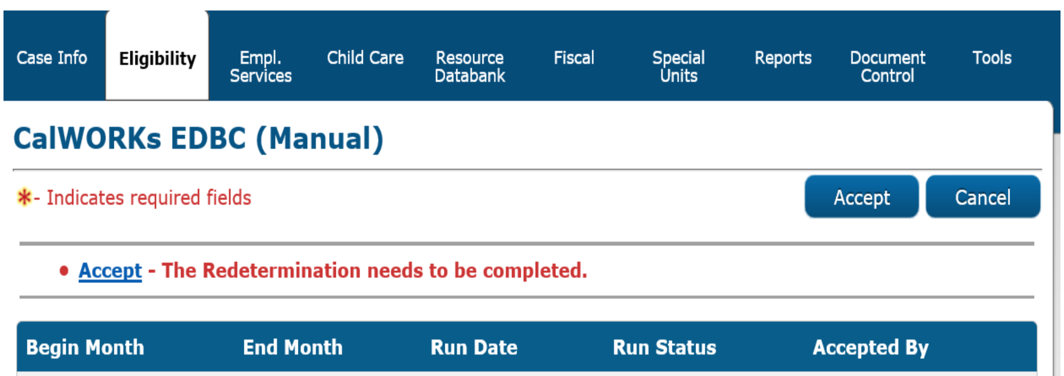

Figure 2.1.1 – CalWORKs EDBC (Manual)

2.1.3 Description of Changes

Display validation on the CalWORKs EDBC (Manual) page when the following conditions exist:

1. The EDBC was not created with the RE Run Reason
2. The benefit month is two or more months past the RE Due Month
3. The EDBC is not closing the program or marking it as Ineligible.
4. The overpayment amount on the EDBC is not greater than $0

5. The program is not currently in Pending status, unless the user rescinded a discontinuance.

The validation message will read:
"Accept - The Redetermination needs to be completed"

2.1.4 Page Location

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

2.1.5 Security Updates

No changes to existing security rights and groups.

2.1.6 Page Mapping

No changes to existing page mapping.

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 FC, KG, AAP RE Run Reason on Create Manual EDBC

2.2.1 Overview

Update the Create Manual EDBC page to add the 'RE' Run Reason dropdown for FC, KG, and AAP programs. Advance the RE date 1 year for FC, and 2 years for KG and AAP.

2.2.2 Create Manual EDBC Mockup

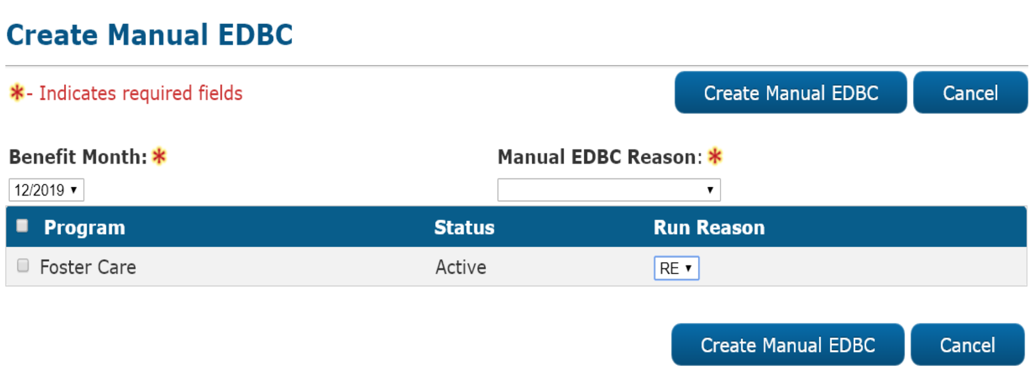

Figure 2.1.1 – Manual EDBC Page

2.2.3 Description of Changes

1. Add the 'RE' Run Reason to the dropdown for FC, KG and AAP programs every time a Manual EDBC is created.
2. Processing a Manual EDBC with a RE Run Reason will create/update the RE period based on the following:
    a. For the FC program:
        i. If EDBC doesn't result in a program closure, create a new RE period of 1 year and mark the old RE period as 'Processed'.
    b. For KG and AAP programs:
        i. If EDBC doesn't result in a program closure, create a new RE period of 2 years and mark the old RE period as 'Processed'.

2.2.4 Page Location

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

2.2.5 Security Updates

No changes to existing security rights and groups.

2.2.6 Page Mapping

No changes to existing page mapping.

2.2.7 Page Usage/Data Volume Impacts

N/A

2.3 EDBC Rules Updates

2.3.1 Overview

Creating a Manual EDBC with RE run reason will create/update the RE period and update the existing relevant Customer Reporting record if one exists based on the existing EDBC save and continue logic. Similarly, creating a Manual EDBC with SAR7 run reason will update the existing relevant SAR7 report status. After the worker accepts and saves the Manual EDBC, the status of the Customer Reporting Record will be updated to ‘Complete – EDBC Accepted’.

2.3.2 Description of Changes

Processing a Manual EDBC with a RE/SAR7 run reason will update the existing Customer Reporting record.

After the worker accepts and saves the Manual EDBC, update the Customer Reporting record ‘Received – Ready to Run EDBC’ to ‘Complete – EDBC Accepted’ if the EDBC resulted in a discontinuance.

2.3.3 Programs Impacted

CF, CW, FC, KG, AAP

2.3.4 Performance Impacts

No impact.

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	1. Validation on the CW Manual EDBC page preventing the worker from accepting the EDBC if the redetermination for that period has not been completed. 2. RE Run Reason is an option on the Run Reason dropdown for FC, KG and AAP Manual EDBC. 3. The Customer Reporting RE/SAR7 packet is marked 'Complete – EDBC Accepted' when a Manual EDBC is ran with RE/SAR7 run reason and the program was discontinued.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-203636 | DDID 1967

Medi-Cal Renewal Periods for MSP Households

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Renee Gustafson
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/21/2019	1.0	Original Draft	Renee Gustafson
12/09/2019	1.1	Added Data Change criteria and journal. Updated EDBC rules. Added Supporting documents	Renee Gustafson
12/18/2019	1.2	Updated criteria for one-time data change to populate existing MC programs without an appropriate Redetermination record.	Renee Gustafson

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1 OVERVIEW

Per All County Welfare Directors Letter (ACWDL) 08-21, 22 California Code of Regulations (CCR) § 50141, § 50189, Welfare and Institutions Code (WIC)14005.37 and the Medi-Cal Eligibility Procedures Manual (MEPM), Qualified Medicare Beneficiaries (QMB) are subject to an annual redetermination. CalSAWS Medi-Cal EDBC rules will now set a redetermination period for QMB with Supplemental Security Income/State Supplementary Payment (SSI/SSP). A one-time data change will establish a redetermination period for any active Medi-Cal program in CalSAWS without an appropriate redetermination period.

1.1 Current Design

In CalSAWS, the Medi-Cal EDBC rules do not set a redetermination period for Medi-Cal programs where all individuals are eligible for QMB and have SSI/SSP. CalSAWS determines the redetermination period for QMB without SSI/SSP as follows:

Intake

Redetermination Begin Date: First day of the month of the Beginning Date of Aid (BDA)

RE Due Date: Last day of the month of 'Begin Date + 11 months'

RE

Redetermination Begin Date: First day of the month of the EDBC Benefit Month

RE Due Date: EDBC Last day of the month of 'Begin Date + 11 months'

In C-IV, the Medi-Cal EDBC rules set a redetermination period for all active Medi-Cal programs.

C-IV uses the same criteria as stated above to determine the redetermination periods for QMB with or without SSI/SSP.

1.2 Requests

ACWDL 08-21 clarifies that Medicare Savings Programs (MSP) are Medi-Cal programs and requires MSP eligibility determinations, including redeterminations, for all Medicare eligible Medi-Cal applicants and beneficiaries; this includes SSI Medi-Cal beneficiaries.

With that in mind, the application and redetermination requirements of 22 CCR § 50141, § 50189, and WIC 14005.37 apply. Individuals on QMB with SSI/SSP need to be redetermined for QMB eligibility annually.

Lastly, the MEPM Q&A regarding individuals on QMB with SSI/SSP found on page 5L-30, question 6, provides a direct answer to the question about redeterminations for this population.

> *6. Is a QMB redetermination required for SSI recipients?*
>
> *Answer: Yes. They are considered aged, blind, or disabled and should be evaluated yearly.*

When a Medi-Cal program has all individuals eligible for QMB and all have SSI/SSP, the individuals are not required to turn in a Renewal Packet, but the worker will perform an annual ex parte review and perform a redetermination.

1. Update CalSAWS Medi-Cal EDBC rules to set a redetermination period for QMB with SSI/SSP.
2. Add a redetermination record for existing Medi-Cal programs without an appropriate redetermination record and create a journal.

1.3 Overview of Recommendations

1. Update Medi-Cal EDBC rules to establish a redetermination period for QMB with SSI/SSP.
2. Perform a one-time data change to establish a redetermination record for all Medi-Cal programs without an appropriate redetermination record.
3. Create a journal entry for cases updated by the one-time data change.

1.4 Assumptions

1. CalSAWS will not generate an annual Renewal packet for Medi-Cal Programs where all individuals are QMB with SSI/SSP.
2. The one-time data change will establish redetermination periods with a Due Date in the future for all existing Medi-Cal programs that do not have an appropriate redetermination period. The one-time data change will not update the redetermination period for any active Medi-Cal programs with an overdue RE.

2 RECOMMENDATIONS

2.1 Medi-Cal Rules Updates

2.1.1 Overview

Update Medi-Cal EDBC rules to establish a redetermination period for QMB with SSI/SSP.

2.1.2 Description of Changes

1. Update Medi-Cal EDBC rules to establish a redetermination period when all individuals are active for QMB with SSI/SSP. Establish the redetermination period using the same redetermination logic as QMB without SSI/SSP; this applies to new applications and Medi-Cal EDBCs run with "RE" Run Reason.

2.1.3 Programs Impacted

Medi-Cal

2.1.4 Performance Impacts

No change.

2.2 Data Change

2.2.1 Overview

Perform a one-time data change to establish a redetermination record for all Medi-Cal programs without an appropriate redetermination record.

2.2.2 Description of Change

1. Identify active Medi-Cal programs with the following criteria:
   a. There is at least one active individual on the Medi-Cal program effective on or after May 2020 benefit month.
   b. A redetermination record does not exist for the Medi-Cal program.
      Or
      The latest redetermination record for the Medi-Cal program is completed and a new redetermination record for the Medi-Cal program does not exist.
2. Create a new redetermination record for each identified Medi-Cal program with the following values:
   a. If the BDA is on or after July 2019, then
      Begin Date: First day of the month of BDA
      Due Date: Last day of the month for 'Begin Date + 11 months'

      Example

BDA	Begin Date	Due Date
July 2019	July 01, 2019	June 30, 2020
January 2020	January 01, 2020	December 31, 2020

   b. If the BDA is prior to July 2019, then
      Begin Date: First day of the month of BDA with year 2020
      Due Date: Last day of the month for 'Begin Date + 11 months'

BDA	Begin Date	Due Date
June 2019	June 01, 2020	May 31, 2021
January 2018	January 01, 2020	December 31, 2020

2.2.3 Estimated Number of Records Impacted/Performance

The one-time data change will update approximately 32,000 Active Medi-Cal programs without an appropriate redetermination record.

2.3 Automatic Journal Entry

2.3.1 Overview

Create a journal entry for cases updated by the one-time data change.

2.3.2 Description of Change

1. Create one Journal Entry per case with the following values for cases updated by the one-time data change:

   Journal Category: All

   Journal Type: Basic Information

   Short Description: MC RE Due Date updated

   Long Description: The system established a redetermination record for the Medi-Cal program due to a one-time data change for Medi-Cal programs without an appropriate redetermination record.

2.3.3 Programs Impacted

Medi-Cal

2.3.4 Performance Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	• Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. • For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	The System will now determine the effective start and end date of the Redetermination period for MSP individuals on QMB with SSI/SSP.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207108 | DDID 2302
Updates to Standardized Barcodes

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Lawrence Samy
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/3/2019	1.0	Initial revision	Lawrence Samy

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1 OVERVIEW

A standardized barcode will be used to track and image documents in CalSAWS.

1.1 Current Design

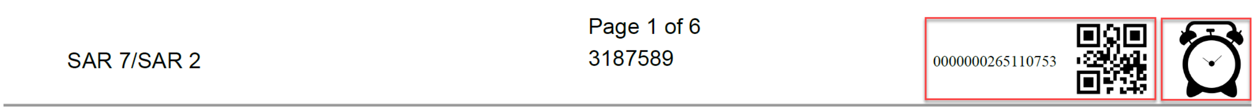
LRS:

A one dimensional (1D) tracking barcode and two dimensional (2D) imaging barcode are used on the LRS forms and Notice of Actions (NOAs). Both barcodes contain the same barcode value. The imaging barcode is used to retrieve case information when a document is imaged using Electronic Data Management System (EDMS), while the tracking barcode is used to retrieve case information and mark a document as received via document/barcode scanner or Barcode Routing Detail page.

LRS Form Example

C-IV:

Both tracking and imaging barcode have been combined into a single two dimensional (2D) barcode which displays on the bottom right side of C-IV System forms and NOAs. A clock icon is displayed next to the barcode to indicate if it is a tracked document through customer reporting and needs to be returned timely.



C-IV Form Example

1.2 Requests

A standardized barcode to retrieve all pertinent information necessary to identify the document, customer, and case will be added to applicable documents before printing.

1.3 Overview of Recommendations

1. Migrate the C-IV single Imaging/Tracking barcode along with the clock icon to CalSAWS for the 57 counties.
2. Los Angeles County will retain the existing separate imaging and tracking barcodes until migration to the CalSAWS imaging solution.

1.4 Assumptions

1. No other system changes will be required to receive the document into the system since the current imaging and tracking barcode contain the same barcode value.
2. The types of barcodes currently assigned to each form will not be changed with this SCR. For example, forms that include both a tracking and imaging barcode for Los Angeles County will include the migrated tracking (clock icon) and imaging barcodes when generated for the Migration counties.
3. Documents which are not tracked will not display the clock icon. No changes will be made to which documents are being tracked. Supporting document 1 'DDID 2302 Clock Icon Forms' is provided as a reference for testing purposes. This is not a comprehensive list of all forms with barcodes.
4. As part of the CalSAWS imaging solution effort, all documents will be reviewed to be evaluated if it requires an imaging barcode.

2 RECOMMENDATIONS

2.1 Standard Barcode

2.1.1 Overview

Converting to a 2D barcode as the standard barcode maximizes page space and increases scanning accuracy by adding redundant sectors.

2.1.2 Description of Change

1. Migrate the C-IV single Imaging/Tracking barcode along with the clock icon to CalSAWS as the standard barcode for the 57 counties.
2. Similar to C-IV, the standard barcode will be used to retrieve document, customer, and other case information when imaging CalSAWS documents into the CalSAWS imaging solution.
3. The standard barcode will also be used to retrieve required case information when scanning CalSAWS documents to mark them as received.
4. The standard barcode will appear on every page of the document on the same location as C-IV (bottom right).
5. The barcode value stored in the standard barcode will be unique per document such that no two documents will contain the same barcode value.
6. Los Angeles County will retain the existing barcodes until migration to the CalSAWS imaging solution.

3 SUPPORTING DOCUMENTS

Document Number	Description	Documents
1	List of Forms with Clock Icon	DDID 2302 Clock Icon Forms.xlsx

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2302	The CONTRACTOR shall design a standardized set of barcodes to encode all information necessary to identify the form, customer, and case and shall configure the system to add those barcodes to all forms before they are sent to printing.	• 2D barcode currently in C-IV will be used as the standard barcode • Data elements to be included will be decided upon at design	C-IV Imaging/Tracking barcodes are migrated to CalSAWS for the 57 Migration Counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207116 | DDID 2276

Update the Fraud Tracking Functionality

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Melissa Mendoza
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/15/2019	1.0	Original	Melissa Mendoza
10/24/2019	1.1	Made changes based on Workgroup feedback.	Melissa Mendoza
12/17/2019	1.2	Made updates per QA Feedback.	Melissa Mendoza
1/28/2020	1.3	Made updates per DDEL Comments	Melissa Mendoza

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1 OVERVIEW

This SCR will address the need to allow Investigators to log when they leave and return for their visit in order to know when they are out of the office and know they have returned safely.

1.1 Current Design

The Special Investigations functionality allows Investigators to open an Investigation with information such as Fraud Type, Allegation, Source, Priority, Program, etc. It also keeps track of the Investigator(s) assigned and the User who created an Investigation.

1.2 Requests

Per DDID 2276, update the fraud tracking functionality to allow Investigators to log their time out and time returned when making investigative visits, and an authorized user can see an up-to-date list of Investigators currently out on visits and how long they have been gone.

New List and Detail pages will be added to the SIU Navigation to track Investigators that are out on visits.

1.3 Overview of Recommendations

Update the Special Investigations functionality to enable Investigators to log their time for an Investigation and search for specific log detail:

1. Add a new Investigation Log Search List page to enable a Worker to search the Log Detail records by Investigator within a date range.
2. Add a new Investigation Log Detail page to capture specific information about the visit.

1.4 Assumptions

New List and Detail pages will be added to the SIU Navigation to track Investigators that are out on visits.

2 RECOMMENDATIONS

2.1 Special Investigation Log Search

2.1.1 Overview

The Special Investigation Log Search page will be added to CalSAWS. The Special Investigation Log Search page will be accessed from the Special Units Global Navigation and Special Investigations Local Navigation. The Special Investigation Log Search allows the Supervisor or Worker assigned to search for Investigations by date to view records of when an Investigator is out at an Investigation.

2.1.2 Special Investigation Log Search Mockup

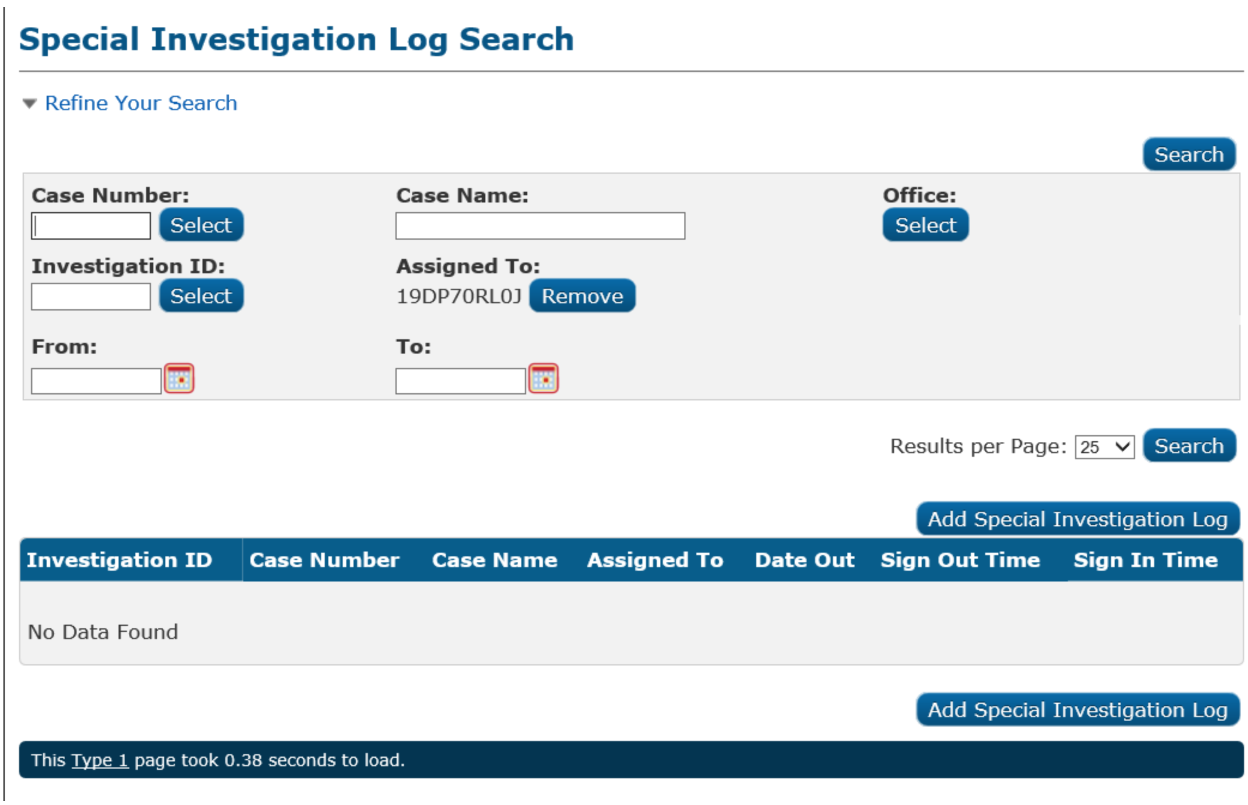

Figure 2.1.2.1 Special Investigation Log Search w/ Task Navigation

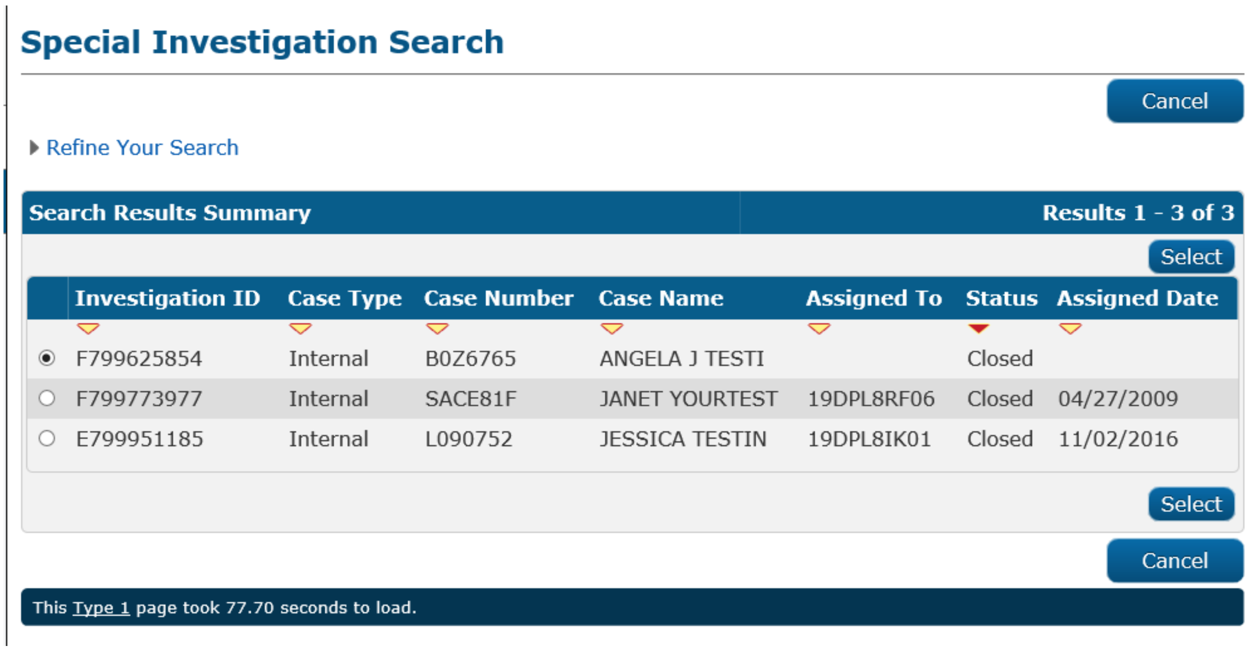

Figure 2.1.2.2 Special Investigation Search - Select Page

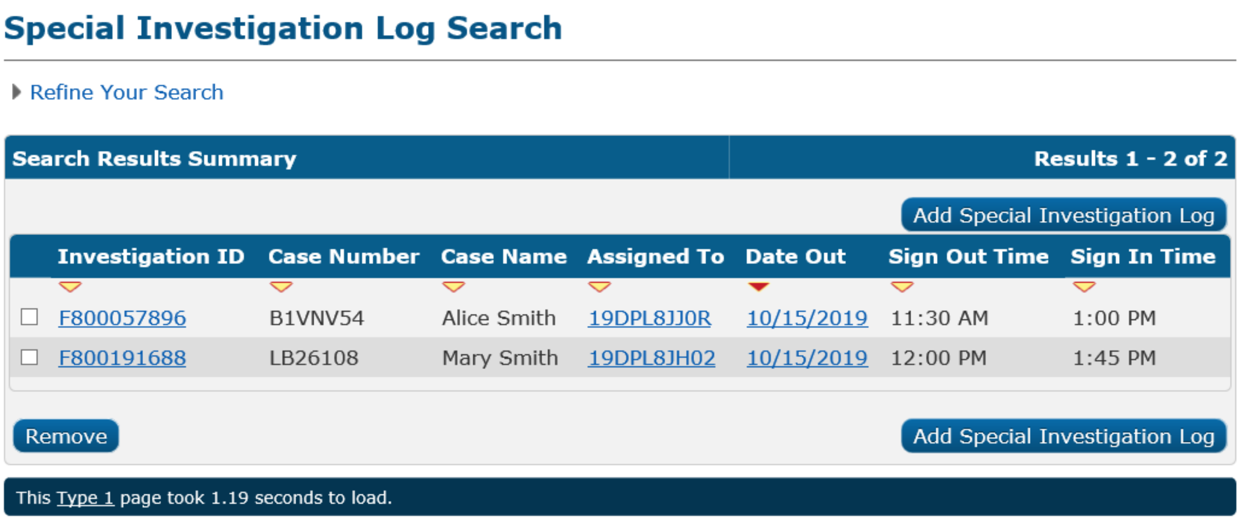

Figure 2.1.2.3 Special Investigation Log Search Results

2.1.3 Description of Changes

1. The Special Investigation Log Search will be accessed by the Special Units global navigation, Special Investigations local navigation and the new Special Investigation Log Search task navigation.
2. After searching Refine Your Search will be collapsed.
3. The fields in the Special Investigation Log Search and Results will be:

Field Name	Description
Case Number	Case Number associated with Special Investigation Log with a Select button to navigate to Select Person to find a Case associated to a Special Investigation. After searching and selecting a Case Number, a Remove button will allow the Worker to remove the Case Number.
Investigation ID	ID associated to the Special Investigation Log with a Select button that will navigate to Special Investigation Search and allow the User to select an Investigation. See Figure 2.1.2.2. After selecting a Special Investigation ID a Remove button will remove the ID.
Case Name	Case Name associated to the Special Investigation.
Office	Select navigates to the Select Office page.
Assigned To	Worker assigned to the Special Investigation Log. Defaults to the logged in Worker. Remove button allows to search without a worker. When clicking Remove a Select button will replace it. Select navigates to Select Worker page.
From	Date range using the Date Out from the Special Investigation Log.
To	Date range using the Date Out from the Special Investigation Log.
Add Special Investigation Log button	Navigates to the Special Investigation Log Detail page in Create mode.
Date Out	Date Out field from the Special Investigation Log Detail page.
Sign Out Time	Sign Out Time field from the Special Investigation Log Detail page.
Sign In Time	Sign In Time field from the Special Investigation Log Detail page.
Remove Button	Removes the record.

4. The Search Results will default to sort by Date Out. Date Out will link to the Special Investigation Log Detail in View Mode.

2.1.4 Page Location

Global Navigation: Special Units

Local Navigation: Special Investigations

Task Navigation: Special Investigation Log Search

2.1.5 Security Updates

Please see the attached "CA-207116 DDID 2276 Security Matrix" document for Security Matrix.

1. Security Rights

Security Right	Right Description	Right to Group Mapping
SpecialInvestLogSearch	Access to the Special Investigation Search page.	Special Investigation Log Search

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Special Investigation Log Search	Search Special Investigation Logs.	Special Investigations Staff, Special Investigations Supervisor, View Only, System Administrator

2.1.6 Page Mapping

PMCR for the Special Investigation Log page.

2.1.7 Page Usage/Data Volume Impacts

New functionality in the system. Estimated low level of data.

2.2 Special Investigation Log Detail Page

2.2.1 Overview

The Special Investigation Log Detail page will allow the Special Investigation Worker to log when they are out at a location with a suspect. The Worker ID will default to the logged in Worker's ID. The Phone Number will be the phone number of where the Worker can be reached.

2.2.2 Special Investigation Log Detail Mockup

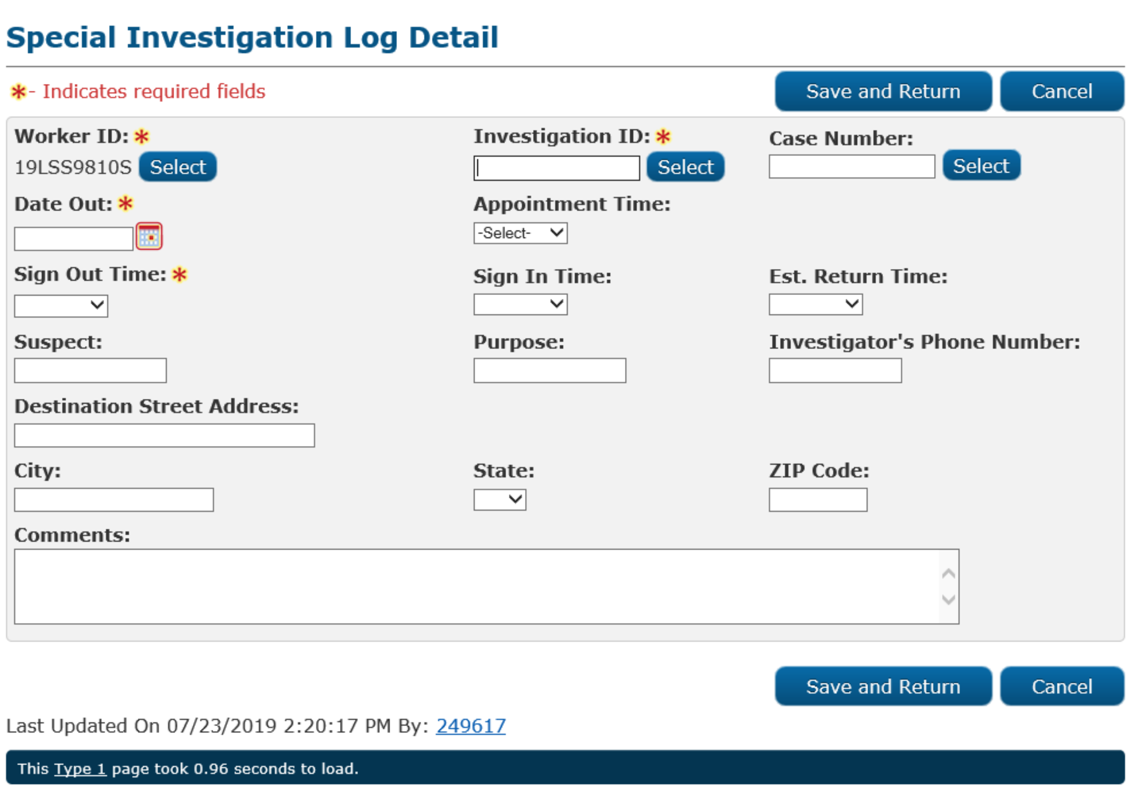

Figure 2.2.2.1 Special Investigation Log Detail Mockup – Create Mode

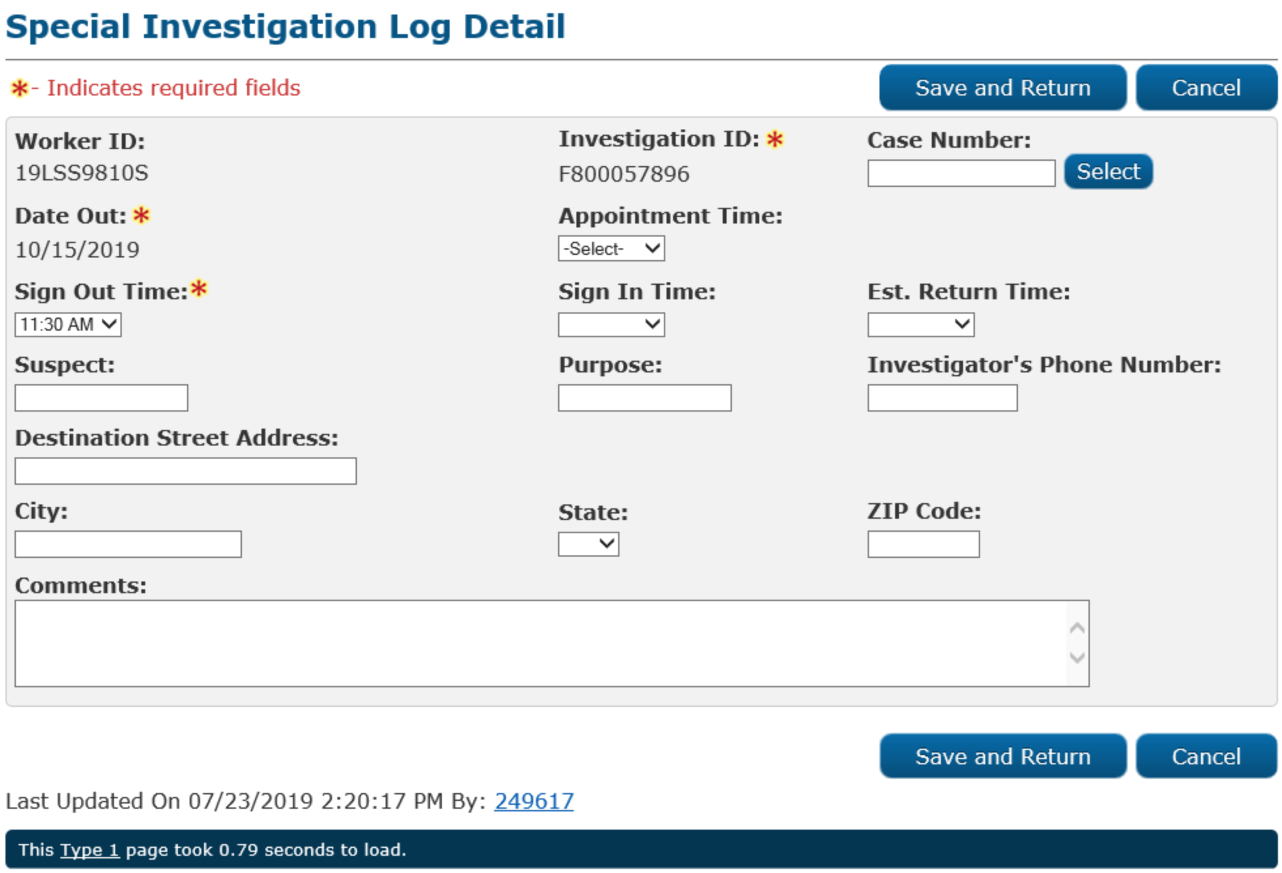

Figure 2.2.2.2 Special Investigation Log Detail Mockup – Edit Mode

Figure 2.2.2.3 Special Investigation Log Detail Mockup – View Mode

2.2.3 Description of Changes

1. Add a new page labeled "Special Investigation Log Detail" that includes the following fields:
2. Add the following validation message if Sign In Time is set before Sign Out time when clicking Save:
    a. Sign In Time must be later than the Sign Out time.

Field Name	Description	Required
Worker ID	Default to current logged in Worker. Select button navigates to Select Worker.	Yes
Investigation ID	ID of the Investigation that relates to the Investigation Log. Select button navigates to Special Investigation Search.	Yes
Case Number	Case Number associated to the Investigation. Select button navigates to Person Search.	No
Appointment Time	Time of scheduled appointment. Dropdown will be in 15 minute	No

Field Name	Description	Required
	increments starting at 6:00 AM and ending at 11:30 PM.	
Sign Out Time	Time the Worker leaves to the appointment. Dropdown will be in 15 minute increments starting at 6:00 AM and ending at 11:30 PM.	Yes
Sign In Time	Time the worker returns from the appointment. Dropdown will be in 15 minute increments starting at 6:00 AM and ending at 11:30 PM.	No
Est. Return Time	Estimated time the Worker plans to return from the appointment. Dropdown will be in 15 minute increments starting at 6:00 AM and ending at 11:30 PM.	No
Suspect	Name of the Suspect that the Investigator is visiting.	No
Purpose	Purpose of the visit. (Max characters 55)	No
Investigator's Phone Number	Phone Number where the Investigator can be reached.	No
Destination Street Address	Address where the Worker will be meeting with the suspect.	No
City, State, Zip	City, State (Drop-down field) , Zip where the Investigator will be meeting with the suspect.	No
Comments	Text Area field. (Use standard Comments field Max Characters)	No
Save and Return button	Adds record to the database. Navigates to Special Investigations Log Search page.	N/A
Cancel button	Navigates to Special Investigations Log Search page.	N/A
Edit button	Accesses the page in Edit Mode.	N/A
Close button	Navigates to the Special Investigations Log Search page.	N/A

2.2.4 Page Location

Global Navigation: Special Units

Local Navigation: Special Investigation Search

Task Navigation: Special Investigations Log Search

2.2.5 Security Updates

Please see the attached "CA-207116 DDID 2276 Security Matrix" document for Security Matrix.

1. Security Rights

Security Right	Right Description	Right to Group Mapping
SpecialInvestLogView	Access to the Special Investigation Log Detail page.	Special Investigation Log View
SpecialInvestLogEdit	Ability to create and edit a Special Investigation Detail record.	Special Investigation Log Edit

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Special Investigation Log View	View the Special Investigation Log Detail page.	Special Investigations Staff, Special Investigations Supervisor, View Only, System Administrator
Special Investigation Log Edit	Edit the Special Investigation Log Detail page.	Special Investigations Staff, Special Investigations Supervisor, View Only, System Administrator

2.2.6 Page Mapping

Add page mapping for new Special Investigation Log Detail page.

2.2.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2276	The CONTRACTOR shall update the fraud tracking functionality to allow investigators to log their time out and time returned when making investigative visits, and an authorized users can see an up-to-date list of investigators currently out on visits and how long they have been gone.	New List and Detail pages will be added to the SIU Navigation to track Investigators that are out on visits.	Create a new page called Special Investigation Log Search page and Special Investigation Log Detail page.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207121 | DDID 2080, DDID 2081

Update WTW functionality

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Melissa Mendoza
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/05/2019	1.0	Original Document	Melissa Mendoza
12/30/2019	1.1	Made updates per QA Comments.	Melissa Mendoza
01/29/2020	1.2	Made updates per Consortium Review	Melissa Mendoza

Table of Contents

1 OVERVIEW

1.1 Current Design

In CalSAWS, Welfare to Work (WTW) Activities are tracked within the Customer Activities pages. The Activities are tracked on a weekly basis for attendance actual hours as well as excused absences. There is currently no place in the system to view a yearly summary of all Actual hours.

1.2 Requests

Per DDID 2081, update the system to capture daily, weekly, and monthly hours for all WTW activities.

Per DDID 2080, display a summary of attendance for a 12 month period for any activity within WTW for actual hours.

1.3 Overview of Recommendations

1. Update the Activity Progress Summary page to use the Monthly calendar instead of a weekly update for both the Activity Attendance actual hours as well as the Excused Absences for WTW and REP programs only. Use the same calendar that is currently used on the Employment Hours Detail page.
2. Add a new page called Actual Hours History that will be accessed from the Empl. Services global navigation, Activities local navigation in a new task navigation item called Actual Hours History.

1.4 Assumptions

1. GROW Activities will not be changed to the Monthly Calendar and will continue to track their activities on a Weekly basis.
2. The data model will not be changed for Activities.

2 RECOMMENDATIONS

The Activity Progress Summary page will be updated for WTW and REP programs to use a new Monthly Calendar to track the Actual Hours for Activities. The calendar will allow the User to enter daily, weekly or monthly actual hours. A calendar will be added for Excused Absences allowing the User to add the excused absences daily to align with the current functionality. A new page called Actual Hours History will be created to display the Actual Monthly Hours for a selected year.

2.1 Activity Progress Summary

2.1.1 Overview

Update the Activity Attendance Information to display a calendar allowing the User to add daily, weekly or monthly totals for Actual Hours. A new calendar will also be added for excused absences to allow for daily absences to be entered for the displayed month. A dropdown of all months available for the Activity will appear under the Activity Detail and before the Activity Attendance Information.

2.1.2 Activity Progress Summary Mockup

Activity Progress Summary

View Excused Absence | Edit | Close

Name:
Eleanor Shellstrop

Activity Detail

Type:	**Provider:**	**Category:**	**Address:**
Community Service Placement	Main Street Community	Community/LD Services	14 Main Street Long Beach, CA 90815
Number:	**Start Date:**	**End Date:**	**Hours:**
CSC - 123	10/17/2019	10/01/2020	Mon, Tue, Wed, Thu, Fri 8:00 AM - 5:00 PM (30 hours/week)

October 2019

Activity Attendance Information

Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	1	2	3	4	5	6	
7	8	9 5.0	10	11 5.0	12	13 5.0	15.0
14	15	16	17	18	19	20	20.0
21	22	23 7.0	24	25	26 7.0	27	14.0
28	29	30	31				

Total Monthly Hours: 49.0
Average Weekly Hours: 11.32

Excused Absences

Excused Absences Total Monthly Hours: 14

Figure 2.1.2.1 – Activity Progress Summary View Mode

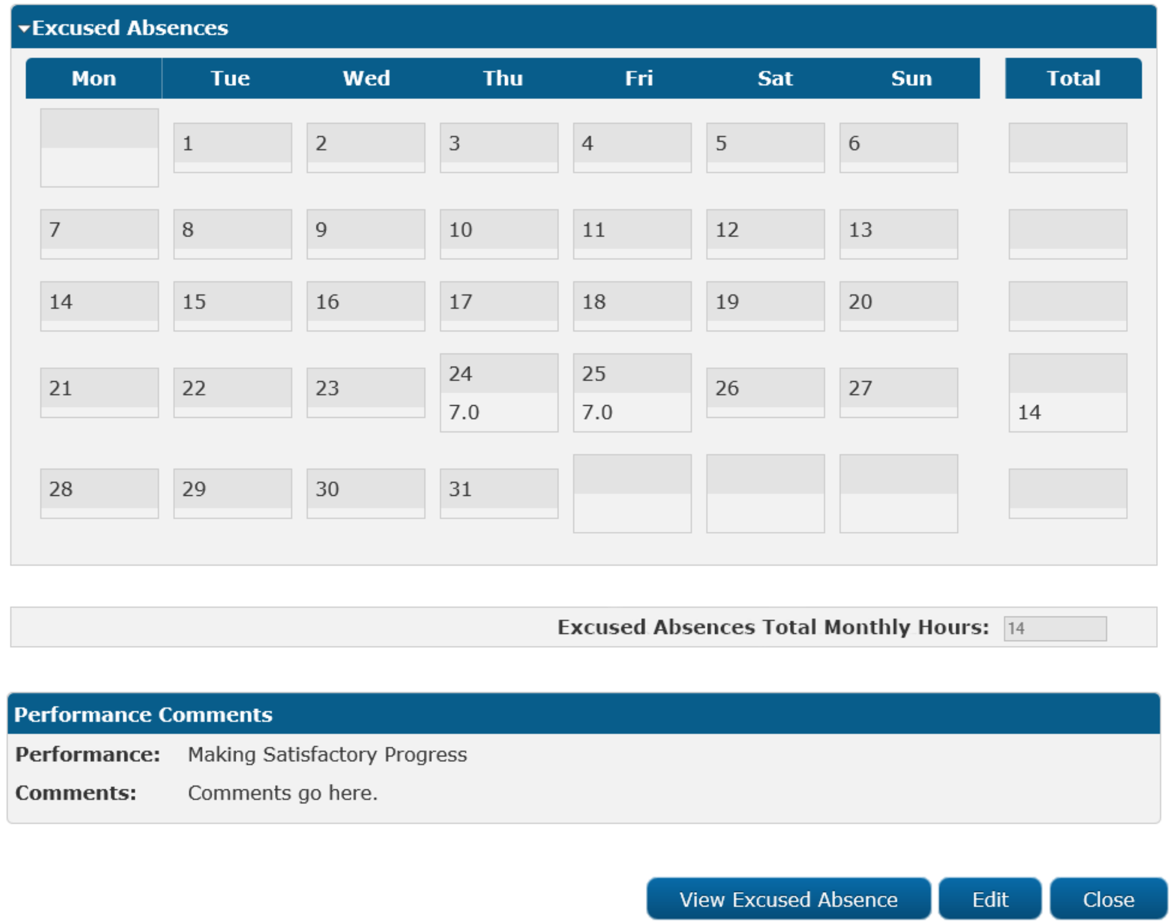

Figure 2.1.2.2 – Activity Progress Summary View Mode – Excused Absences Expanded

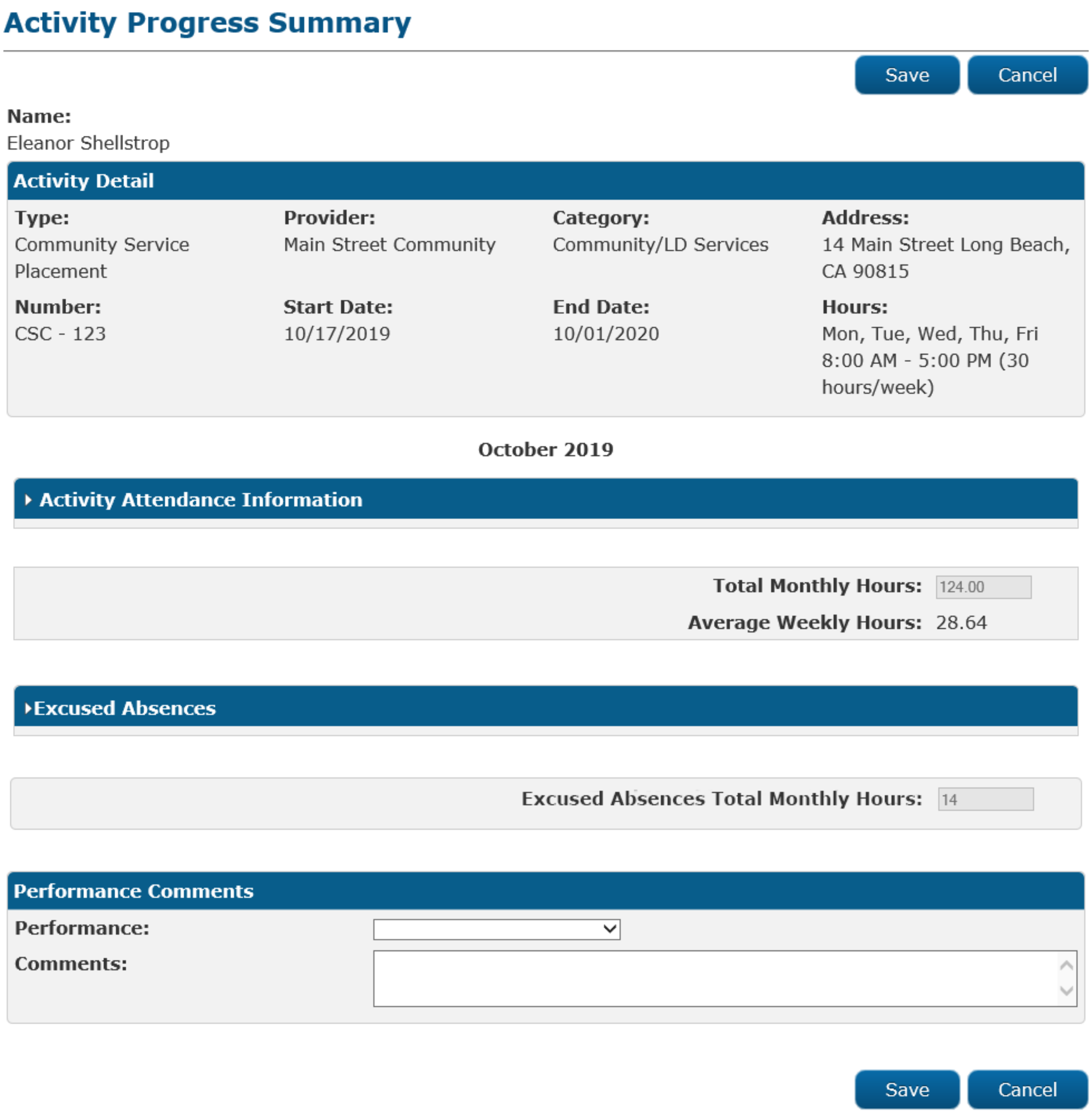

Figure 2.1.2.5 – Activity Progress Summary Edit Mode

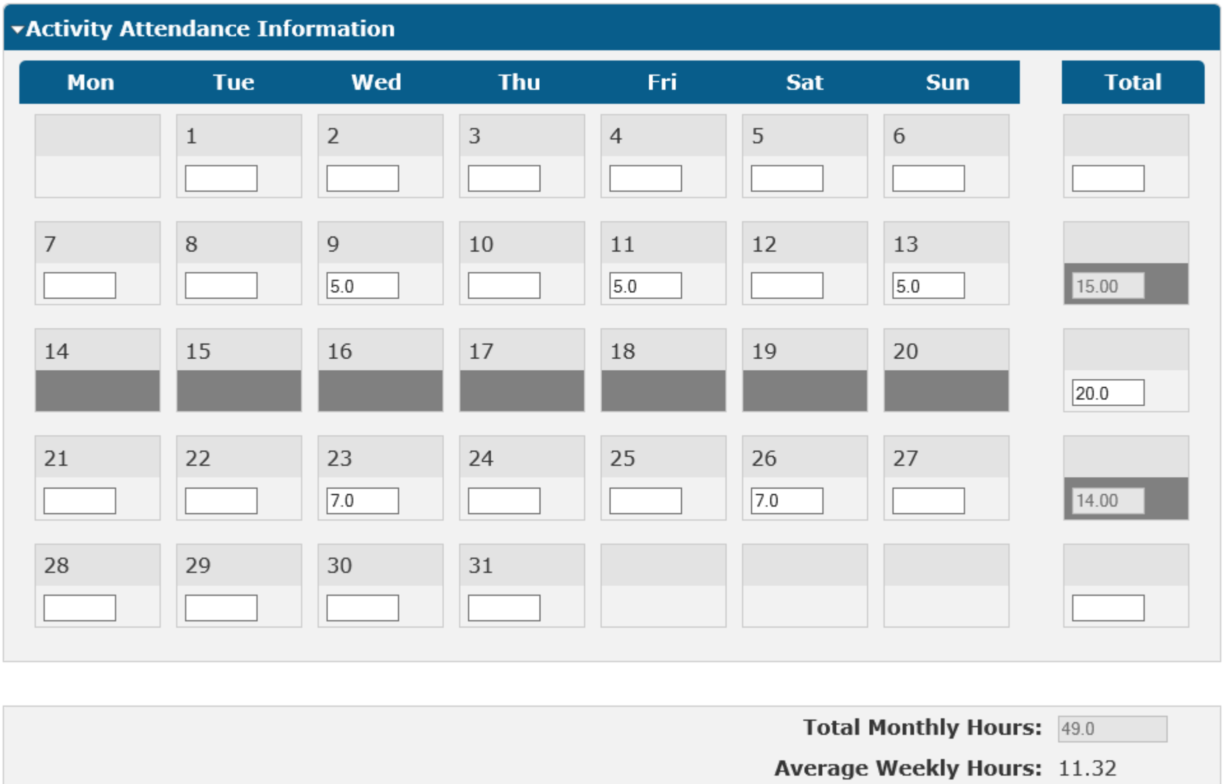

Figure 2.1.2.6 – Activity Attendance Information – Edit Mode

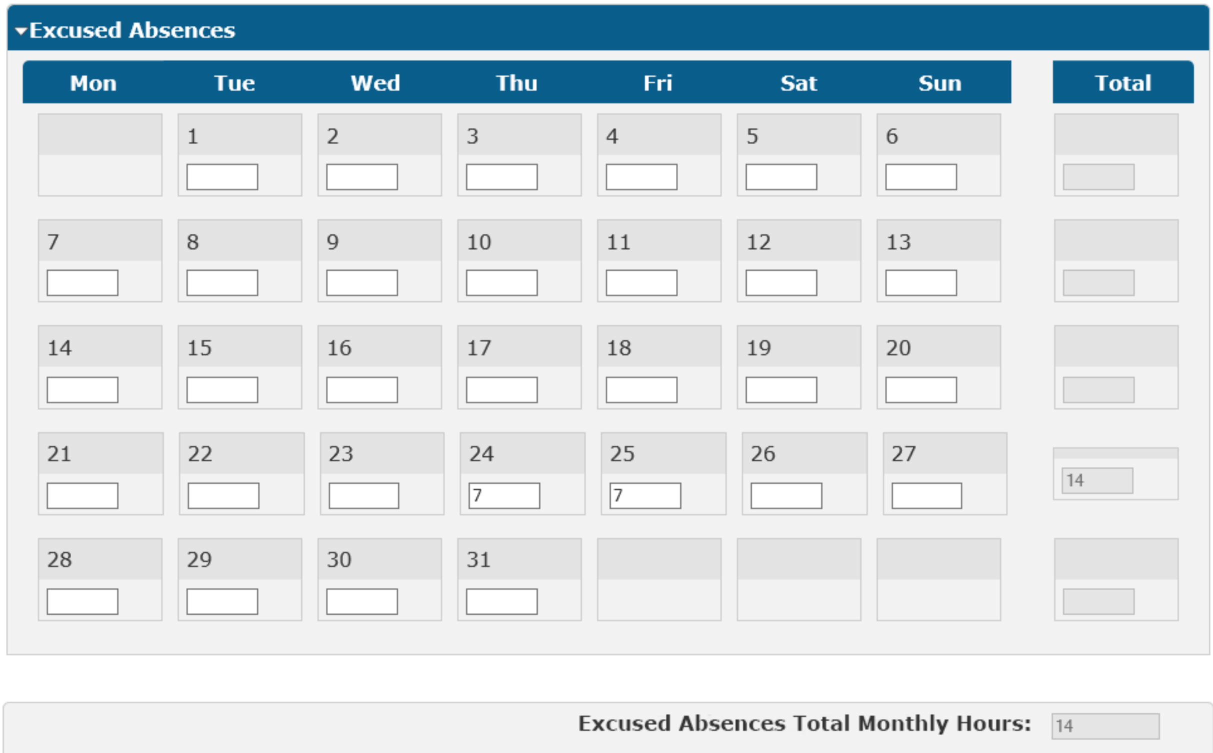

Figure 2.1.2.7– Excused Absences – Edit Mode

2.1.3 Description of Changes

1. Add a dropdown for the month selection for the Activity. The Month selections will default to the most current month that the Activity is Active in. The options will include all the past months from the begin date of the Activity.
    a. In View Mode the dropdown will display as a select box. See Figure 2.1.2.1
    b. In Edit Mode the selected month will display in bold on the page. See Figure 2.1.2.5
2. When navigating to the Activity Progress Summary page the Activity Attendance Information will be expanded and the Excused Absences will be collapsed in both view and edit modes.
3. The Calendar for the Activity Attendance Information section will allow the following.

    Note: Follow the Employment Calendar as an example.

    a. Day entries:
        i. When entering each day for that week the User can no longer enter the Total for the week or the Total Monthly Hours.

ii. The Total for the week will total and display in the Total column for that week and not be editable.
iii. The Total Monthly Hours field will total the hours and not be editable.
iv. When deleting the daily input fields the other fields will become editable.

b. Weekly entries:
   i. When entering the Total for the Week the User can no longer enter the days for that week or the Total Monthly hours.
   ii. The Total Monthly Hours field will total the hours and not be editable.
   iii. When deleting the weekly total the daily input fields will become editable.
c. Monthly entries:
   i. When entering the Total Monthly Hours then the date and week fields will no longer be editable.
   ii. When deleting the monthly total the daily and weekly input fields will become editable.
   iii. To enter monthly hours the activity dates must fall within the entire month. The following validation will display when saving if activity does not fall within the entire month:
   "The Activity does not fall within the entire month. Please enter weekly or daily hours."

d. When removing the entries for any of the above, the fields will become editable for the other fields that were previously disabled.

Note: The data model will not be altered in order to preserve existing records and reporting. Weekly and Monthly hours will need to be divided into the days of the month but will not display to the end users.

4. The Calendar for Excused Absences will allow the User to enter the excused absence for each day. The total for the week and for the Total Monthly hours will total based on the hours entered for the days. The Total for Weekly and the Total Monthly Hours field will not be editable.
   a. The existing data will display for all excused absences in the system.
   b. The hours entered will display on the Excused Absence List page.
5. The Performance Comments will migrate the Performance dropdown and Comments text area from the Activity Progress Detail page.

2.1.4 Page Location

- **Global: Empl. Services**
- **Local: Activities**
- **Task: Customer Activities**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Update Page Mapping to include new fields.

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Actual Hours History

2.2.1 Overview

Create a new page called Actual Hours History which will be accessed from Empl. Services Global Navigation, Activities Local Navigation and a new Task Navigation item called Actual Hours History.

2.2.2 Actual Hours History Mockup

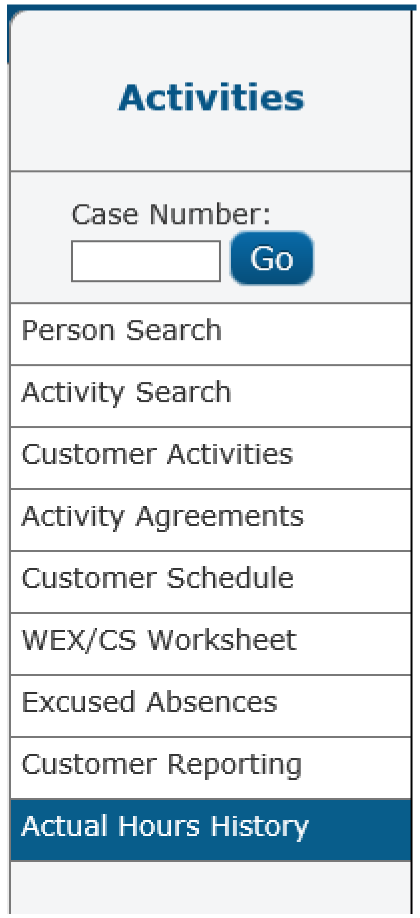

Figure 2.2.2.1 – Activities Task Navigation

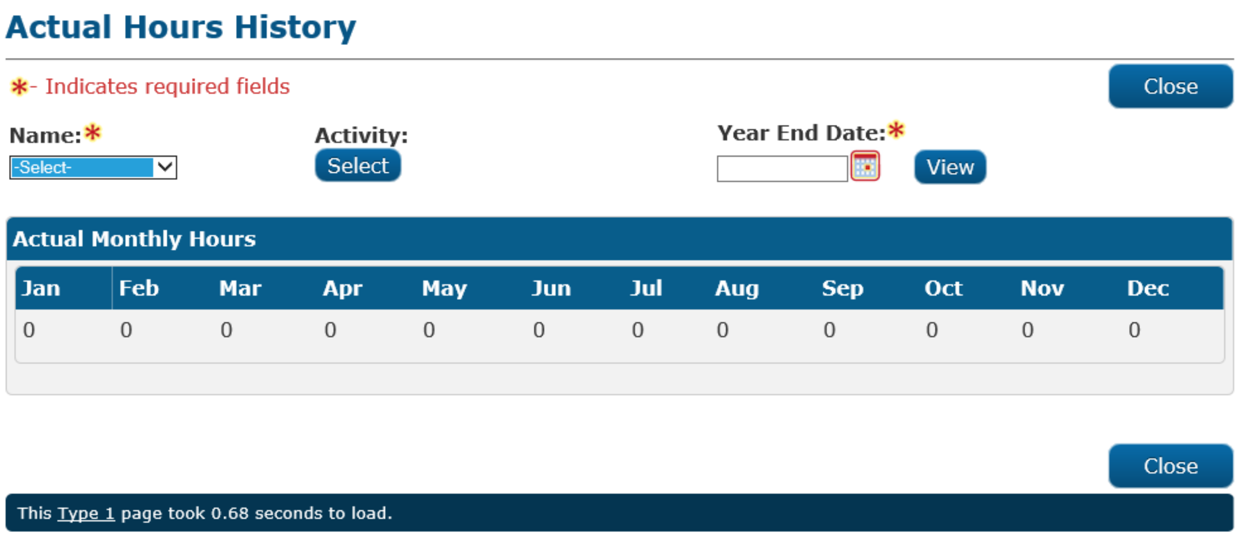

Figure 2.2.2.2 – Actual Hours History – Initial Page View

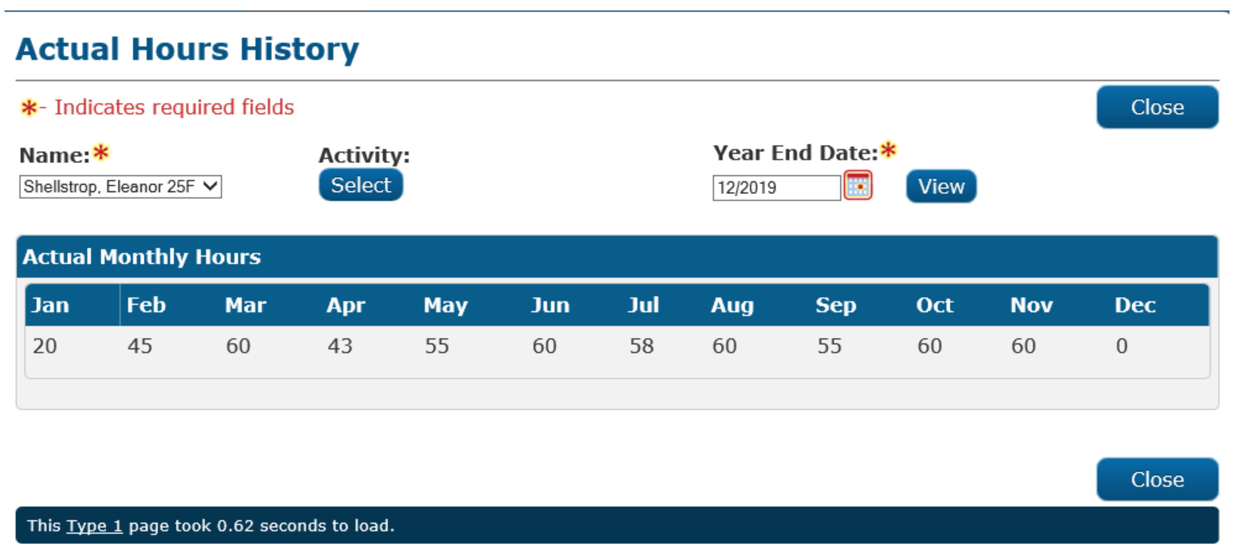

Figure 2.2.2.3 – Actual Hours History – View All Activities

Figure 2.2.2.4 – Select Customer Activities

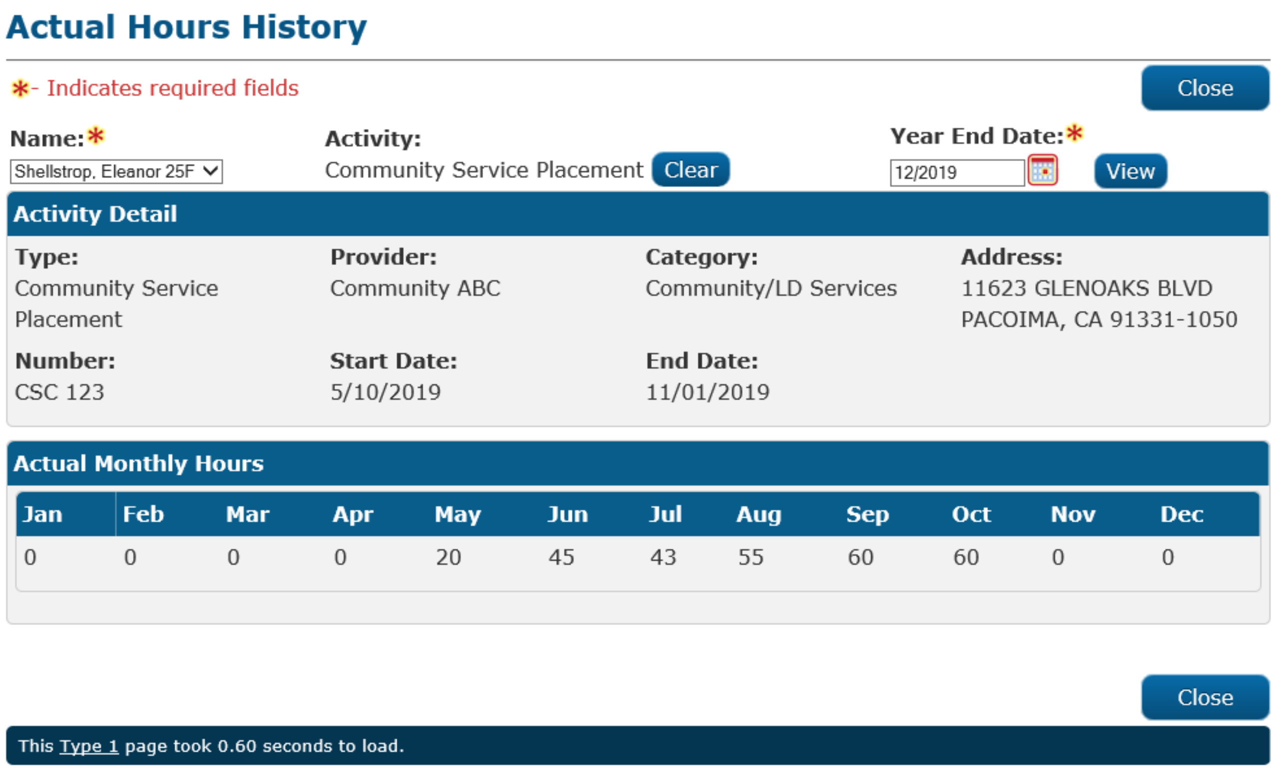

Figure 2.2.2.5 – Single Activity View

2.2.3 Description of Changes

1. Add a new page called Actual Hours History. This page will be accessed from the Empl. Services Global navigation, Activities Local navigation and a new task navigation item titled Actual Hours History.

2. When first accessing the Actual History page it will display the following fields to pull back data. See Mockup Figure 2.2.2.2 – Actual Hours History – Initial Page View.
3. See fields below for functionality:

Field Name	Details	Required
Name	List of all individuals associated to the Customer Activities List	Yes Validate when clicking View button.
Activity	Selected Activity will display Activity Type	No- no Activity selected will pull back total hours for all activities.
Year End Date	Displays the Actual Hours for the date provided. The date will only accept MM/YYYY format.	Yes Validate when clicking View button.
Select button	Navigates to the Select Customer Activities page. Uses the Name of the person to pull back all Activities associated to that person.	No
Clear button	Clears out the Activity Type information. When clicking Clear the Select button will display allowing for a new search.	No
Activity Detail Information		
Activity Detail Type	Codes Table Reference 26,56 - This captures the type of activity for which the customer is enrolled. CUST_ACTIV TYPE_CODE	No
Number	An alphanumeric identifier designated by the staff person that creates the activity to assist in intelligent identification of the activity. SERV_ACTIV ACTIV_NUM_IDENTIF	No
Category	Codes Table Reference 54 - This code captures a Customer Activity category. CUST_ACTIV CAT_CODE	No

Field Name	Details	Required
Provider	For the employment activity, this is EMP_NAME from the EMP table. For the SIP activity, this is SCHL_NAME from the SCHL_ATTEND table. For the service activity, this is ORG_NAME from the ORG table.	No
Address	For the employment activity, this is ADDR_DESCR from the EMP table. For the SIP activity, this is ADDR_DESCR from the SCHL_ATTEND table. For the service activity, this is ADDR_ID from the ORG_ADDR table.	No
Start Date	This is the date when the Customer's activity begins. CUST_ACTIV START_TIME	No
End Date	This column is used to store the End Date of a status for an activity. This field will be captured on the Activity Progress Detail Page. CUST_ACTIV_DETL END_DATE	No
Hours	Hours will be calculated from the Actual Hours input on the Activity Attendance Information page. Hours will display as decimals 00.00	N/A

4. When not selecting a specific Activity using the Select button then the total summary of all activities within the date range will calculate under the Actual Monthly hours. See Mockup Figure 2.2.2.3 – Actual Hours History – View All Activities.
5. When clicking the Select button next to Activities it will navigate the User to the Select Customer Activity page where the User can select a single Activity for which to retrieve the Actual hours. The Select Customer Activity page will display all activities associated to the Case person that was selected on the Actual Hours History page.
    a. When selecting the activity it will update the Actual Hours History page to display the Activity Type next to the Select button.
6. When adding the Year End Date (format MM/YYYY) and clicking the View button it will display the actual hours totaled for each month in the Actual Monthly Hours section. The months will display Jan-Dec for a given year.

2.2.4 Page Location

- **Global: Empl. Services**
- **Local: Activities**
- **Task: Actual Hours History**

2.2.5 Security Updates

See Security Matrix: CA-207121 DDID 2080 DDID 2081 Security Matrix.xls

1. Security Rights

Security Right	Right Description	Right to Group Mapping
ActualHoursHistoryView	View the Actual Hours History page and search for Actual Hours.	Actual Hours History View

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Actual Hours History View	View the Actual Hours History page and search for Actual Hours.	Employment Services Staff, Employment Services Supervisor, View Only, System Administrator

2.2.6 Page Mapping

Create Page mapping for the new page.

2.2.7 Page Usage/Data Volume Impacts

Low usage/volume expected.

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2080	The CONTRACTOR shall display a summary of attendance for a 12 month period for any activity within WTW for actual hours.	N/A	Create a new page called Actual Hours History to display hours for all activities for a Case Person for a given 12 month period.
2081	The CONTRACTOR shall update the system to capture daily, weekly, and monthly hours for all WTW activities.	**Original:** For scheduled hours of participation the daily, weekly, and monthly hours will be averaged into the existing scheduled weekly hours field on the customer activity detail page. **Revised:** For scheduled hours of participation the daily, weekly, and monthly hours will be averaged into the existing scheduled weekly hours field on the Activity Progress Summary page.	Update the Activity Progress Summary page to display a Calendar allowing daily, weekly or monthly hours entered for a given month.

CalSAWS

California Statewide Automated Welfare System

Design Document

SCR 207139 | DDID 2194

Add Positive Pay Interface Functionality to CalSAWS for C-IV Migration Counties

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Duke Vang
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
8/8/2019	1.0	Initial Revision	Duke Vang
9/4/2019	1.1	Content updates	Jyothirmayi Chavata
12/12/2019	1.2	Updated design to only reflect the C-IV Migration Counties	Duke Vang

Table of Contents

1 OVERVIEW

This design outlines the necessary updates to CalSAWS to generate Positive Pay Interface files for the various counties that utilizes Positive Pay functionality with their respective banks. This design will address migrating the existing Positve Pay interfaces for the C-IV Migration Counties.

1.1 Current Design

Positive Pay is a fraud detection tool, normally in the form of an interface, offered by most banks. Positive Pay interface definitions are unique to each bank. Los Angeles County does not generate a Positive Pay interface through CalSAWS.

1.2 Requests

Per Design Differences ID (DDID) 2194, CalSAWS will produce a Positive Pay interface for the following counties and their banks:

- Alameda County (Union Bank of CA)
- Amador County (Wells Fargo)
- Contra Costa County (Cach Federal Reserve)
- Fresno County (Bank of the West)
- Kings County (Bank of the West)
- Nevada County (Bank of the West)
- Orange County (Wells Fargo)
- Placer County (Wells Fargo)
- Riverside County (Union Bank)
- Sacramento County (Bank of the West)
- San Benito (Wells Fargo)
- San Diego (JP Morgan Chase)
- San Francisco (Bank of America San Francisco)
- San Luis Obispo County (Union Bank of CA)
- San Mateo (Union Bank of CA)
- Santa Barbara (Bank of America)
- Santa Clara (Wells Fargo)
- Santa Cruz (US Bank)
- Solano County (Wells Fargo)
- Sonoma County (Bank of America)
- Sutter County (US Bank)
- Tulare County (Union Bank)
- Tuolumne County (West America Bank)
- Ventura County (Wells Fargo)
- Yolo County (US Bank)
- Yuba County (US Bank)

1.3 Overview of Recommendations

All existing C-IV Positive Pay interfaces will be migrated into CalSAWS. The CalWIN Positive Pay Interfaces will be implemented with CA-212361 at a later release.

1.4 Assumptions

1. All batch scheduling will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.
2. All CalWIN Positive Pay Interfaces will be implemented with CA-212361 at a separate release.
3. Los Angeles County will not utilize the Positive Pay functionality.
4. All interface testing will be addressed by DDID 1979.
5. Positive Pay Interfaces for the following banks will be migrated from the latest C-IV repository:
   a. Bank of the West
   b. Union Bank
   c. US Bank
   d. Wells Fargo
   e. West America Bank
6. The 'org.civ.batch.UpdateBatchDate' module exists in the CalSAWS code base and has remained unchanged since baseline.
7. All "GRNDS" (Grounds) batch properties are deprecated and will not be migrated into CalSAWS.

2 RECOMMENDATIONS

2.1 Bank of the West Positive Pay Interface

2.1.1 Overview

The existing Bank of the West Positive Pay Interface in C-IV will be migrated to CalSAWS.

2.1.2 Description of Change

1. Migrate the latest Bank of the West Positive Pay module (org.civ.interfaces.financials.positivepay.BankOfTheWestPositivePayWriter) including any related constants, helper, and data access object (DAO) files from the latest C-IV code repository to CalSAWS.
2. Migrate the latest Bank of the West interface definition files from the latest C-IV code repository to CalSAWS:
    a. /config/BankOfTheWestPositivePayDefinition.xml
3. Migrate all the codes table reference values (CT 42) for the Bank of the West Pay Interface (PO29F107 and PO16F107) from the latest C-IV database to CalSAWS for Kings and Nevada County.
4. Migrate all the batch properties for the Bank of the West Positive Pay Interface (PO29F107 and PO16F107) from the latest C-IV code repository to CalSAWS for Kings and Nevada County. This includes the Writer, FTP, and Reader jobs (if applicable).

   Technical Note 1: The InterfaceFileName1, OUTPUT_FILE_NAME batch properties will need to be copied to the production batch properties (PROD_BATCH_JOB_PROP) and Test batch properties to TEST_BATCH_JOB_PROP table.

   Technical Note 2: All the "GRNDS" batch properties have been deprecated. If these batch properties exist in the legacy CalSAWS batch properties, they should be deleted too.

2.1.3 Execution Frequency

Daily – up to three times a day at 10 AM, 1 PM, and 4 PM. Refer to the C-IV Batch Scheduler.

2.1.4 Key Scheduling Dependencies

Predecessors: Inbound Warrant Print Reader (PIXXF100, PIXXF101, PIXXF102)

2.1.5 Counties Impacted

1. Kings County
2. Nevada County

2.1.6 Data Volume/Performance

1. Kings County: ~107 issuances per day
2. Nevada County: ~6 issuances per day

2.1.7 Interface Partner

Though the interface will be processed by Bank of the West, the positive pay files will be sent to the following counties and the counties will be responsible for forwarding the files to their bank (Bank of the West):

a. Kings County
b. Nevada County

2.1.8 Failure Procedure/Operational Instructions

There is no restartability for the positive pay interface. If the batch process fails, any unprocessed warrants will be picked up and sent in the next successful positive pay batch process.

2.2 Union Bank Positive Pay Interface

2.2.1 Overview

The existing Union Bank Positive Pay Interface in C-IV will be migrated to CalSAWS.

2.2.2 Description of Change

1. Migrate the latest Union Bank Positive Pay module (org.civ.interfaces.financials.positivepay.PositivePayWriter) including any related constants, helper, and DAO files from the latest C-IV code repository to CalSAWS.
2. Migrate the latest Union Bank interface definition files from the latest C-IV code repository to CalSAWS:
    a. /config/PositivePayOutDefinition.xml
3. Migrate all the codes table reference values (CT 42) for the Union Bank Positive Pay Interface (PO33F107) from the latest C-IV database to CalSAWS for Riverside County.
4. Migrate all the batch properties for the Union Bank Positive Pay Interface (PO33F107) from the latest C-IV code repository to CalSAWS

for Riverside County. This includes the Writer, FTP, and Reader jobs (if applicable).

Technical Note 1: The InterfaceFileName1, OUTPUT_FILE_NAME batch properties will need to be copied to the production batch properties (PROD_BATCH_JOB_PROP) and Test batch properties to TEST_BATCH_JOB_PROP table.

Technical Note 2: All the "GRNDS" batch properties have been deprecated. If these batch properties exist in the legacy CalSAWS batch properties, they should be deleted too.

2.2.3 Execution Frequency

Daily – up to three times a day at 10 AM, 1 PM, and 4 PM. Refer to the C-IV Batch Scheduler.

Note: For Riverside County, this job runs five times during a business day. This is due to the fact that Riverside County's schedule for running their Positive Pay interface was established at a frequency of 5 times a day before the standard "up to three times a day" was mandated for the Migration Counties.

2.2.4 Key Scheduling Dependencies

Predecessors: Inbound Warrant Print Reader (PIXXF100, PIXXF101, PIXXF102, PO33F100,PO33F101,PO33F102)

2.2.5 Counties Impacted

Riverside County

2.2.6 Data Volume/Performance

Riverside County: ~565 issuances per day

2.2.7 Interface Partner

Though the interface will be processed by Union Bank, the positive pay files will be sent to the following counties and the counties will be responsible for forwarding the files to their bank (Union Bank):

a. Riverside County

2.2.8 Failure Procedure/Operational Instructions

There is no restartability for the positive pay interface. If the batch process fails, any unprocessed warrants will be picked up and sent in the next successful positive pay batch process.

2.3 US Bank Positive Pay Interface

2.3.1 Overview

The existing US Bank Positive Pay Interface in C-IV will be migrated to CalSAWS.

2.3.2 Description of Change

1. Migrate the latest US Bank Positive Pay module (org.civ.interfaces.financials.positivepay.USBankofCaliforniaPositivePayWriter) including any related constants, helper, and DAO files from the latest C-IV code repository to CalSAWS.
2. Migrate the latest US Bank interface definition files from the latest C-IV code repository to CalSAWS:
    a. /config/USBankOfCaliforniaPositivePayDefinition.xml
3. Migrate all the codes table reference values (CT 42) for the US Bank Positive Pay Interface (PO51F107 and PO58F107) from the latest C-IV database to CalSAWS for Sutter and Yuba County.
4. Migrate all the batch properties for the US Bank Positive Pay Interface (PO51F107 and PO58F107) from the latest C-IV code repository to CalSAWS for Yuba and Sutter County. This includes the Writer, FTP, and Reader jobs (if applicable).

   Technical Note 1: The InterfaceFileName1, OUTPUT_FILE_NAME batch properties will need to be copied to the production batch properties (PROD_BATCH_JOB_PROP) and Test batch properties to TEST_BATCH_JOB_PROP table.

   Technical Note 2: All the "GRNDS" batch properties have been deprecated. If these batch properties exist in the legacy CalSAWS batch properties, they should be deleted too.

2.3.3 Execution Frequency

Daily – up to three times a day at 10 AM, 1 PM, and 4 PM. Refer to the C-IV Batch Scheduler.

2.3.4 Key Scheduling Dependencies

Predecessors: Inbound Warrant Print Reader (PIXXF100, PIXXF101, PIXXF102)

2.3.5 Counties Impacted

1. Sutter County
2. Yuba County

2.3.6 Data Volume/Performance

1. Sutter County: ~28.7 issuances per day
2. Yuba County: ~20.5 issuances per day

2.3.7 Interface Partner

Though the interface will be processed by US Bank, the positive pay files will be sent to the following counties and the counties will be responsible for forwarding the files to their bank (US Bank):

a. Sutter County
b. Yuba County

2.3.8 Failure Procedure/Operational Instructions

There is no restartability for the positive pay interface. If the batch process fails, any unprocessed warrants will be picked up and sent in the next successful positive pay batch process.

2.4 Wells Fargo Positive Pay Interface

2.4.1 Overview

The existing Wells Fargo Positive Pay Interface in C-IV will be migrated to CalSAWS.

2.4.2 Description of Change

1. Migrate the latest Wells Fargo Positive Pay module (org.civ.interfaces.financials.positivepay.WellsFargoPositivePayWriter) including any related constants, helper, and DAO files from the latest C-IV code repository to CalSAWS.
2. Migrate the latest Wells Fargo interface definition files from the latest C-IV code repository to CalSAWS:
    a. civ/batch/src/config/SanBenitoPositivePayDefinition.xml
        i. Rename the "SanBenitoPositivePayDefinition.xml" file to "WellsFargoPositivePayDefinition.xml"

Note: The “SanBenitoPositivePayDefinition.xml” layout is the true Wells Fargo positive pay layout. The migrated batch properties will need to be updated to reflect the name change.

   b. civ/batch/src/config/WellsFargoPositivePayDefinition.xml
      i. Rename the “WellsFargoPositivePayDefinition.xml” to “ModifiedBofAPositivePayDefinition.xml”

Note: The “WellsFargoPositivePayDefinition.xml” layout that Amador County currently uses is actually a modified Bank of America positive pay layout. The migrated batch properties will need to be updated to reflect the name change.

3. Migrate all the codes table reference values (CT 42) for the Wells Fargo Positive Pay Interface (PO03F107 and PO41F107) from the latest C-IV database to CalSAWS for Amador and San Benito County.
4. Migrate all the batch properties for the Wells Fargo Positive Pay Interface (PO03F107 and PO41F107) from the latest C-IV code repository to CalSAWS for Amador and San Benito County. This includes the Writer, FTP, and Reader jobs (if applicable).

   Technical Note 1: The InterfaceFileName1, OUTPUT_FILE_NAME batch properties will need to be copied to the production batch properties (PROD_BATCH_JOB_PROP) and Test batch properties to TEST_BATCH_JOB_PROP table.

   Technical Note 2: All the “GRNDS” batch properties have been deprecated. If these batch properties exist in the legacy CalSAWS batch properties, they should be deleted too.

2.4.3 Execution Frequency

Daily – up to three times a day at 10 AM, 1 PM, and 4 PM. Refer to the C-IV Batch Scheduler.

2.4.4 Key Scheduling Dependencies

Predecessors: Inbound Warrant Print Reader (PIXXF100, PIXXF101, PIXXF102)

2.4.5 Counties Impacted

1. Amador County
2. San Benito County

2.4.6 Data Volume/Performance

1. Amador County: ~8.3 issuances per day

2. San Benito County: ~11.3 issuances per day

2.4.7 Interface Partner

Though the interface will be processed by Wells Fargo, the positive pay files will be sent to the following counties and the counties will be responsible for forwarding the files to their bank (Wells Fargo):

a. Amador County
b. San Benito County

2.4.8 Failure Procedure/Operational Instructions

There is no restartability for the positive pay interface. If the batch process fails, any unprocessed warrants will be picked up and sent in the next successful positive pay batch process.

2.5 West America Bank Positive Pay Interface

2.5.1 Overview

The existing West America Bank Positive Pay Interface in C-IV will be migrated to CalSAWS.

2.5.2 Description of Change

1. Migrate the latest West America Bank Positive Pay module (org.civ.interfaces.financials.positivepay. WestAmericaBankPositivePayWriter) including any related constants, helper, and DAO files from the latest C-IV code repository to CalSAWS.
2. Migrate the latest West America Bank interface definition files from the latest C-IV code repository to CalSAWS:
    a. /config/WestAmericaBankPositivePayDefinition.xml
3. Migrate all the codes table reference values (CT 42) for the West America Bank Positive Pay Interface (PO55F107) from the latest C-IV database to CalSAWS for Tuolumne County.
4. Migrate all the batch properties for the West America Bank Positive Pay Interface (PO55F107) from the latest C-IV code repository to CalSAWS for Tuolumne County. This includes the Writer, FTP, and Reader jobs (if applicable).

    Technical Note 1: The InterfaceFileName1, OUTPUT_FILE_NAME batch properties will need to be copied to the production batch properties (PROD_BATCH_JOB_PROP) and Test batch properties to TEST_BATCH_JOB_PROP table.

Technical Note 2: All the "GRNDS" batch properties have been deprecated. If these batch properties exist in the legacy CalSAWS batch properties, they should be deleted too.

2.5.3 Execution Frequency

Daily – up to three times a day at 10 AM, 1 PM, and 4 PM. Refer to the C-IV Batch Scheduler.

2.5.4 Key Scheduling Dependencies

Predecessors: Inbound Warrant Print Reader (PIXXF100, PIXXF101, PIXXF102)

2.5.5 Counties Impacted

1. Tuolumne County

2.5.6 Data Volume/Performance

1. Tuolumne County: ~10.1 issuances per day

2.5.7 Interface Partner

Though the interface will be processed by West America Bank, the positive pay files will be sent to the following counties and the counties will be responsible for forwarding the files to their bank (West America Bank):

   a. Tuolumne County

2.5.8 Failure Procedure/Operational Instructions

There is no restartability for the positive pay interface. If the batch process fails, any unprocessed warrants will be picked up and sent in the next successful positive pay batch process.

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2194	**Original:** The CONTRACTOR shall build a batch interface to read a positive pay file in a standardized format provided programmatically by the 58 County fiscal systems in order to update the status of printed warrants in CalSAWS Software records. **Revised**: The CONTRACTOR shall build a Positive Pay interface for the following counties and their respective banks: • Alameda County (Union Bank of CA) • Amador County (Wells Fargo) • Contra Costa County (Cach Federal Reserve) • Fresno County (Bank of the West) • Kings County (Bank of the West) • Nevada County (Bank of the West) • Orange County (Wells Fargo) • Placer County (Wells Fargo) • Riverside County (Union Bank) • Sacramento County (Bank of the West) • Santa Barbara (Bank of America) • Santa Clara (Wells Fargo) • Santa Cruz (US Bank) • San Benito (Wells Fargo) • San Diego (JP Morgan Chase) • San Francisco (Bank of America San Francisco) • San Luis Obispo County (Union Bank of CA) • San Mateo (Union Bank of CA) • Solano County (Wells Fargo) • Sonoma County (Bank of America) • Sutter County (US Bank) • Tulare County (Union Bank) • Tuolumne County (West America Bank) • Ventura County (Wells Fargo) • Yolo County (US Bank) • Yuba County (US Bank)	**Original:** - The frequency will be up to two times a day. - One of the existing positive pay interface layout will be utilized. Currently we have positive pay layouts for the following banks. 1. Wells Fargo 2. Bank of the West 3. US Bank of California 4. West America **Revised**: The frequency will be up to 3 times a day.	Added Positive Pay interface for C-IV Migration Counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207153 | DDID 2132

Create New Receipt Form for Receipt Detail and Transaction Detail Page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/05/2019	1.0	Original	Pramukh Karla
12/26/2019	2.0	Added a note to section 2.1.2 1(a) about the forms visibility on Template Repository page.	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to add the new receipt form CSF (CalSAWS State Form) 102 to CalSAWS and generate this new receipt form from Receipt Detail Page and Transaction Detail page for the 57 migration counties.

1.1 Current Design

DPTRCPT – Departmental Receipt generates from the Receipt Detail Page and Transaction Detail page for Los Angeles County.

1.2 Requests

Per DDID 2132, the CONTRACTOR will develop a standardized receipt form for the 57 migration counties when the "Generate Form" button is clicked on the Receipt Detail page and Transaction Detail page. DPTRCPT will continue to generate for Los Angeles County.

1.3 Overview of Recommendations

1. Add a standardized receipt form for the 57 migration counties.

2. Add the new receipt form to the template repository

3. Generate the new receipt form when Generate Form button is clicked on Receipt Detail page and Transaction Detail page for the 57 migration counties and generate the existing DPTRCPT for Los Angeles County.

1.4 Assumptions

1. CSF 102 will have the CalSAWS Standard Header.

2. Comment section on the new receipt form will not be translated to Spanish when a Spanish version of receipt form is generated. It will be populated with the information entered by the users on the Receipt Detail or Transaction Detail page.

2 RECOMMENDATIONS

2.1 Add new CSF 102 – Receipt Form

2.1.1 Overview

This section will cover the changes to add a new Receipt Form to CalSAWS.

State Form: CSF 102

Programs: All

Attached Forms: N/A

Forms Category: Form

Languages:

English, Spanish

2.1.2 Description of Changes

1. Create a new CSF 102 – Receipt Form that can be generated from template repository

a. Create CSF 102 Form XDP

Create a CSF 102 form XDP with just 1 impression.

Form Header: CalSAWS Standard Header

Form Title: Receipt Form

Form Number: CSF 102

Include NA Back 9: No

Form Mockup/Example: See Supporting Document #1

b. Add Form to Template Repository

The CSF 102 - Receipt Form will be added to Template Repository. This form will prepopulate the following fields.

Note: Both CSF 102 and DPTRCPT form will be visible on template repository for Los Angeles County and only CSF 102 form will be visible for other than Los Angeles counties.

Required Document Parameters (when generated from template repository): Receipt Number, Language.

Populate the following elements on the CSF 102 when the form is triggered from Template Repository, Receipt Detail page, or Transaction Detail page

Section	Field	Description
CSF 102 Page 1	Receipt Number	Will be populated with RECEIPT.ID if the RECEIPT.MANUAL_RECEIPT_NUM is not entered.
CSF 102 Page 1	Office	Office Name
CSF 102 Page 1	Received $	RECEIPT.RECEIPT_AMT
CSF 102 Page 1	AMOUNT	RECEIPT.RECEIPT_AMT in Words. For Spanish form the amount in words will be populated in Spanish language. Please refer to the Supporting Document #2 for Spanish translations.
CSF 102 Page 1	Received Date	RECEIPT.RECVD_DATE
CSF 102 Page 1	Payment Type	RECEIPT.PMT_TYPE_CODE. Will be populated with the decoded value from CODE_DETL.SHORT_DECODE_NAME. Please refer to the Supporting Document #2 for Spanish translations.
CSF 102 Page 1	Payment Method	RECEIPT.PMT_METH_CODE. Will be populated with the decoded value from CODE_DETL.SHORT_DECODE_NAME. Please refer to the Supporting Document #2 for Spanish translations.
CSF 102 Page 1	Source Document Number	RECEIPT.SRC_DOC_IDENTIF
CSF 102 Page 1	Aid Program	RECEIPT.PGM_CODE
CSF 102 Page 1	Received From (Payor Name)	RECEIPT.PAYER_NAME

Section	Field	Description
CSF 102 Page 1	Payor Address	ADDR.LINE_1_ADDR + ADDR.LINE_2_ADDR + ADDR.CITY_NAME + ADDR.STATE_CODE + ADDR.ZIP_CODE_NUM + ADDR.ZIP_CODE_SUFFIX All the fields will be concatenated and separated by a space.
CSF 102 Page 1	Received By	Name of the staff form RECEIPT.CREATED_BY Name Format: "First_Name Last_Name"
CSF 102 Page 1	Title	Decode value of STAFF.CLASS_CODE
CSF 102 Page 1	Initials	Will be manually entered
CSF 102 Page 1	Comments	RECEIPT.RECEIPT_DESCR

c. Add Form Print Options and Mailing Requirements

The following Print Options will be included for the CSF 102 Form:

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

2.2 CSF 102 form generation from Receipt Detail page and Transaction Detail page

2.2.1 Overview

Update the existing receipt form generation logic on the Receipt Detail page and Transaction Detail page so that CSF 102 - Receipt Form generates for the 57 counties and the existing DPTRCPT generates for Los Angeles County.

2.2.2 Description of Changes

1. Update the Generate Form button on Receipt Detail page and Transaction Detail page.

a. Generation Conditions

When the Generate Form button is clicked on the Receipt Detail and Transaction Detail pages for Los Angeles County, generate the existing DPTRCPT – Departmental Receipt form. For the other 57 counties, generate the CSF 102 – Receipt Form.

3 SUPPORTING DOCUMENTS

Document Number	Description	Documents
1	CSF 102	CSF102_EN.pdf CSF102_SP.pdf
2	CSF 102 Field Translations	Receipt Translations.xlsx

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2132	**Original:** The CONTRACTOR shall develop a standardized receipt form for use by all 58 counties when the "Generate Form" button is clicked on the Receipt Detail page and Transaction Detail page. The form content and auto population will be determined during design. **Revised:** The CONTRACTOR shall develop a standardized receipt form for the 57 migration counties when the "Generate Form" button is clicked on the Receipt Detail page and Transaction Detail page. The existing DPTRCPT will generate for Los Angeles County only.	**Original:** - The following requirement states "The form content and auto population will be determined during design". This requirement references new scope that will be defined during the Design phase. CONTRACTOR has not estimated this future scope. When the future scope is defined, CONTRACTOR will provide an updated estimate. - The existing forms from the LRS and C-IV systems will not be utilized. A new form will be created. - The Form will not exceed 1 page, it will be available via the template repository only, have no more than 5 form fields auto-populated and be created in English and Spanish languages. **Revised:**	Requirement is met by adding a new CSF 102 Receipt form to CalSAWS, which will be generated from template repository, Receipt Detail page, and Transaction Detail page.

California Statewide Automated Welfare System

Design Document

SCR 207157 | DDID 2128

Migrate Tax Intercept Interfaces into CalSAWS

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Lalitha Valamarthi
	Reviewed By	Duke Vang, Jyothirmayi Chavata, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
05/02/2019	1.0	Initial Draft	Lalitha Valamarthi
5/6/2019	1.1	Grammatical Updates	Duke Vang
11/13/2019	1.2	Added additional details to the batch jobs	Duke Vang
12/19/2019	1.3	Updates with comments from QA review	Duke Vang
1/27/2020	1.4	Updates with comments from DEL review	Duke Vang

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1 OVERVIEW

1.1 Current Design

All Tax Intercepts are done externally outside CalSAWS through the Treasury Tax Collections (TTC) agency for Los Angeles County. No delinquent CalWORKs (CW) or CalFresh (CF) Recovery Accounts are referred to the Welfare Intercept System (WIS) through the CalSAWS System.

1.2 Requests

Per Design Differences Identification (DDID) 2128, the existing C-IV Tax Intercept Interfaces to WIS need to be migrated into CalSAWS for the 57 Migration Counties.

1.3 Overview of Recommendations

The Tax Intercept Interfaces from C-IV will be migrated into CalSAWS along with any database, batch properties, and codes table updates.

1.4 Assumptions

1. This requirement applies to all active Tax Intercept-related Batch jobs currently available in C-IV to migrate into CalSAWS, including Inbound/Outbound FTP jobs, inbound readers, outbound writers, and batch processing jobs. There is an estimated total of 19 jobs per County. These jobs will be county specific. These jobs will be scheduled to run based on a given County's opt in or out status, which will be determined at Migration via a County Request for Information (CRFI).
2. Los Angeles County will not be utilizing the Tax Intercept functionality.
3. The Treasury Offset Program (TOP) Cycle Numbers auto posted by the TOP Tax Intercept Transactions will not be used as criteria for scoping in transactions by the FNS 209.
4. Data population for any new database tables will be handle by Conversion.
5. The Riverside County Tax Intercept Converter (PB33F604) and Tax intercept Cause Code Loader (PB33F605) have been discontinued and will not be migrated to CalSAWS.
6. All batch scheduling and county opt in/opt out decisions will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.
7. For the Auto Posting of TOP Intercept Transaction batch job, a new On–Request report was created in C-IV called "TOP Weekly Intercept Transaction Report". This report will be migrated to CalSAWS as part of DDID 1056.
8. The 2020 calendar year WIS Weekly Cycle Numbers (CT 2701) are populated in the C-IV System at the time this DDID is implemented.
9. All partner interface testing will be addressed by DDID 1970.

2 RECOMMENDATIONS

2.1 Tax Intercept Interfaces

2.1.1 Overview

Migrate all the latest modules of the Tax Intercept interfaces from the C-IV code repository. This includes 2 outbound writer jobs, 7 inbound reader jobs, 2 outbound FTP jobs, 7 inbound FTP jobs, and 1 batch process for auto posting TOP transactions (total 19 jobs).

2.1.2 Description of changes

1. Create a new Category called "TOP Tax Intercept Error Reason Code". The new Category ID will be 493 and will have no Field Label Descriptions.
2. Create the following Codes Table values for the new Category 493:

Code	Short/Long Description	Begin Date	End Date
TA	TOP Offset transaction amount is not greater than zero	1/1/1000	12/31/9999
RA	Recovery Account could not be found	1/1/1000	12/31/9999
UN	Unknown	1/1/1000	12/31/9999

3. Update the Field Label Description for the WIS Weekly Cycle Number (CT 2701) to "Batch Date:1:D;Outbound Week Cycle Number:2:S;State Cycle Number:3:S;Quarter Begin Date:4:D;Cut Off Date:5:D;".

Category	Reference Table	Description
2701	REFER_TABLE_3_DESCR	State Cycle Number
2701	REFER_TABLE_4_DESCR	Quarter Begin Date
2701	REFER_TABLE_4_DESCR	Cut Off Date

4. Populate the Codes Table values for the WIS Weekly Cycle Number (CT 2701) with the 2020 calendar year Batch Date, Outbound Week Cycle Number, State Cycle Number, Quarter Begin Date, and Cut Off Date. These values can be obtained from WIS or from the current C-IV Codes table (CT 2701).
5. Create a DBCR to add the following Tax Intercept tables (refer to Appendix 4.1, 4.2, and 4.3 for data model details):
    - COFILE_WISBALANCE
    - TOP_RAT

- UNPOSTED_TOP_RAT

6. Migrate and copy the batch properties for the following Reader and Writer jobs for all 57 Migration Counties:
    - PIXXF620 – TOP Intercept Error Reader
    - PIXXF621 – TOP Intercept Reader
    - PIXXF622 – TOP Reversal Reader
    - PIXXF623 – FTB/TOP Error Reader
    - PIXXF624 – FTB/TOP Reader
    - PIXXF625 – FTB Intercept Reader
    - PIXXF626 – FTB Intercept Error Reader
    - POXXF504 – Tax Intercept Balancer Writer
    - POXXF604 – Tax Intercept Writer
    - PB00F621 – Auto post TOP Intercept Transactions
7. Migrate and copy the batch properties for the following FTP jobs for all 57 Migration Counties:
    - PIXXF671 – TOP Intercept Error Inbound FTP
    - PIXXF672 – TOP Intercept Inbound FTP
    - PIXXF673 – TOP Reversal Inbound FTP
    - PIXXF674 – FTB/TOP Error Inbound FTP
    - PIXXF675 – FTB/TOP Inbound FTP
    - PIXXF676 – FTB Intercept Inbound FTP
    - PIXXF677 – FTB Intercept Error Inbound FTP
    - POXXF544 – Tax Intercept Balancer Outbound FTP
    - POXXF644 – Tax Intercept Outbound FTP
8. Migrate the latest modules from the C-IV code repository for all the batch jobs mentioned in Recommendation 2.1.2.6 above.

    Technical Note: There may be some "code uplifting" changes necessary in order to get the modules to work in CalSAWS.
9. Migrate the latest Tumbleweed Certificate from C-IV into CalSAWS.

2.1.3 Execution Frequency

N/A – The execution frequency will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605. However all inbound reader and outbound writer jobs are normally executed weekly on Fridays. The annual WIS Balancer jobs are executed annually around the month of August.

2.1.4 Key Scheduling Dependencies

N/A – All scheduling dependencies will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.

2.1.5 Counties Impacted

C-IV Counties: All

CalWIN Counties: TBD with CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.

Los Angeles County: No

2.1.6 Data Volume/Performance

Weekly average for the 2018 tax year based on all C-IV Counties:

- PIXXF620 – TOP Intercept Error Reader: **88 records**
- PIXXF621 – TOP Intercept Reader: **303 records**
- PIXXF622 – TOP Reversal Reader: **80 records**
- PIXXF623 – FTB/TOP Error Reader: **1,845 records**
- PIXXF624 – FTB/TOP Reader: **7,780 records**
- PIXXF625 – FTB Intercept Reader: **157 records**
- PIXXF626 – FTB Intercept Error Reader: **79 records**
- POXXF504 – Tax Intercept Balancer Writer: **Not Applicable**
- POXXF604 – Tax Intercept Writer: **36,302 records**
- PB00F621 – Auto post TOP Intercept Transactions: **303 records**

2.1.7 Interface Partner

Welfare Intercept System

2.1.8 Failure Procedure/Operational Instructions

N/A – The failure procedure/operational instructions will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2128	The CONTRACTOR shall update the tax intercept batch jobs to allow the 57 Counties to opt in or out at the time of migration.	**Original:** This requirement applies to all active Tax Intercept-related Batch jobs currently available in LRS. These jobs will be configured to run based on a given County's opt in or out status. The Batch properties and scheduling will have to be updated for each wave separately. **New:** This requirement applies to all active Tax Intercept-related Batch jobs currently available in C-IV to migrate into CalSAWS(Inbound/Outbound FTP jobs, Inbound readers, outbound writers, and batch processing jobs) Estimated total of 19 jobs per County. These jobs will remain county specific.	1. Migrated the latest C-IV Tax Intercept modules to CalSAWS. 2. Migrated all Tax Intercept related data model changes to CalSAWS. 3. Migrated all Tax Intercept related Codes Table changes to CalSAWS. 4. Replicated all Tax Intercept batch properties for all migration counties.

4 APPENDIX

4.1 COFILE_WISBALANCE

The new table COFILE_WISBALANCE will have following columns:

COLUMN NAME	DATA TYPE	NULLABILITY	COMMENTS
RECORD_TYPE	VARCHAR2(2 BYTE)	Yes	
COUNTY_CODE	VARCHAR2(3 BYTE)	Yes	
YEAR_OF_SUBMISSION	VARCHAR2(5 BYTE)	Yes	
WORKER_NUMBER	VARCHAR2(15 BYTE)	Yes	
SSN	VARCHAR2(15 BYTE)	Yes	
AID_STAT_ACCT	VARCHAR2(30 BYTE)	Yes	
NOTIF_DATE	DATE	Yes	
LAST_NAME	VARCHAR2(50 BYTE)	Yes	
FIRST_NAME	VARCHAR2(50 BYTE)	Yes	
MID_NAME	VARCHAR2(30 BYTE)	Yes	
CARE_OF_ADDRESS	VARCHAR2(50 BYTE)	Yes	
LINE_1_ADDR	VARCHAR2(50 BYTE)	Yes	
CITY_NAME	VARCHAR2(50 BYTE)	Yes	
STATE_CODE	VARCHAR2(15 BYTE)	Yes	
ZIP_CODE	VARCHAR2(15 BYTE)	Yes	
JUDGEMENT_INDICATOR	VARCHAR2(3 BYTE)	Yes	
TOP_SUSPEND_INDICATOR	VARCHAR2(3 BYTE)	Yes	
FTB_CW_ADMIN_ERROR_AMOUNT	NUMBER(10,2)	Yes	
FTB_CW_IPV_AMOUNT	NUMBER(10,2)	Yes	
FTB_CW_IHE_AMOUNT	NUMBER(10,2)	Yes	
FTB_FS_ADMIN_ERROR_AMOUNT	NUMBER(10,2)	Yes	
FTB_FS_IPV_AMOUNT	NUMBER(10,2)	Yes	
FTB_FS_IHE_AMOUNT	NUMBER(10,2)	Yes	
IRS_CW_ADMIN_ERROR_AMOUNT	NUMBER(10,2)	Yes	
IRS_CW_IPV_AMOUNT	NUMBER(10,2)	Yes	
IRS_CW_IHE_AMOUNT	NUMBER(10,2)	Yes	
IRS_FS_ADMIN_ERROR_AMOUNT	NUMBER(10,2)	Yes	
IRS_FS_IPV_AMOUNT	NUMBER(10,2)	Yes	

4.2 TOP_RAT

The new table TOP_RAT will have following columns:

COLUMN NAME	DATA TYPE	NULLABILITY	COMMENTS
ID	NUMBER	No	This is a system-generated unique identifier for an instance of this table to be used as the primary key.
RECOV_ACCT_TRANSACT_ID	NUMBER	No	This is a system-generated unique identifier for an instance of this table propagated from the parent table primary key.
TI_TOP_INTRCPT_ID	NUMBER	No	This is a system-generated unique identifier for an instance of this table propagated from the parent table primary key.
CREATED_BY	VARCHAR2(30 BYTE)	No	This column captures the name of the person who created a specific instance on this table. This field will be written by the application.
UPDATED_BY	VARCHAR2(30 BYTE)	No	This column captures the name of the person who last updated a specific instance on this table. This field will be written by the application.
CREATED_ON	TIMESTAMP(6)	No	This column captures the DATE/TIME when a specific instance of this table was created. This field will be populated by the DATABASE.
UPDATED_ON	TIMESTAMP(6)	No	This column captures the DATE/TIME when a specific instance of this table was last updated. This field will be populated by the DATABASE.

NOTE:

1. Add foreign key constraints to the column TOP_RAT.RECOV_ACCT_TRANSACT_ID to table RECOV_ACCT_TRANSACT.
2. Add foreign key constraints to the column TOP_RAT. TI_TOP_INTRCPT_ID to table TI_TOP_INTRCPT.

4.3 UNPOSTED_TOP_RAT

The new table UNPOSTED_TOP_RAT will have following columns:

COLUMN NAME	DATA TYPE	NULLABILITY	COMMENTS
ID	NUMBER	No	This is a system-generated unique identifier for an instance of this table to be used as the primary key.
TI_TOP_INTRCPT_ID	NUMBER	No	This is a system-generated unique identifier for an instance of this table propagated from the parent table primary key.
ERR_RSN_CODE	VARCHAR2(30 BYTE)	No	493 - This column captures the error reason code for which the record is not auto posted.
CREATED_BY	VARCHAR2(30 BYTE)	No	This column captures the name of the person who created a specific instance on this table. This field will be written by the application.
UPDATED_BY	VARCHAR2(30 BYTE)	No	This column captures the name of the person who last updated a specific instance on this table. This field will be written by the application.
CREATED_ON	TIMESTAMP(6)	No	This column captures the DATE/TIME when a specific instance of this table was created. This field will be populated by the DATABASE.
UPDATED_ON	TIMESTAMP(6)	No	This column captures the DATE/TIME when a specific instance of this table was last updated. This field will be populated by the DATABASE.

NOTE: Add foreign key constraints to the column TI_TOP_INTRCPT_ID to table TI_TOP_INTRCPT.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207191 | DDID 2086

Add View History to Employment Service pages

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Kim Lam
	Reviewed By	Melissa Mendoza, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/02/2019	1.0	Initial Document	Kim Lam

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1 OVERVIEW

This SCR will add the View History button to several Employment Services pages.

1.1 Current Design

Certain Employee Services pages in CalSAWS do not have a View History button to view a history of data changes on the Transaction History Detail page.

1.2 Requests

The CONTRACTOR shall add a View History button to the following Employment Services pages and track the history of changes on the corresponding Transaction History Detail page:

1) ELP Authorization List
2) CFET Status List
3) WTW Status List
4) REP Status List
5) Cal-Learn Progress List
6) GROW Status List
7) Assessment Results List
8) SIP List
9) Skills List
10) Strengths List
11) Test Scores List
12) Goals List
13) Customer Activities List
14) Action Plan List
15) Non-Compliance Outreach List
16) Barriers List
17) Demand Occupation List
18) Resume List
19) Sanction Track List
20) Job Readiness Track Summary

1.3 Overview of Recommendations

1. Add a View History button for specified Employment Services List pages.
2. Create associated Transaction History Detail page for each page where the View History button will be added.

1.4 Assumptions

1. Transaction History Detail page will not display initial update for already existing records. Transaction History will only start displaying edit history values after the user makes a second update to the record.

2 RECOMMENDATIONS

2.1 Employment Services Pages

2.1.1 Overview

The Employment Services pages will be updated to have a View History button, that if clicked, opens up the associated Transaction History Detail page.

2.1.2 Employment Services Pages Mockups

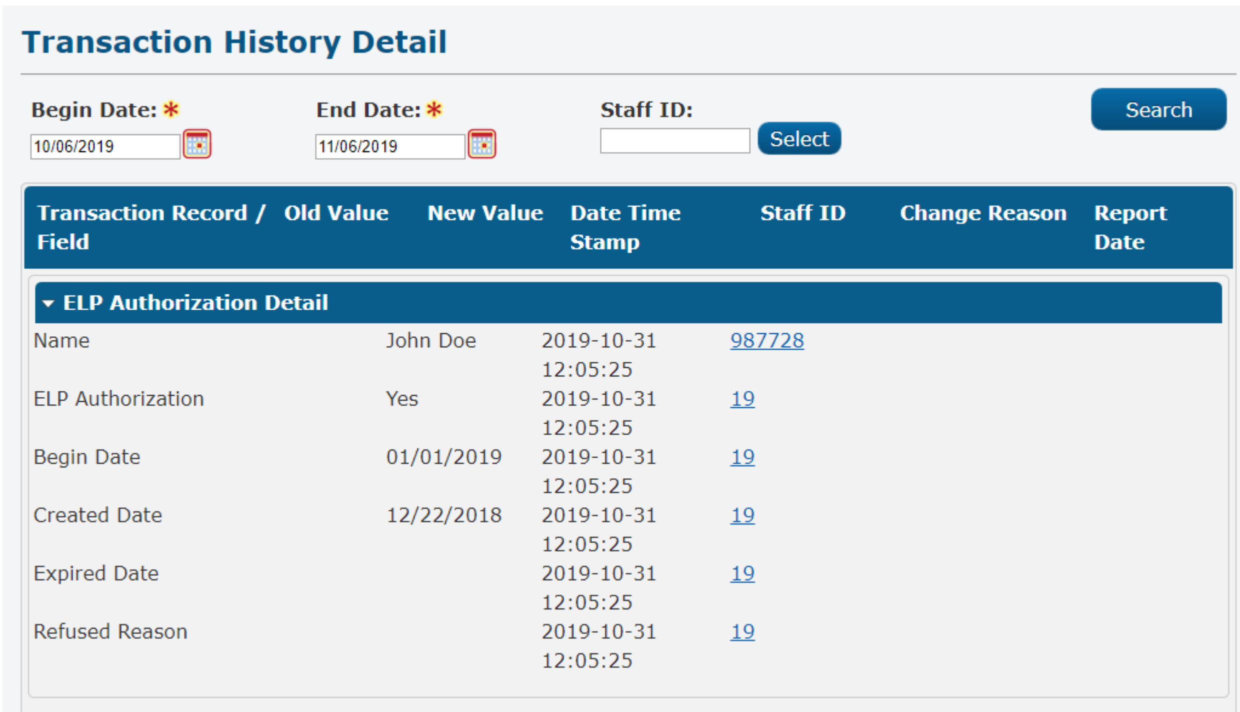


Figure 2.1.1 – Transaction History Detail page for ELP Authorization Detail page

Note: In addition to the above Figure 2.1.1, there should be a Transaction History Detail page for all Detail pages associated with the List pages below.

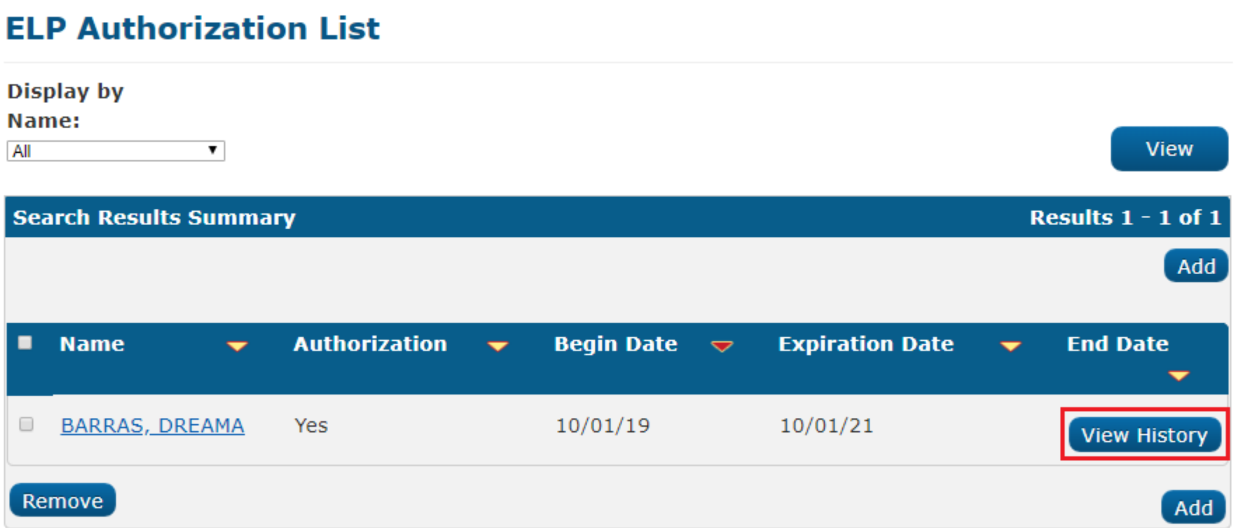


Figure 2.1.2 – ELP Authorization List page – Add View History button

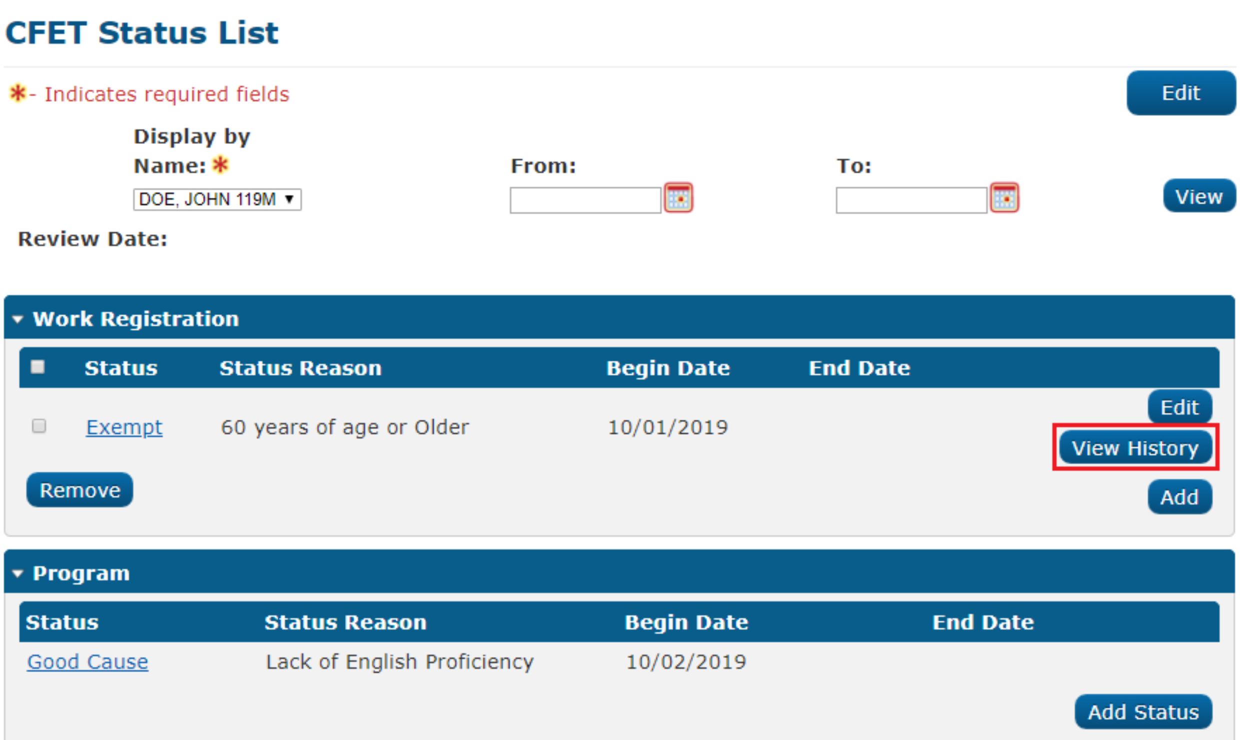


Figure 2.1.3 – CFET Status List – Add View History button

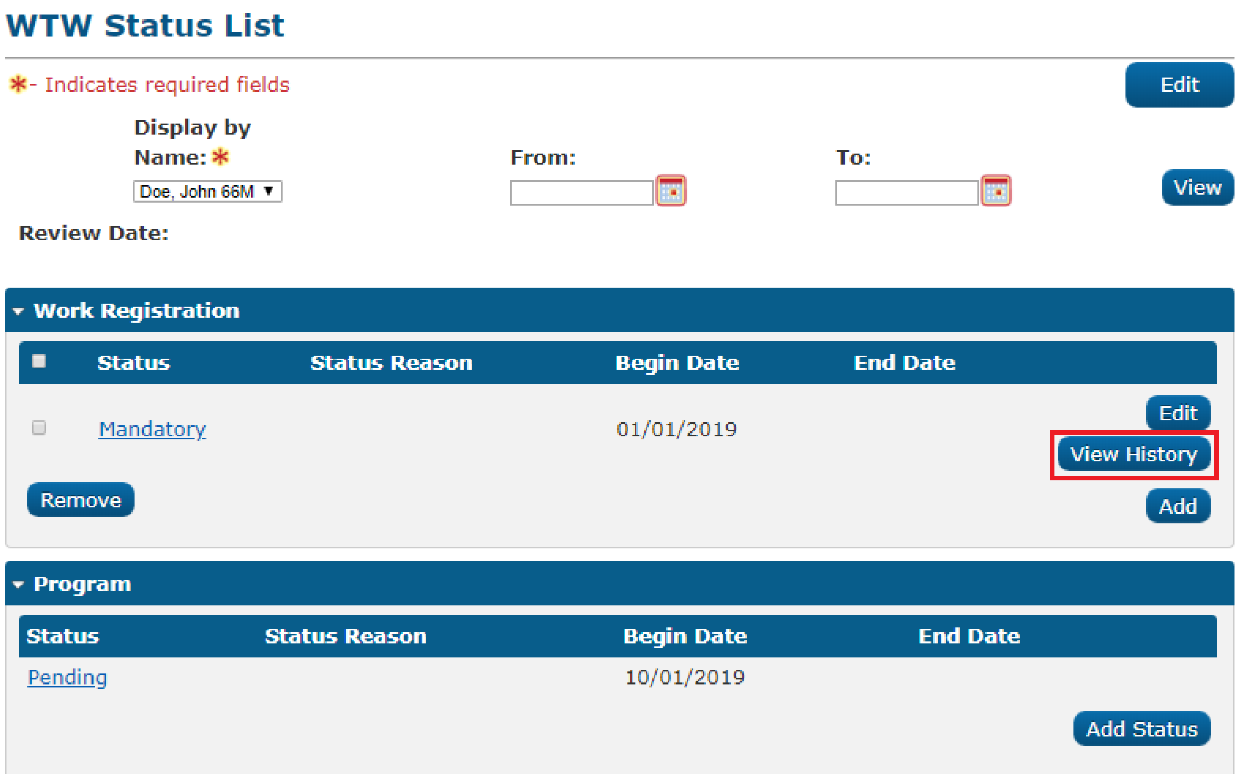


Figure 2.1.4 – WTW Status List – Add View History button

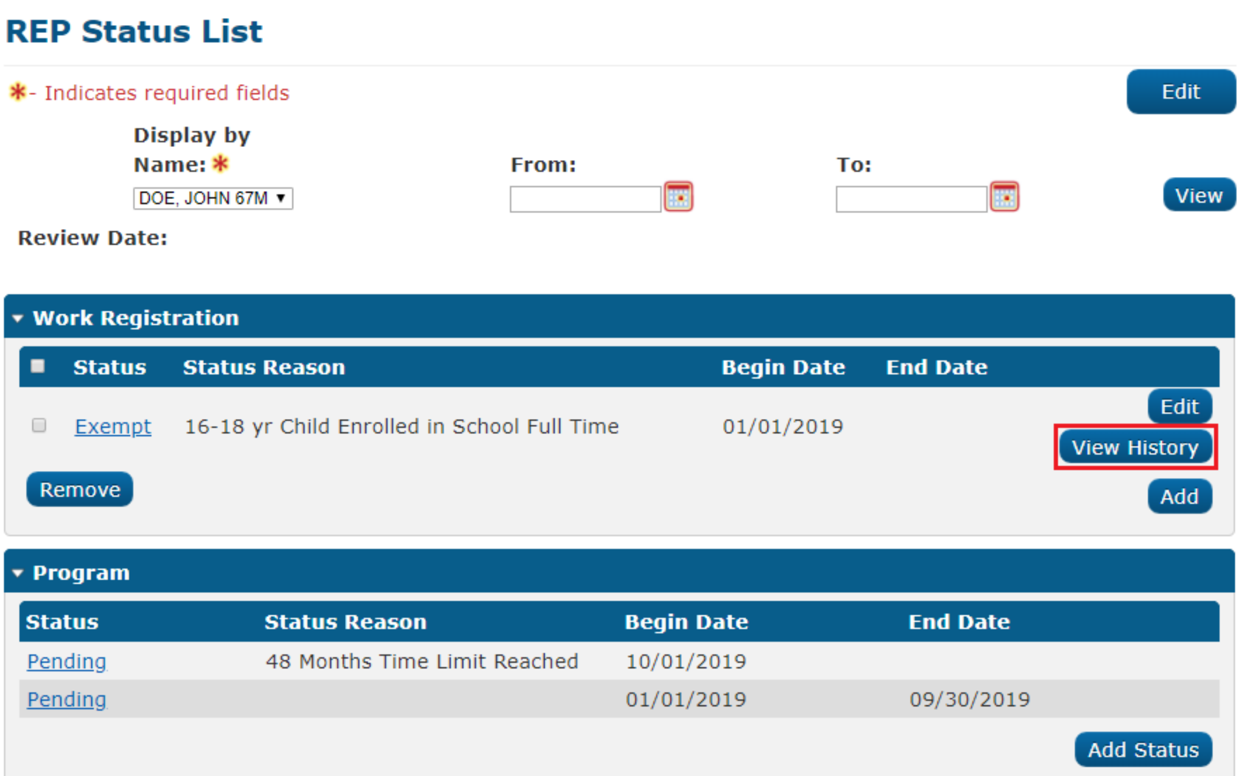


Figure 2.1.5 – REP Status List – Add View History button

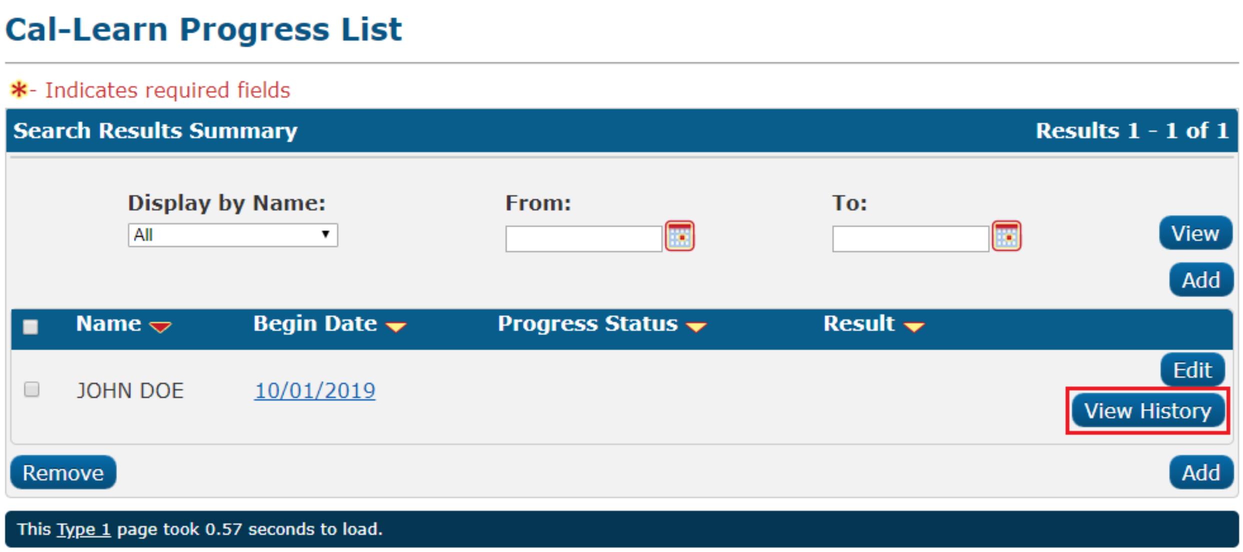


Figure 2.1.6 – Cal-Learn Progress List – Add View History button

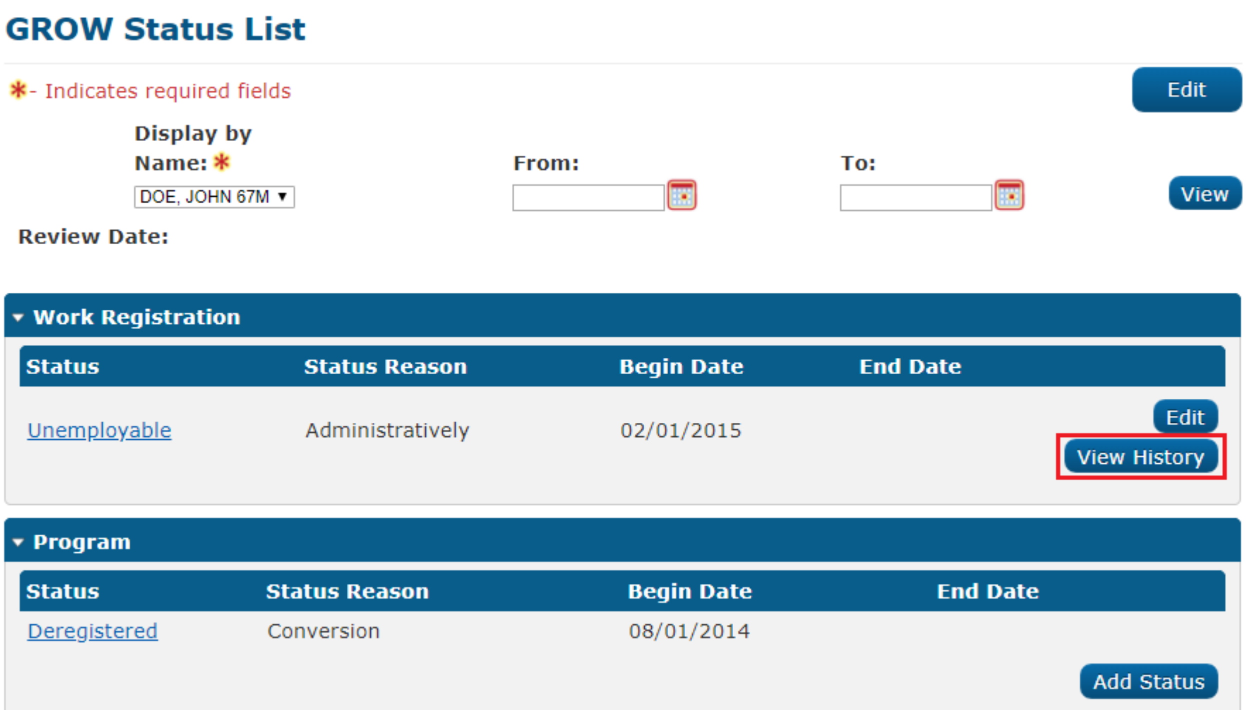


Figure 2.1.7 – GROW Status List – Add View History button

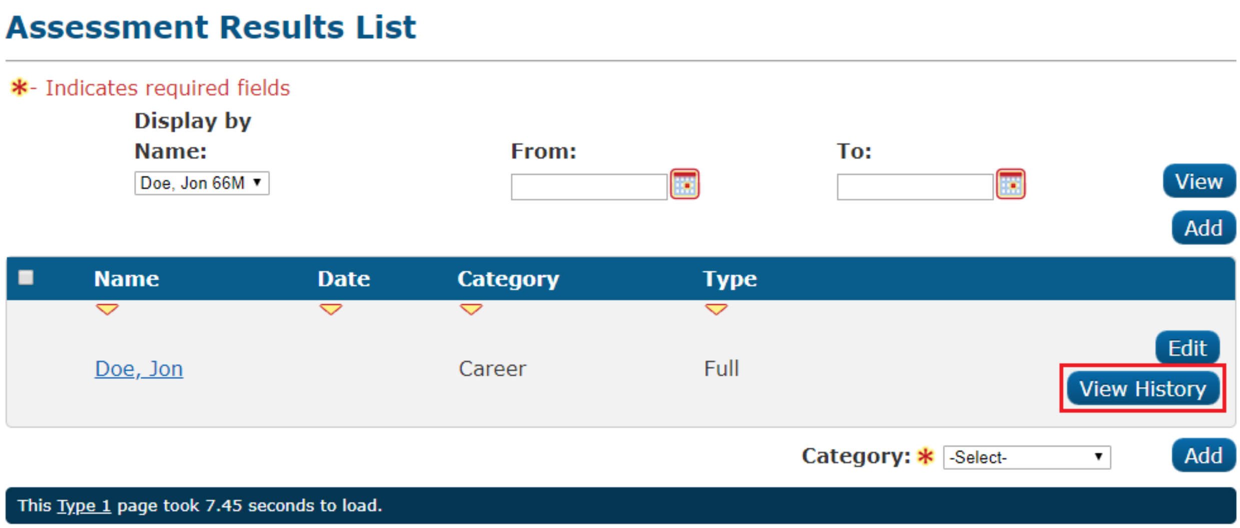


Figure 2.1.8 – Assessment Results List page – Add View History button

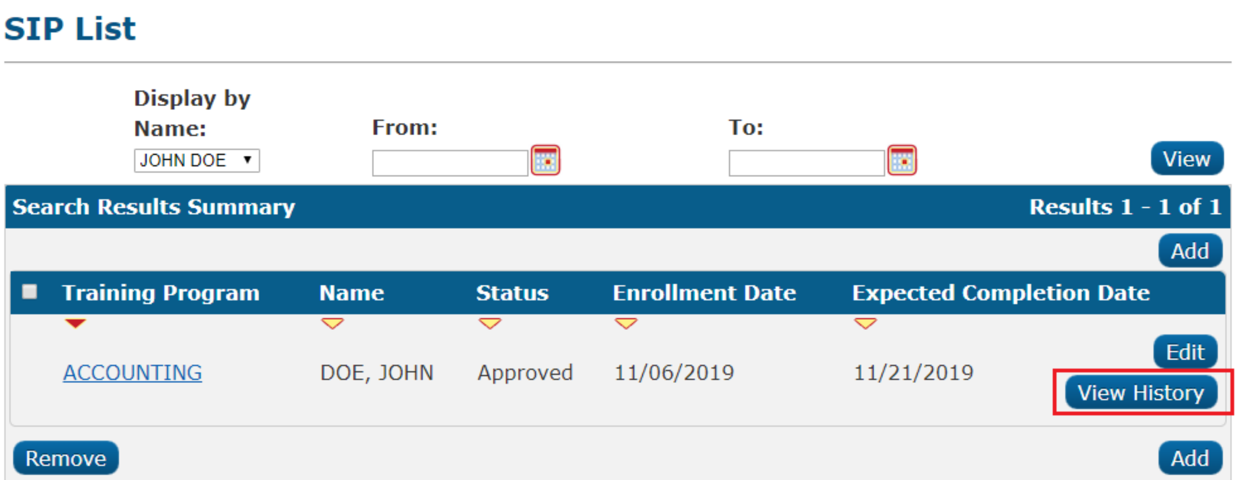


Figure 2.1.9 – SIP List – Add View History button

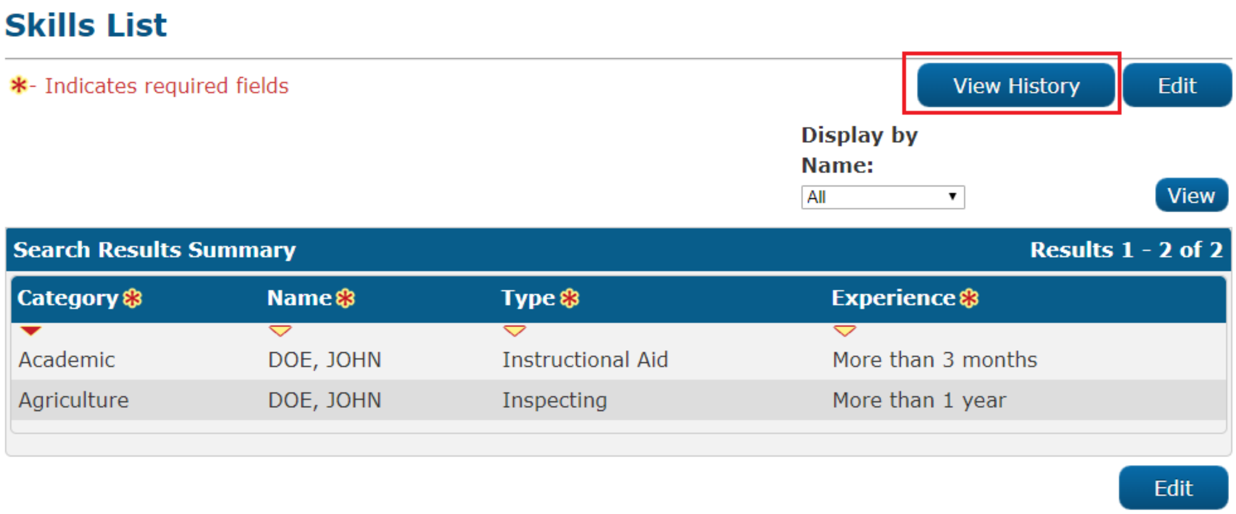


Figure 2.1.10 – Skills List – Add View History button

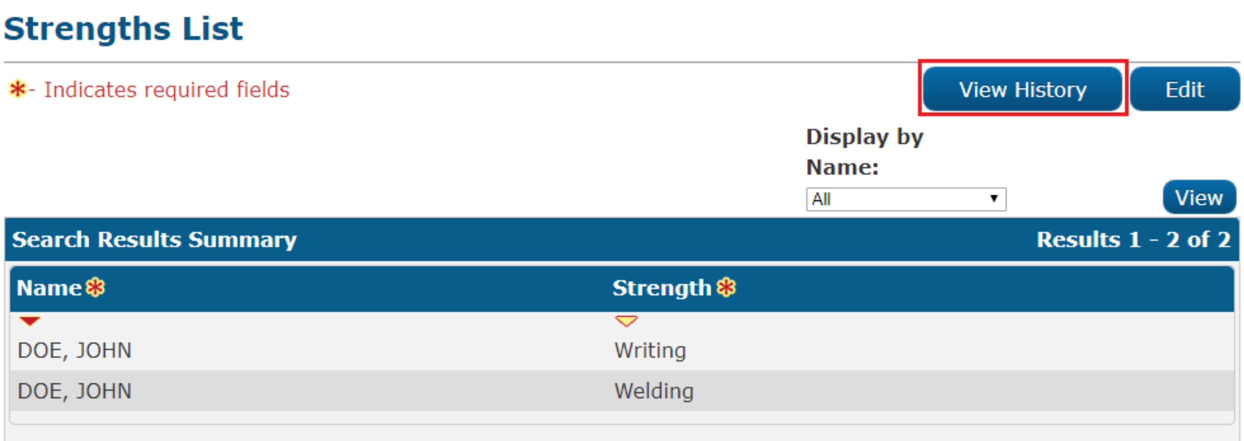


Figure 2.1.11 – Strengths List – Add View History button

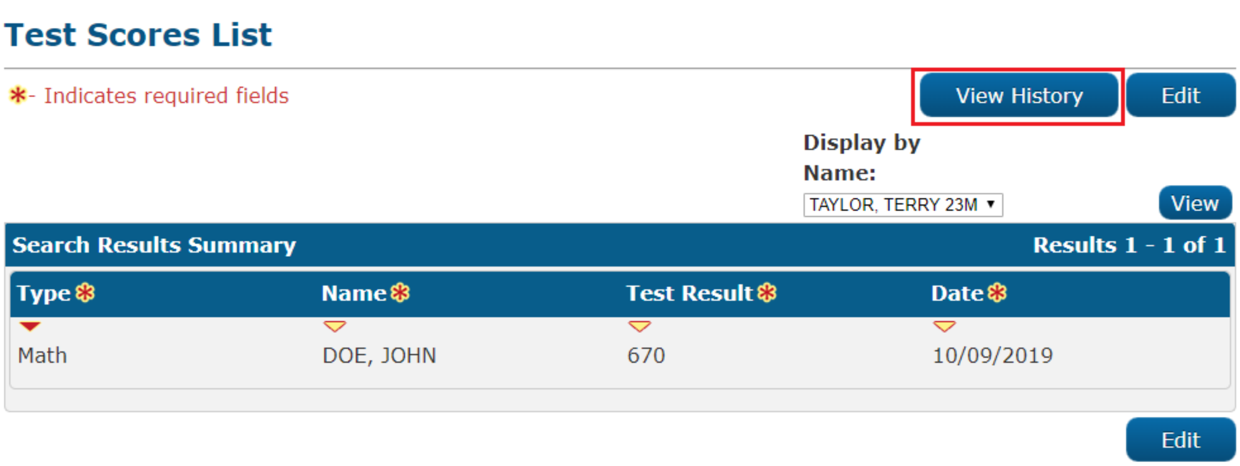


Figure 2.1.12 – Test Scores List – Add View History button

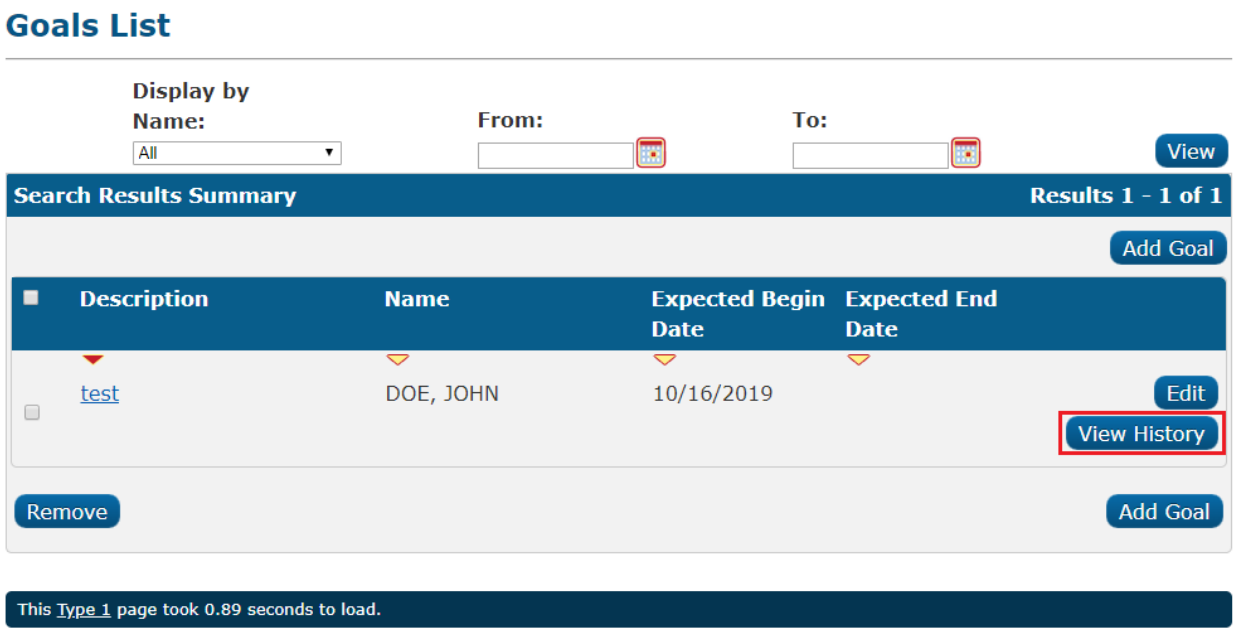


Figure 2.1.13 – Goals List – Add View History button

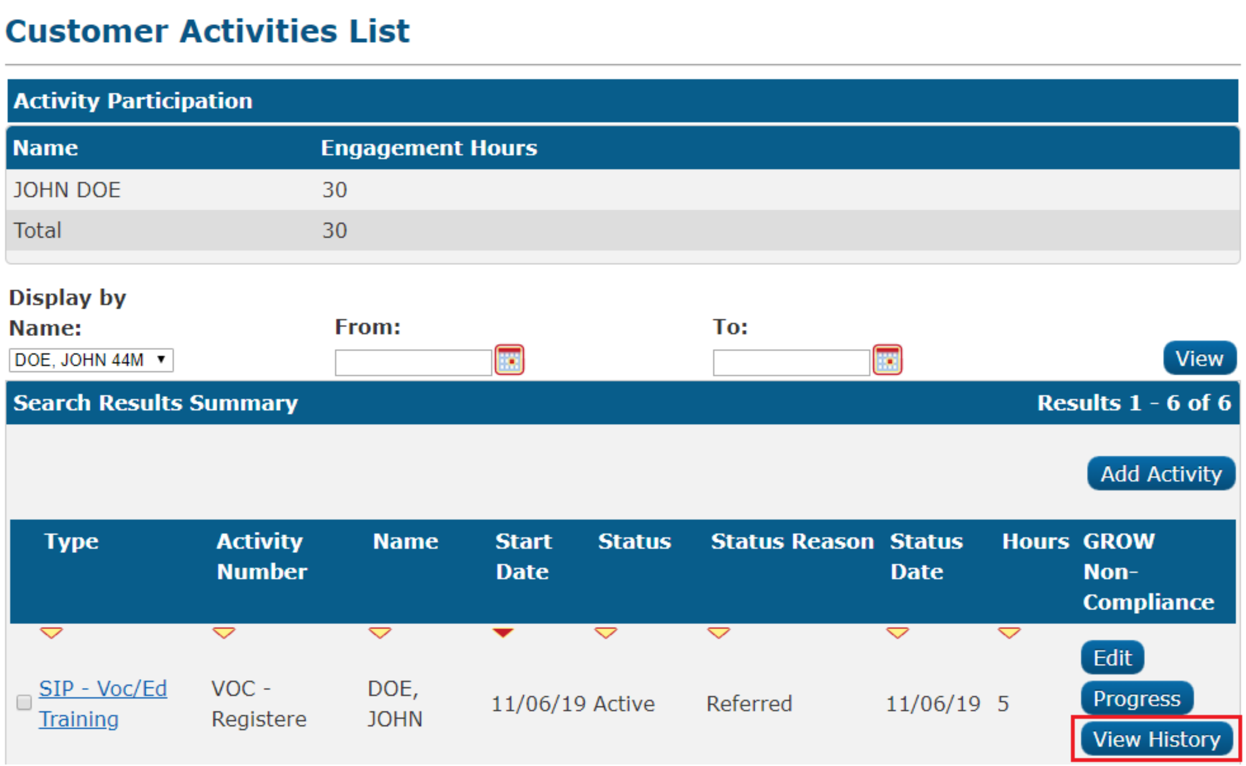


Figure 2.1.14 – Customer Activities List – Add View History button

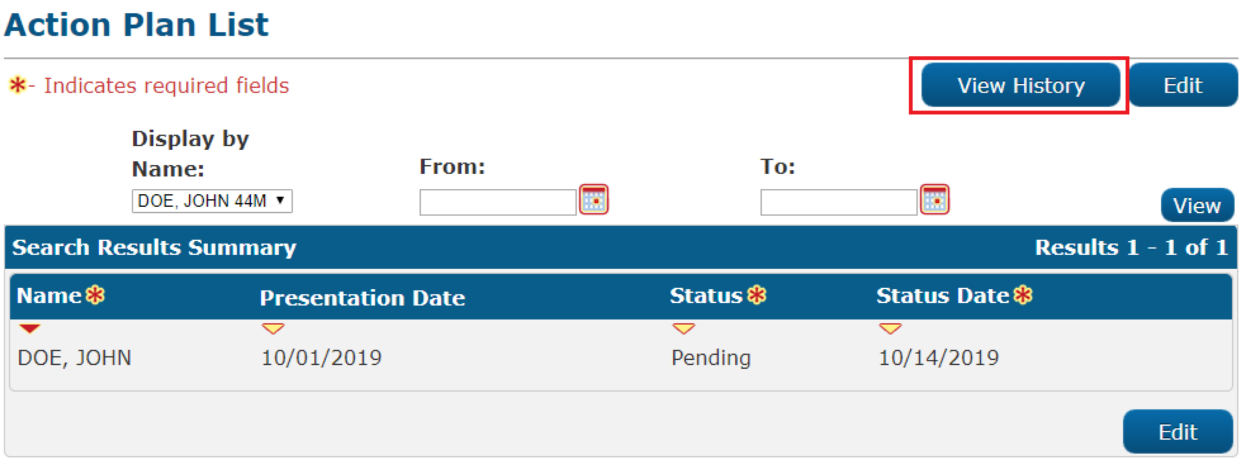


Figure 2.1.15 – Action Plan List – Add View History button

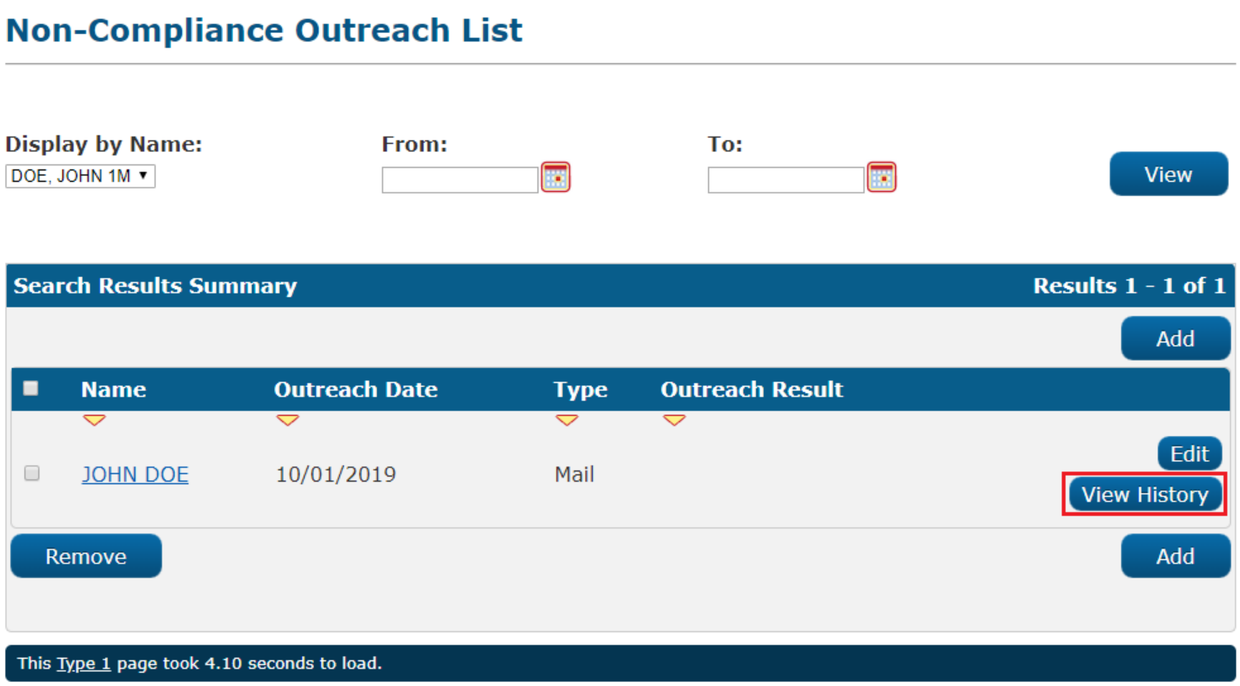


Figure 2.1.16 – Non-Compliance Outreach List – Add View History button

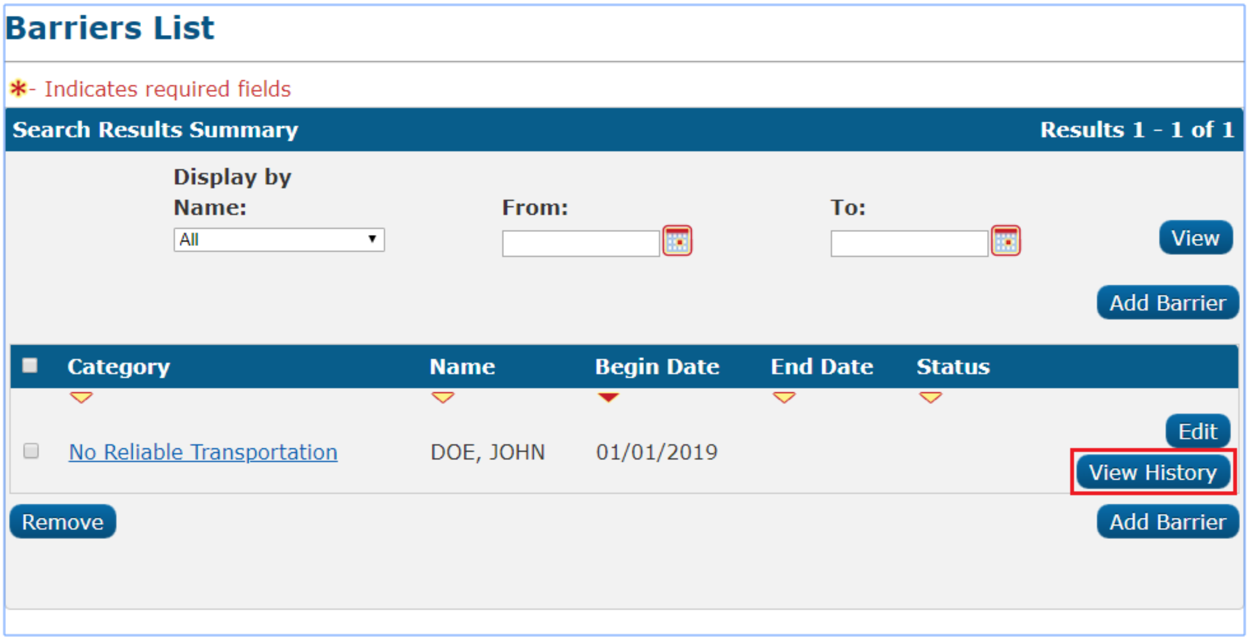


Figure 2.1.17 – Barriers List – Add View History button

Figure 2.1.18 – Demand Occupation List – Add View History button

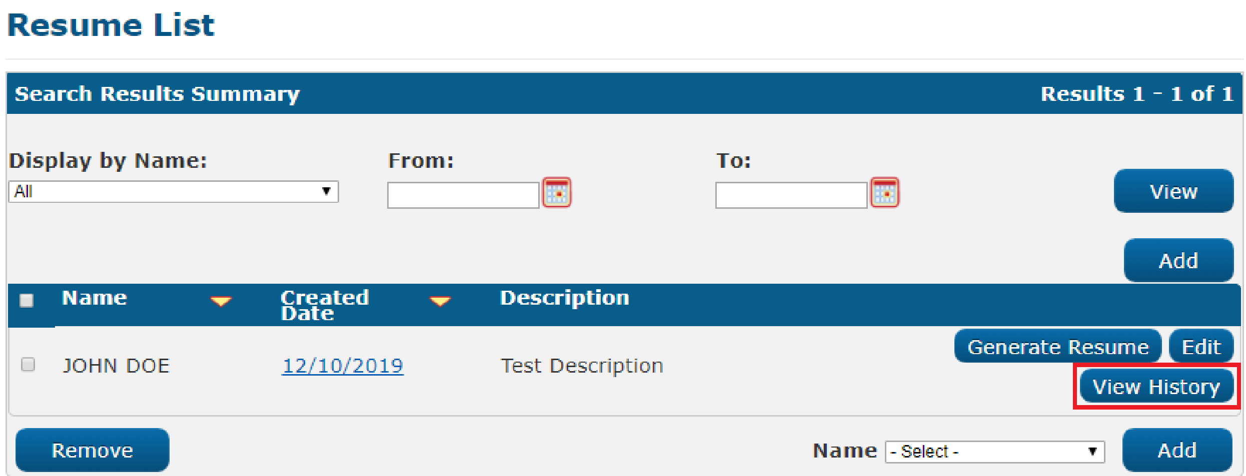


Figure 2.1.19 – Resume List – Add View History button

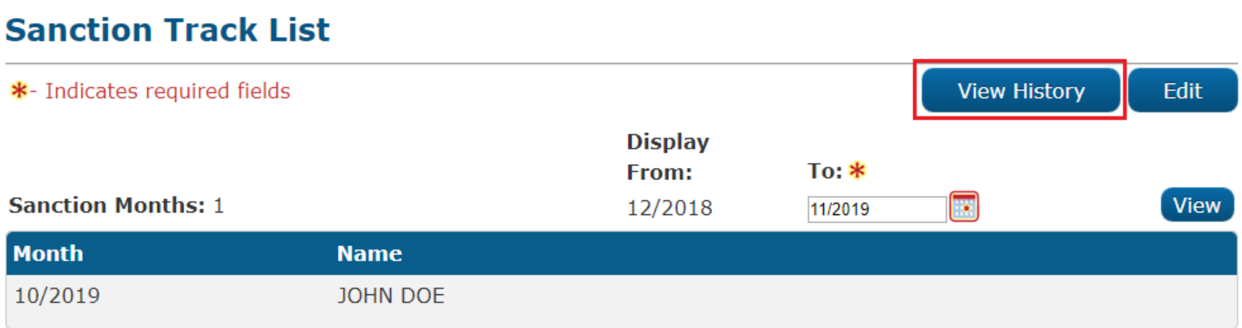


Figure 2.1.20 – Sanction Track List – Add View History button

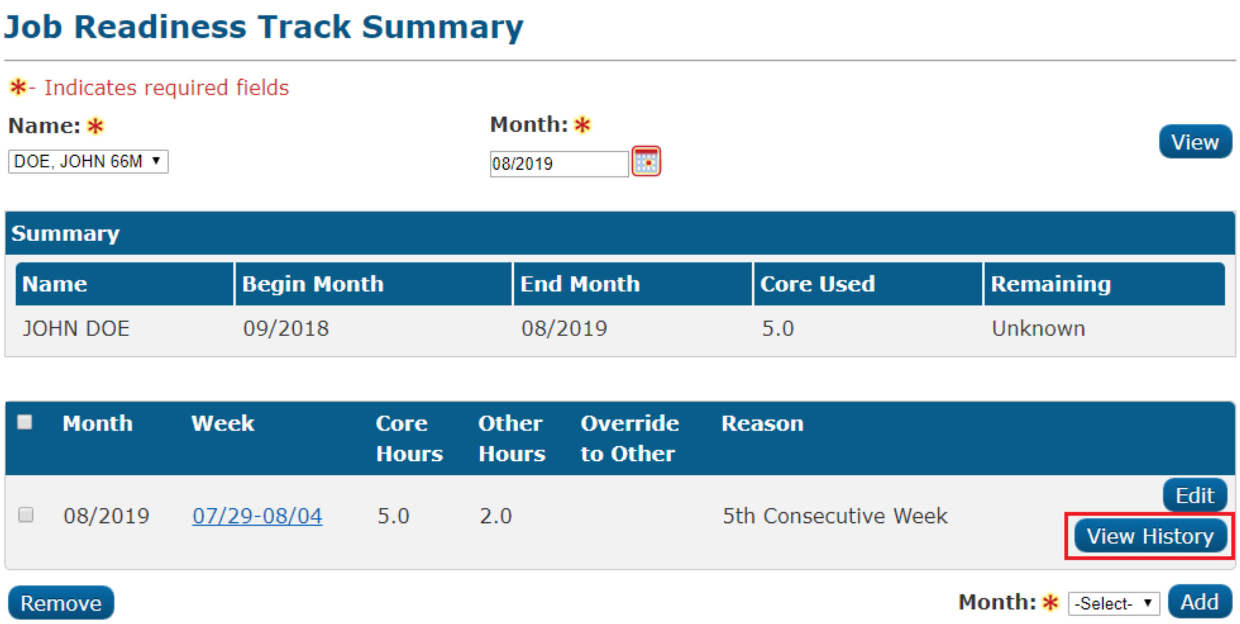


Figure 2.1.21 – Job Readiness Track Summary – Add View History button

2.1.3 Description of Changes

1. Add a View History button to the Employment Services List pages in the table below.
2. Create associated Transaction History Detail page for each List page where View History will be added.

	List Pages	Detail Pages
1.	ELP Authorization List	ELP Authorization Detail
2.	CFET Status List	Work Registration Detail
3.	WTW Status List	Work Registration Detail
4.	REP Status List	Work Registration Detail
5.	Cal-Learn Progress List	Cal-Learn Progress Detail
6.	GROW Status List	Work Registration Detail
7.	Assessment Results List	Assessment Result Detail
8.	SIP List	SIP Detail
9.	Skills List	Skills Detail
10.	Strengths List	Strengths Detail
11.	Test Scores List	Test Scores Detail
12.	Goals List	Goal Detail
13.	Customer Activities List	Customer Activity Detail
14.	Action Plan List	Action Plan Detail
15.	Non-Compliance Outreach List	Non-Compliance Outreach Detail
16.	Barriers List	Barrier Detail
17.	Demand Occupation List	Demand Occupation Detail
18.	Resume List	Resume Detail
19.	Sanction Track List	Sanction Track Detail
20.	Job Readiness Track Summary	Job Readiness Track Detail

2.1.4 Page Location

- **Global:** Employee Services
- **Local:** Case Summary
- **Task:**
  1. ELP Authorization
  2. CFET
  3. WTW
  4. REP
  5. Cal-Learn Progress

6. GROW
7. Assessment Results
8. SIP
9. Skills
10. Strengths
11. Test Scores
12. Goals
13. Customer Activities
14. Action Plan
15. Non-Compliance Outreach
16. Barriers
17. Demand Occupation
18. Resume
19. WPR → Sanction
20. WPR → Job Readiness

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2086	**Original:** The CONTRACTOR shall create a view history on any Employment Service Pages that have effective dating confirmation for records that are overwritten/deleted to include but not limited to: 1) WTW/REP Status List page 2) Customer Activity List page 3) Cal-Learn Status List page 4) GROW (GA/GR) Status List page **Revised:** The CONTRACTOR shall add a View History button to the following Employment Services pages and track the history of changes for the corresponding Transaction History Detail page: 1) ELP Authorization List 2) CFET Status List 3) WTW Status List 4) REP Status List 5) Cal-Learn Progress List 6) GROW Status List 7) Assessment Results List 8) SIP List	**Original:** - There are 25 list pages available from the Employment Services Global Navigation left Task Navigation options that do not have view History. Some of these pages are available through the left hand task navigation menus of other pages and flows. This will cause transaction history functionality to be accessible in those flows as well as through the Employment service page flow. **Revised:**	View History button was added to all Employment Services pages that have effective dating confirmation for records that are overwritten/deleted.

	9) Skills List 10) Strengths List 11) Test Scores List 12) Goals List 13) Customer Activities List 14) Action Plan List 15) Non-Compliance Outreach List 16) Barriers List 17) Demand Occupation List 18) Resume List 19) Sanction Track List 20) Job Readiness Track Summary		

CalSAWS

California Statewide Automated Welfare System

Design Document

CA 207208 | DDID 2066

Updates to Hunt v. Kizer functionality

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Jasmine Chen, Avi Bandaranayake, Nithya Chereddy
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/15/2019	1.0	Initial Document	Jasmine Chen
11/22/2019	1.1	Section 2.6 – Added 'multiple bills' scenario; End Month populated is inclusive for EDBC run	Jasmine Chen
11/27/2019	1.2	Added Batch functionality	Avi Bandaranayake
01/06/2020	1.3	Updated design per CA-2072018 Comments Log_V1.0_CB	Jasmine Chen
01/08/2020	1.4	Updated design per CA-2072018 Comments Log_V2.0_CB	Jasmine Chen
01/21/2020	1.5	Assumptions – Included override/rerun situations Section 2.1 – Added Conversion rec. Removed original Section 2.5 – Total of HvK-expenses and its Indicator Section 2.5 – Updated EDBC Section 2.6 – Updated Re-run Section 2.7 – Updated Batch	Jasmine Chen

Table of Contents

1 OVERVIEW

From the Hunt v. Kizer (HvK) litigation, the Department of Health Services (DHS) changed its policy to allow individuals to use old, unpaid medical bills to be applied and reduce a Medi-Cal Family Budget Unit's (MFBU's) share of cost (SOC). The customer can provide the bill(s) or documentation to the County to verify if the bill is acceptable and has an unpaid expense amount. The bill must be incurred prior to the month for which it will be applied as an HvK-expense towards their SOC.

1.1 Current Design

The Hunt v. Kizer Expense List and Detail pages are used for tracking and verifying unpaid medical bill(s). Values on HvK pages are currently not connected to EDBC logic, reports, nor batch jobs.

Once a bill is accepted, the worker inputs details to determine the bill's unpaid expense amount and tracks the HvK amount to be applied to a specified SOC month.

The worker runs EDBC. Then overrides that EDBC with the Override Reason: 'Hunt v. Kizer,' allowing them to manually adjust the SOC amount.

The HvK Approval NOA currently is not generated through EDBC. It is available in the Template Repository.

1.2 Requests

1. Update existing CalSAWS HvK pages and EDBC logic to apply HvK-expenses to reduce or 'spend down' the MFBU's SOC.
2. Create a new EDBC Batch sweep to identify Medi-Cal (MC) programs with HvK-expenses. Sweep monthly and apply remaining HvK-expenses until the total HvK-expense amount is exhausted.
3. Automate the HvK Approval Notice to be generated when EDBC is ran with HvK determination.

1.3 Overview of Recommendations

1. Update existing Hunt v. Kizer Expense Detail and Medi-Cal EDBC Summary pages.
2. Update EDBC to evaluate expenses from the Hunt v. Kizer Expense Detail page to apply towards the MFBU's SOC.
3. Create a new monthly EDBC Batch sweep job to sweep MC programs with a remaining HvK-expense amount.
4. Generate the Hunt v. Kizer Medical Bill Approval NOA to notify consumers of an SOC being adjusted by HvK determination.

1.4 Assumptions

1. The User will determine if an unpaid bill is Accepted as a HvK bill and will be responsible for setting the Hunt v. Kizer Expense Detail page's fields according to policy. Users then will run EDBC for the Requested Month through Come-Up month.
2. Bills entered on the Hunt v. Kizer Expense Detail page are tracked at the person-level across cases.
3. If the User re-runs EDBC, where previous EDBC of the same benefit month already applied HvK determination, the User will be responsible for re-running EDBC up through Come-Up month.
4. If the User edits or deletes an existing HvK record after EDBC has already ran, the User will be responsible for running or overriding EDBC for the appropriate months, if necessary.
5. In HvK scenarios, the Override EDBC Summary page's 'SOC' value will override the Medi-Cal EDBC Summary page's 'Adjusted SOC' value. After saving the Override, the Medi-Cal EDBC Summary page shows the latest value of 'SOC'.
6. When overriding an EDBC having a HvK determination, its corresponding Failed and Overridden Budgets record will not update the Medi-Cal EDBC – [Budget Test Category] details nor the Hunt v. Kizer Expense Detail record.
7. The new EDBC Batch sweep will only trigger EDBC for future months, not retroactive months.
8. HvK Letters, Approval, and Disapproval NOAs are available in the CalSAWS Template Repository.
9. No data conversions nor one-time EDBC batches will be applied to existing HvK records.
10. No impacts or changes will be made to the current MEDS interface, CalSAWS' Reports, nor Data Warehouse.

2 RECOMMENDATIONS

2.1 Hunt v. Kizer Expense Detail

2.1.1 Overview

Update the Hunt v. Kizer Expense Detail page to capture necessary data values.

2.1.2 Hunt v. Kizer Expense Detail Mockup

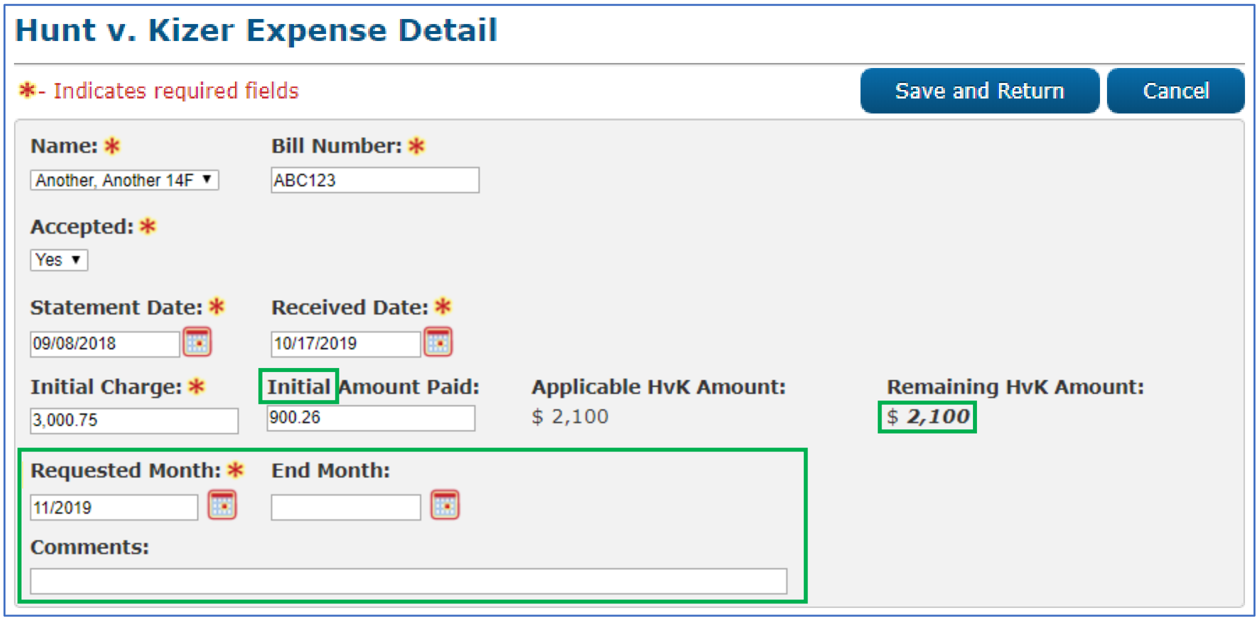


Figure 2.1.1 – Fields of Hunt v. Kizer Expense Detail page, Edit Mode

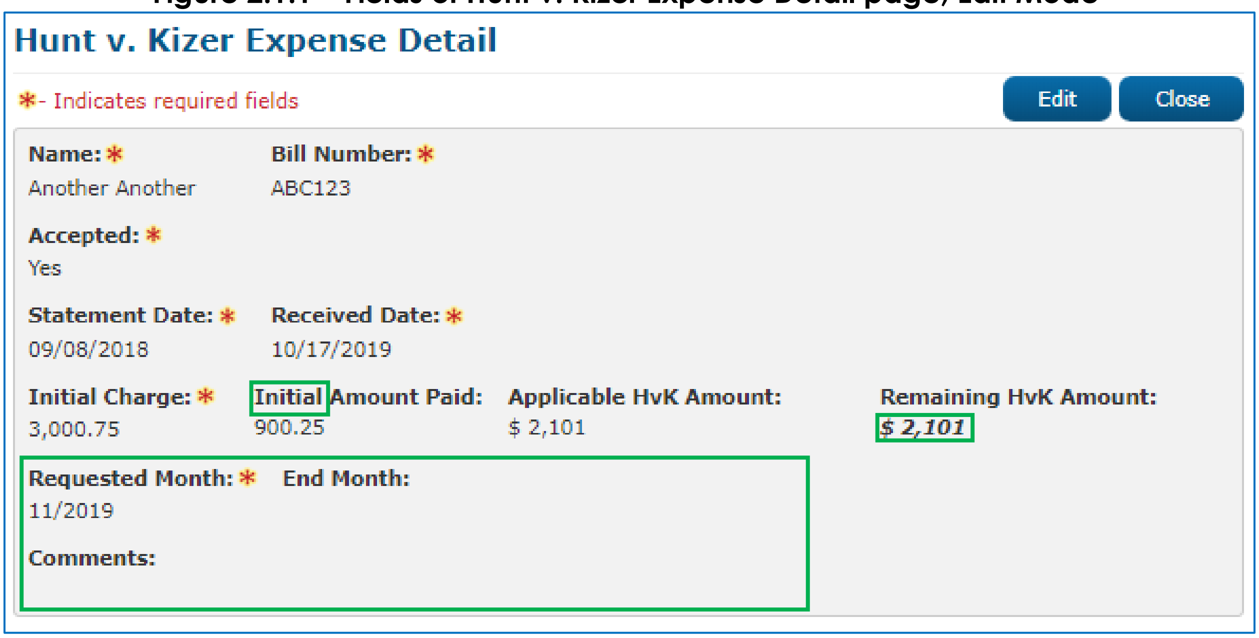


Figure 2.1.2 – Fields of Hunt v. Kizer Expense Detail page, View Mode

2.1.3 Description of Changes

1. Modify existing fields:
   a. Rename ‘Amount Paid’ input field to ‘Initial Amount Paid’ input field.
   b. Format ‘Applicable HvK Amount’ and ‘Remaining HvK Amount’ values with ($) dollar amounts and a comma for thousands-separator.

i. Cannot be negative

Note: Applicable and Remaining HvK Amounts currently round up to the nearest dollar

c. Italicize and bold 'Remaining HvK Amount' value to dynamically update after EDBC runs, displaying the latest HvK amount remaining for the bill.

2. Conversion: Apply a one-time data population to capture the latest 'Remaining HvK Amount' for existing, accepted HvK bills.
3. Remove the 'HvK Applied Amount' section from Hunt v. Kizer Expense Detail page.
4. Add and display fields:
   a. Required 'Requested Month' field formatted MM/YYYY with calendar icon

   Technical Note: Default 'Requested Month' with null_date.

   b. 'End Month' field formatted MM/YYYY with calendar icon.
   c. 'Comments' field

2.1.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Financial > Hunt v. Kizer

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A - There is no existing Page Mapping on this page, thus there will be no update to its Page Mapping.

2.1.7 Page Usage/Data Volume Impacts

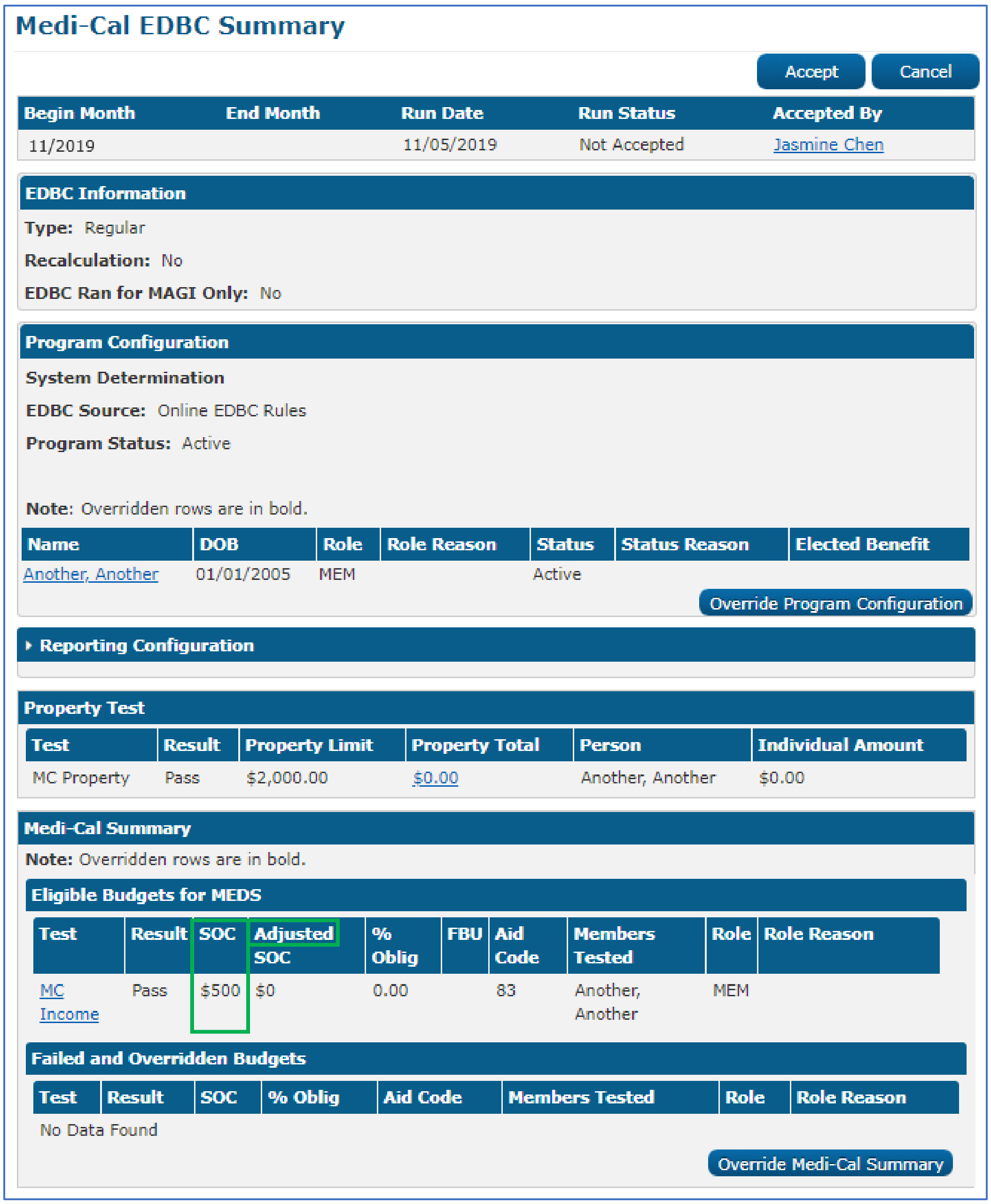
N/A

2.2 Medi-Cal EDBC Summary

2.2.1 Overview

Dynamically display a new header under ‘Eligible Budgets for MEDS’ of the Medi-Cal EDBC Summary page, when HvK-expenses are applied.

2.2.2 Medi-Cal EDBC Summary Mockup



Medi-Cal EDBC Summary

Accept Cancel

Begin Month	End Month	Run Date	Run Status	Accepted By
11/2019		11/05/2019	Not Accepted	Jasmine Chen

EDBC Information

Type: Regular

Recalculation: No

EDBC Ran for MAGI Only: No

Program Configuration

System Determination

EDBC Source: Online EDBC Rules

Program Status: Active

Note: Overridden rows are in bold.

Name	DOB	Role	Role Reason	Status	Status Reason	Elected Benefit
Another, Another	01/01/2005	MEM		Active		

Override Program Configuration

Reporting Configuration

Property Test

Test	Result	Property Limit	Property Total	Person	Individual Amount
MC Property	Pass	$2,000.00	$0.00	Another, Another	$0.00

Medi-Cal Summary

Note: Overridden rows are in bold.

Eligible Budgets for MEDS

Test	Result	SOC	Adjusted SOC	% Oblig	FBU	Aid Code	Members Tested	Role	Role Reason
MC Income	Pass	$500	$0	0.00		83	Another, Another	MEM	

Failed and Overridden Budgets

Test	Result	SOC	% Oblig	Aid Code	Members Tested	Role	Role Reason
No Data Found							

Override Medi-Cal Summary

Figure 2.2.1 – Medi-Cal EDBC Summary page - after HvK determination

2.2.3 Description of Changes

1. Update the Medi-Cal EDBC Summary page's 'Eligible Budgets for MEDS' section.

   Dynamically display two SOC columns, if HvK-expenses are applied within specific budget test categories:
     - Regular Medi-Cal (MC) Income
     - Long Term Care
     - Waiver
   a. Modify existing header
      i. Rename existing 'SOC' header to 'Adjusted SOC' to track MFBU's adjusted SOC after HvK determination
         1. Continue to send this value to MEDS
   b. Add new header
      i. Add new header to display as 'SOC' to track the MFBU's current SOC before HvK determination

2.2.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

Create a PMCR to specify - In HvK scenarios, existing 'SOC' header is renamed to new header, 'Adjusted SOC'.

2.2.7 Page Usage/Data Volume Impacts

N/A

2.3 Medi-Cal EDBC – [Budget Test Category]

2.3.1 Overview

Dynamic HvK calculations lines will be added to the Medi-Cal EDBC – [Budget Test Category] page (which is accessed by clicking on the Test hyperlink on the Medi-Cal EDBC Summary page) to display details on the SOC adjustment.

2.3.2 Medi-Cal EDBC – [Budget Test Category] Mockup

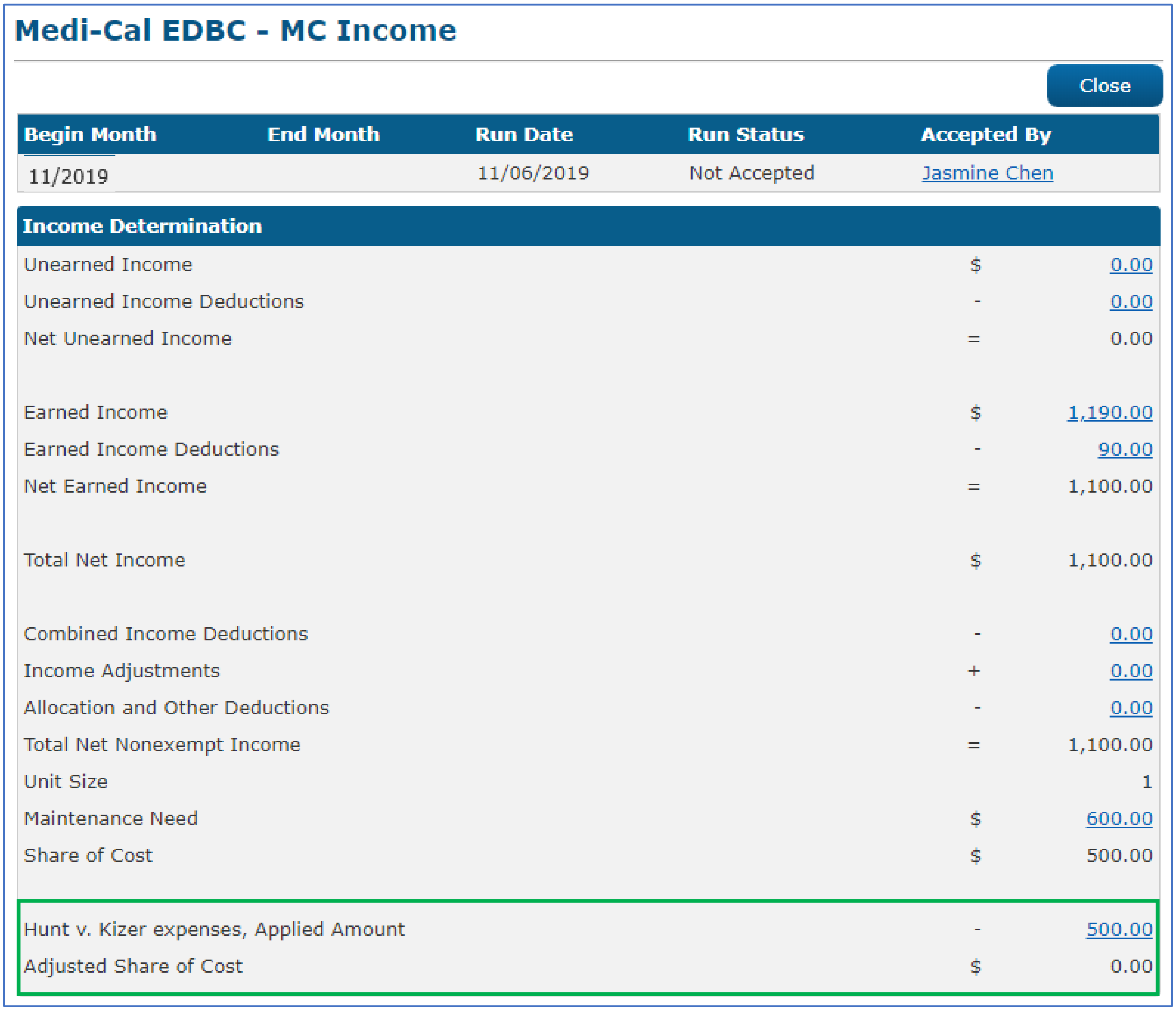


Figure 2.3.1 – Medi-Cal EDBC – [Budget Test Category] after HvK determination

2.3.3 Description of Changes

1. Update the Medi-Cal EDBC – [Budget Test Category] page to dynamically display calculation lines if HvK-expenses are applied within specific budget test categories:
    - Regular Medi-Cal (MC) Income
    - Long Term Care
    - Waiver

    a. 'Hunt v. Kizer expenses, Applied Amount' hyperlink – Amount of HvK expenses applied
        i. Clicking of hyperlink leads to EDBC Person Line Item Detail - HvK Applied Amount page

    b. 'Adjusted Share of Cost' – MFBU's adjusted SOC after HvK determination

2.3.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

Create a PMCR for the new fields.

2.3.7 Page Usage/Data Volume Impacts

N/A

2.4 EDBC Person Line Item Detail - HvK Applied Amount

2.4.1 Overview

Clicking on the ‘HvK, Applied Amount’ hyperlink from the Medi-Cal EDBC – [Budget Test Category] page navigates the user to a new EDBC Person Line Item Detail page which displays HvK-applied amount details.

2.4.2 EDBC Person Line Item Detail – HvK Applied Amount Mockup

EDBC Person Line Item Detail - HvK Applied Amount

Close

Name	Bill Number	Available HvK-Expenses	Remaining HvK Amount		Applied Amount
Another, Another	ABC123	$2,101	$1,601	$	500.00
Second, Person	ABCABC	$400	$400	$	0.00
			HvK Applied Amount	**$**	**500.00**

Figure 2.4.1 – EDBC Person Line Item Detail page with HvK applied amount details

2.4.3 Description of Changes

1. Create a new ‘EDBC Person Line Item Detail – HvK Applied Amount’ page to display:
   a. The HvK-bills available (of Section 2.5’s Step 1) per the EDBC run and its:

i. Name – Name of person stated on the bill from Hunt v. Kizer Expense Detail page
ii. Bill Number – Bill/statement number from Hunt v. Kizer Expense Detail page
iii. Available HvK Expenses – The bill's 'Remaining HvK Amount' prior to EDBC run
iv. Remaining HvK Amount – The bill's 'Remaining HvK Amount' after EDBC run
v. Applied Amount – Amount of HvK bill(s) applied to reduce the SOC through EDBC

b. 'Close' button – Returns User to Medi-Cal EDBC – [Budget Test Category] page

2.4.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.4.5 Security Updates

N/A

2.4.6 Page Mapping

Create a PMCR for all fields of new page.

2.4.7 Page Usage/Data Volume Impacts

N/A

2.5 Update Medi-Cal EDBC SOC Calculation

2.5.1 Overview

With accepted HvK-expenses available during the EDBC benefit month, the regular (not read-only) EDBC run will apply HvK-expenses to reduce the MFBU's SOC.

2.5.2 Description of Changes

1. Update Medi-Cal EDBC to apply available HvK-expenses to reduce the MFBU's SOC via Steps 1-3, on a regular EDBC run when the following conditions are met:
    a. Accepted HvK-bill(s) for the individual is having a 'Remaining HvK Amount' greater than $0.
    b. The budget test category is either:
        ii. Regular Medi-Cal (MC) Income
        iii. Long Term Care
        iv. Waiver
    c. EDBC's (current) SOC is not $0

The steps of an EDBC run with HvK determination:

1. Identify available HvK-bill(s) for the benefit month, from active Medi-Cal persons (who are part of the MFBU) with all of the following:
    a. The HvK record is accepted.
    b. The Remaining HvK Amount is more than $0.
    c. The Requested Month of the bill is the same or before the EDBC run month.
    d. The HvK record has no End Month or End Month is the same or after the EDBC run month.
2. Per available HvK-expenses, the EDBC run will determine the Adjusted SOC.
    a. Apply HvK-expenses (from oldest HvK bill first) until SOC is: reduced to an Adjusted SOC of $0 or reduced by the HvK-amount remaining.
        i. Oldest HvK bill is having the earliest dates based on the following fields and order: 'Requested Month', 'Statement Date', 'Received Date'
3. After applying HvK-expenses, correspondingly deduct the same 'HvK Applied Amounts' from the HvK bill(s) impacted.
    a. Update Section 2.1's Hunt v. Kizer Expense Detail page and Section 2.4's Person Line Item Detail page with the latest 'Remaining HvK Amount' of impacted bill(s).

2. For MFBUs having multiple, HvK-applicable budgets:
    a. Apply HvK-expenses via Steps 1-3 towards the budget with the greatest SOC amount first. Repeat Steps for next greatest SOC amount until all applicable budgets have been evaluated.

2.5.3 Programs Impacted

Medi-Cal

2.5.4 Performance Impacts

N/A

2.6 Re-running EDBC for a Month with HvK Determination

2.6.1 Overview

With any User's re-run of an EDBC benefit month having HvK determination already, the HvK-expenses will only be applied once on the latest, regular EDBC run - to reduce the month's SOC.

2.6.2 Description of Changes

Update Medi-Cal EDBC:

1. When re-running for a regular (not read-only) EDBC benefit month having HvK determination already:
    a. Remediate previous 'HvK Applied Amounts' from the previous, regular EDBC run
        i. Return Applied Amount(s) to the same HvK bill(s) balances where it was deducted initially. The bills' 'Remaining HvK Amount' becomes replenished.
    b. Reapply HvK-expenses via Section 2.5's Step 1-3, based upon budget values of latest Regular EDBC run.

Technical Note: During re-run logic, EDBC should apply HvK determination logic even when HvK bill(s) have a 'Remaining HvK Amount' of $0.

2.6.3 Programs Impacted

Medi-Cal

2.6.4 Performance Impacts

N/A

2.7 Batch

2.7.1 Overview

There will be a new MC EDBC batch sweep created to identify records needing an EDBC run with HvK determination. The sweep will add records to the SYS_TRANSACT table so EDBC can run.

2.7.2 Description of Change

1. Create a new Batch EDBC sweep to identify all MC programs, in the prior month having an EDBC run with a HvK determination.

2.7.3 Execution Frequency

Monthly prior to 10-day

2.7.4 Key Scheduling Dependencies

None.

2.7.5 Counties Impacted

All

2.7.6 Data Volume/Performance

No Change.

2.7.7 Failure Procedure/Operational Instructions

No Change.

2.8 Correspondence

2.8.1 Overview

The form MC 239 HK-1 will be used to notify consumers of an Adjusted SOC by HvK. Adjusted SOC is the new SOC after HvK expenses are applied to reduce the current SOC. The notice is currently available in the Template Repository.

Form Name: Medi-Cal Notice of Action Approval - Hunt v. Kizer
Form Number: MC 239 HK-1
Program: Medi-Cal
Action Type: Approval
Languages: English and Spanish

2.8.2 MC 239 HK-1 Form Generation and Population

2.8.2.1 Add new EDBC form-generation logic

Add new form generation logic to generate the Medi-Cal Notice of Action Approval - Hunt v. Kizer via EDBC when the following are true:

- Program is active Medi-Cal
- HvK bill(s) is applied to the current EDBC's budget for the first time (Bill(s) is considered applied when the 'Applied Amount' is greater than $0 in the 'EDBC Person Line Item Detail - HvK Applied Amount' page).
    - If multiple bills are applied for the first time to the same EDBC benefit month, generate only one MC 239 HK-1 NOA.
- MC 239 HK-1 NOA has not been sent for the bill(s) applied in the current EDBC.

2.8.2.2 Add form-population logic

MC 239 HK-1 NOA will have the Standard header and footer information populated.

NOA Mockups: See Supporting Document #1

Following table has the form body elements population for the MC 239 HK-1 form.

Variable Name	Population
<Adjusted_SOC>	'Adjusted SOC' from 'Medi-Cal EDBC Summary' Page. i.e. SHARE_OF_COST_AMT from BUDGET table
<Begin_Date>	Begin Date of the Benefit month for which HvK expenses are applied. Example format: MM/DD/YYYY
<HvK_months>	Calculate this field with the total of all 'Available HvK Expenses' from 'EDBC Person Line Item Detail – HvK Applied Amount' page divided by the EDBC's SOC and populate the whole number (minimum number being 1). Example 1: If the total of 'Available HvK Expenses' from 'EDBC Person Line Item Detail – HvK Applied Amount' page is $100 and the SOC is $300, then the number of months for which HvK will be applied is 1. Example 2: If the total of 'Available HvK Expenses' from Bill #1 is $50, Bill #2 is $200, and Bill #3 is $450 and SOC is $300, then the number of months for which HvK will be applied is 2.
<Gross_Income>	Total of 'Earned Income' and 'Unearned Income' from 'Medi-Cal EDBC – [Budget Test Category]' page. i.e. Sum of EARN_INC_AMT and UNEARN_INC_AMT from MC_BUDGET table
<Nonexempt_Income>	'Total Net Nonexempt Income' from 'Medi-Cal EDBC – [Budget Test Category]' page. i.e. NET_NON_EXEMPT_INC_AMT from MC_BUDGET table
<Maintenance_Need>	'Maintenance Need' from 'Medi-Cal EDBC – [Budget Test Category]' page. i.e. MAINT_NEED_AMT from BUDGET table
<Original_SOC>	'Share of Cost' from 'Medi-Cal EDBC – [Budget Test Category]' page.
<Total_Old_Medical_Expenses>	'Hunt V. Kizer expenses, Applied Amount' from 'Medi-Cal EDBC – [Budget Test Category]' Page.

2.8.3 Suppress regular Share of Cost NOAs

Suppress the relevant NOA(s) when the NOA form MC 239 HK-1 is generated.

1. M770C - MC_CH_SOC_CHNG_PERS_LEFT_STATE_M770
2. M761C - MC_CH_SOC_SEC_BENFT_INCR_SOC_CHANGED_M761
3. M750C - MC_CH_INCR_NONEXEMPT_INCOME_M750
4. M751C - MC_CH_DECR_NONEXEMPT_INCOME_M751
5. M766C - MC_CH_SOC_CHANGE_M766
6. M754C - MC_CH_HH_INCR_SOC_CHNG_M754

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1.	Client Correspondence	MC 239 HK-1 Approval NOA English	HvK English Approval.pdf
2.	Client Correspondence	MC 239 HK-1 Approval NOA Spanish	HvK Spanish Approval.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2066	The CONTRACTOR shall update the EDBC logic to calculate the Share of Cost (SOC) appropriately and generate an appropriate NOA with budget when the Hunt v. Kizer Expense Detail page is completed and EDBC is accepted and saved. This applies to Medi-Cal cases only.	Existing Hunt v. Kizer page in LRS will be modified to track additional data. Medi-Cal rules will be updated, as well as a new Batch program will be added to trigger Batch EDBC until the unpaid medical bills are applied to the remaining SOC.	Updated EDBC logic to apply HvK expenses to adjust the MFBU's SOC and generate an HvK approval NOA. A new monthly Batch will trigger EDBC for MC programs with available HvK-expenses until exhausted.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207217 | DDID 2057

Display customer age and gender after name

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Linda Zeng
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/01/2019	1.0	Original	Linda Zeng
01/14/2020	1.1	Deleted page "Service Arrangement Detail" from list in section 2.5.3.1	Linda Zeng

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1 OVERVIEW

This SCR updates the display of a person name throughout CalSAWS online pages to reflect the standard of Last Name, First Name, Age and Gender. This update is implemented through multiple SCRs and releases, and the pages to be updated are reflected in each design.

SCR CA-210012 and CA-210010 updated other pages in previous releases.

1.1 Current Design

The online pages throughout the system display the person's first and last name, age and gender in the dropdown fields of the data collection pages.

1.2 Requests

Per DDID 2057 display the age and gender after the name of the customer throughout the data collection pages once the user saves the page. This would include both View and Edit mode of the Detail pages as well as the List pages.

1.3 Overview of Recommendations

Update the person name on the pages to display in the following format: Last Name, First Name Age Gender.

1.4 Assumptions

1) This information will not appear when the name is stored in different fields, i.e. separate fields for First Name, Middle Name/Initial, Last Name.
2) If the Date of Birth and/or gender is not stored in the system, it will not display.
3) If the Last Name, First Name, Age and Gender are all displayed within the section then the name will not be updated.
4) Gender will display per current system functionality as follows:
   - 'M' for Male or Transgender: Male to Female
   - 'F' for Female or Transgender: Female to Male

2 RECOMMENDATIONS

2.1 Eligibility Global Navigation Pages

2.1.1 Overview

Update applicable pages under the Customer Information Local Navigation to display the person name as Last Name, First Name Age Gender.

2.1.2 Expense Contributors Detail Mockup

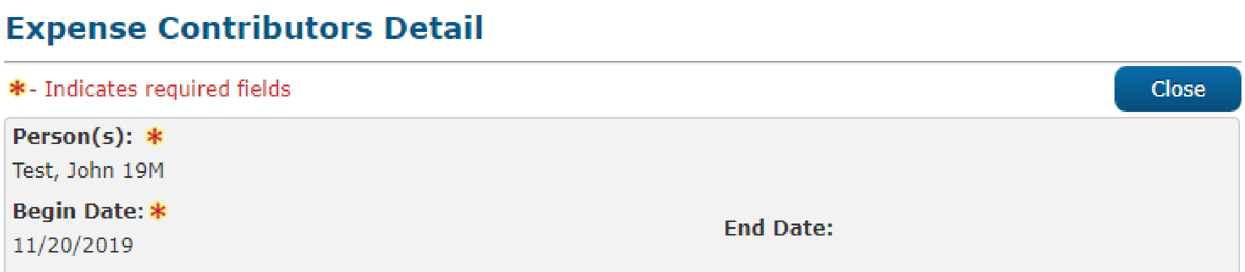

Figure 2.1.1 – Expense Contributors Detail Mockup

2.1.3 Description of Changes

1. Update the following pages to display the person's name as Last Name, First Name Age Gender, using the Expense Contributors Detail mockup as example:
    1. Expense Contributors Detail page
    2. GR Work Requirement List
    3. GR Work Requirement Detail
    4. GR Sanctionable Non-Compliances
    5. Cash Aid Time Limit Month Detail
    6. Time Limit Extension Request Detail
    7. ABAWD Time Limit Month Detail
    8. Support Questionnaire
    9. Child Welfare Services Authority Detail
    10. Non-Minor Dependent Re-Entry Authority Detail
    11. Probation Authority Detail
    12. Protective Custody Authority Detail
    13. Relinquishment Authority Detail
    14. Seriously Emotionally Disturbed Authority Detail
    15. Voluntary Placement Authority Detail
    16. Foster Care Non-Minor Dependent List
    17. Effective Dating Confirmation List

2.1.4 Page Location

Global: Eligibility

Local: Customer Information

Task: (Various)

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Empl. Services Global Navigation Pages

2.2.1 Overview

Update applicable Activities Local Navigation pages to display the person name as Last Name, First Name Age Gender.

2.2.2 WTW Assistance Unit Hours Requirement Mockup

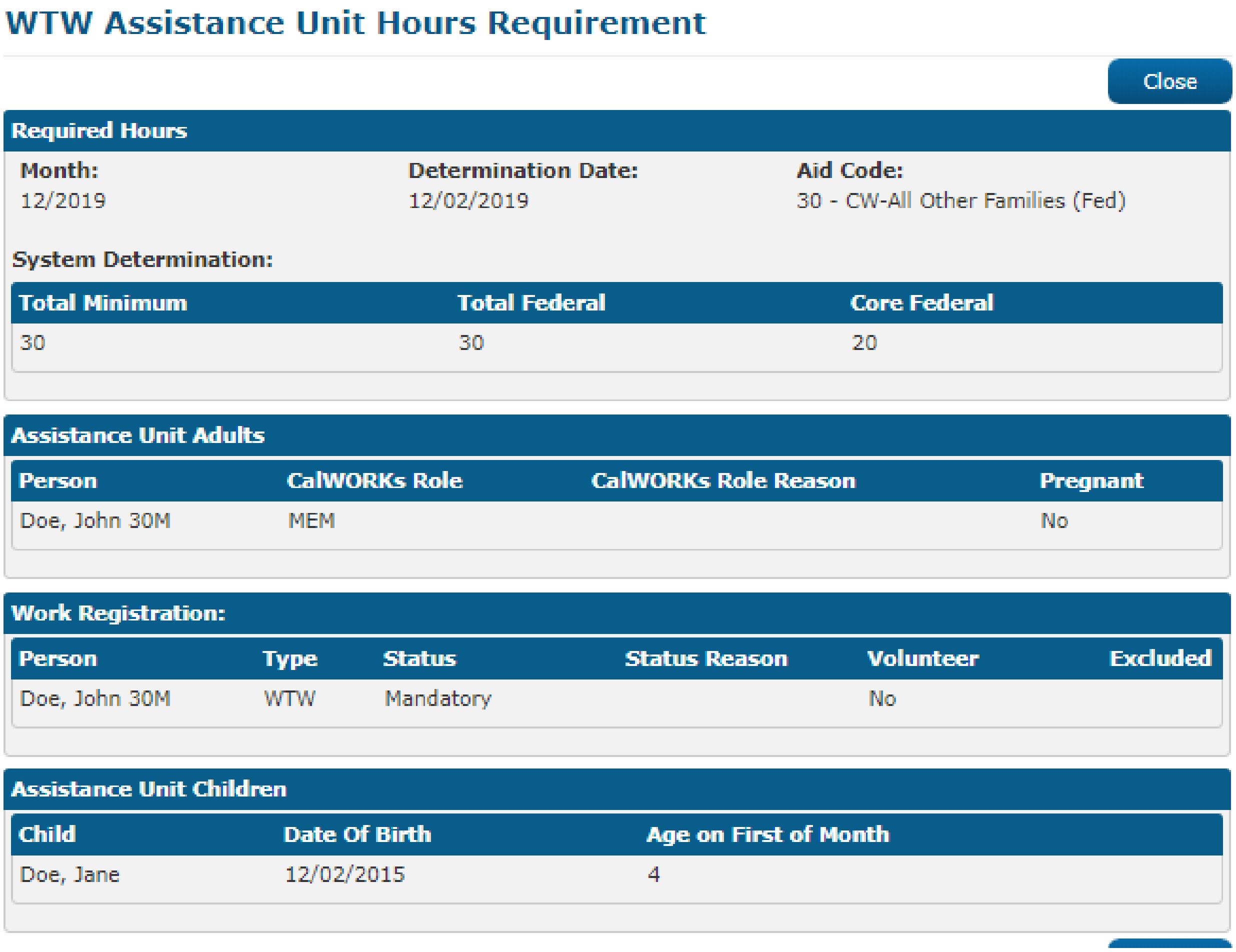

Figure 2.2.1 – WTW Assistance Unit Hours Requirement Mockup

2.2.3 Description of Changes

1. Update the following Activities and Case Summary Local Navigation pages to display the person name as Last Name, First Name Age Gender whenever a person's name appears on a page. Use the example of the Work Registration Detail mockup above for the following pages:
    1. WTW Assistance Unit Hours Requirement
    2. Work Registration Detail

2.2.4 Page Locations

WTW Assistance Unit Hours Requirement:

Global: Empl. Services

Local: Activities

Task: WTW AU Summary > [month]

Work Registration Detail:

Global: Empl. Services

Local: Case Summary

Task: WTW

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

N/A

2.2.7 Page Usage/Data Volume Impacts

N/A

2.3 Child Care Global Navigation Pages

2.3.1 Overview

Update applicable pages under the Child Care Global Navigation to display the person name as Last Name, First Name Age Gender.

2.3.2 Child Care Workload Inventory Mockup

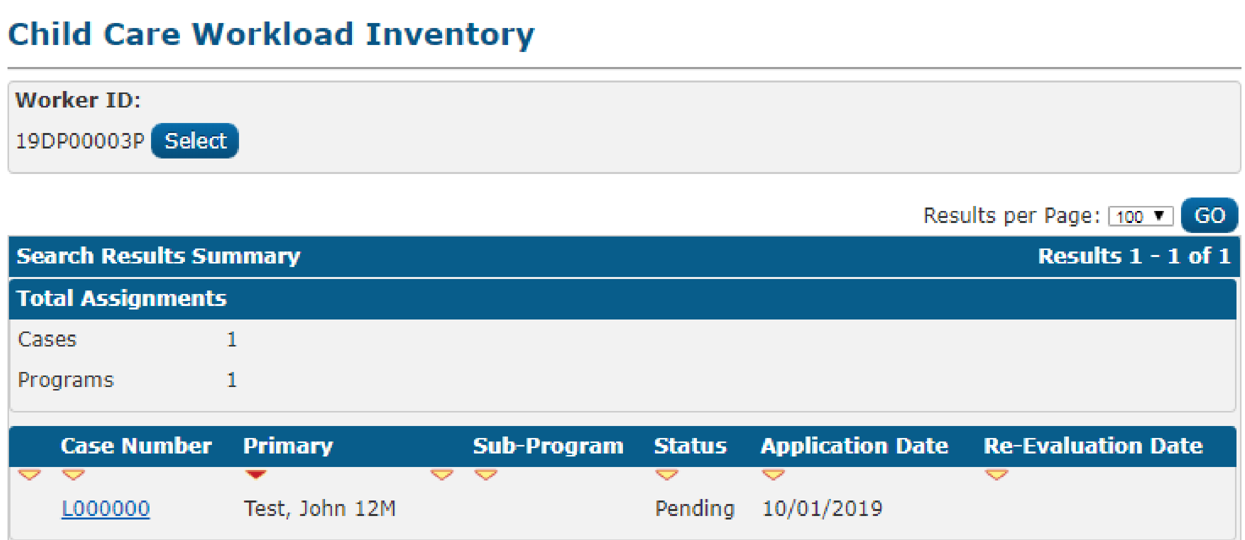

Figure 2.3.1 – Child Care Workload Inventory Mockup

2.3.3 Description of Changes

1. Update the following Child Care task pages to display the person name as Last Name, First Name Age Gender whenever a person's name appears on a page. Use the example of the Child Care Workload Inventory mockup above for the following pages:
    1. Certificate Search
    2. Child Care Needs List
    3. Child Care Needs Detail
    4. Child Care Program Detail
    5. Add Child Care Request
    6. Child Care Customer Reporting List
    7. Manual Reimbursement Request
    8. Child Care Wait List Search

2.3.4 Page Location

Global: Child Care

Local: Case Summary, Reporting, Wait List

Task: (Various)

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

N/A

2.3.7 Page Usage/Data Volume Impacts

N/A

2.4 Resource Databank Global Navigation Pages

2.4.1 Overview

Update applicable pages under the Resource Databank Global Navigation to display the person name as Last Name, First Name Age Gender.

2.4.2 Notification List Mockup

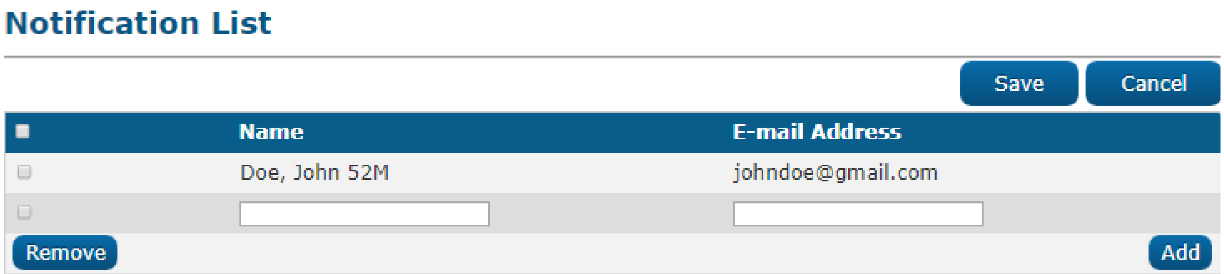

Figure 2.4.1 – Notification List Mockup under Resources Local Navigation

2.4.3 Description of Change

1. Update the Notification List page under the Resource Databank Global Navigation to display the person name as Last Name, First Name Age Gender whenever a person's name appears on a page.

2.4.4 Page Location

Global: Resource Databank

Local: Money Management

Task: (Various)

2.4.5 Security Updates

N/A

2.4.6 Page Mapping

N/A

2.4.7 Page Usage/Data Volume Impacts

N/A

2.5 Fiscal Global Navigation Pages

2.5.1 Overview

Update applicable pages under the Fiscal Global Navigation to display the person name as Last Name, First Name Age Gender.

2.5.2 Payment Request Detail Mockup

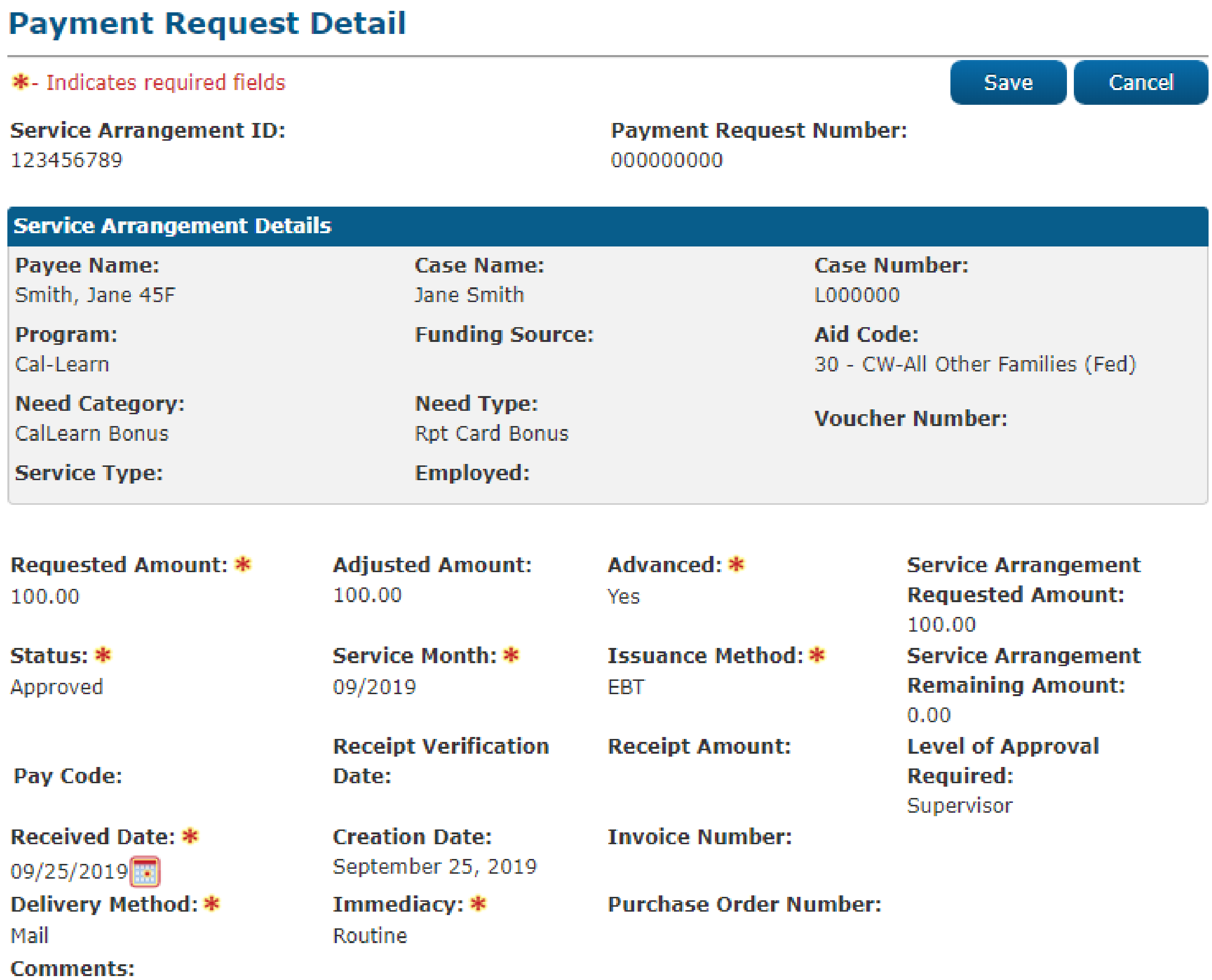

Figure 2.5.1 – Payment Request Detail Mockup under Payment Requests Local Navigation

2.5.3 Description of Change

1. Update pages under the Fiscal Global Navigation to display the person name as Last Name, First Name Age Gender whenever a person's name appears on a page. Use the example of Payment Request Detail page above for the following pages:
    1. Payment Request Search
    2. Service Arrangement Search
    3. Select Person Search Result
    4. Create Receipt
    5. Receipt Detail
    6. Receipt Mass Upload Search
    7. Receipt Mass Upload
    8. Recovery Account Detail

9. Levy Detail
10. Foster Care Trust Fund Detail
11. Care and Maintenance Fund Detail
12. Tax Intercept Account Search
13. Treasurer and Tax Collector Account Search
    - Note: Throughout Collections task pages, update the Responsible Party or Responsible Person fields.
14. Issuance Search
15. Pending Distribution List
16. Placement Verification Search
17. Invoice Print
18. EBT Card Print List
    - Note: Update the Card Holder field.

2.5.4 Page Location

Global: Fiscal

Local: Payment Requests, Collections, Issuances, Invoice, EBT

Task: (Various)

2.5.5 Security Updates

N/A

2.5.6 Page Mapping

N/A

2.5.7 Page Usage/Data Volume Impacts

N/A

2.6 Special Units Global Navigation Pages

2.6.1 Overview

Update applicable pages under the Special Units Global Navigation to display the person name as Last Name, First Name Age Gender.

2.6.2 Unmatched SSI/SSA Search Mockup

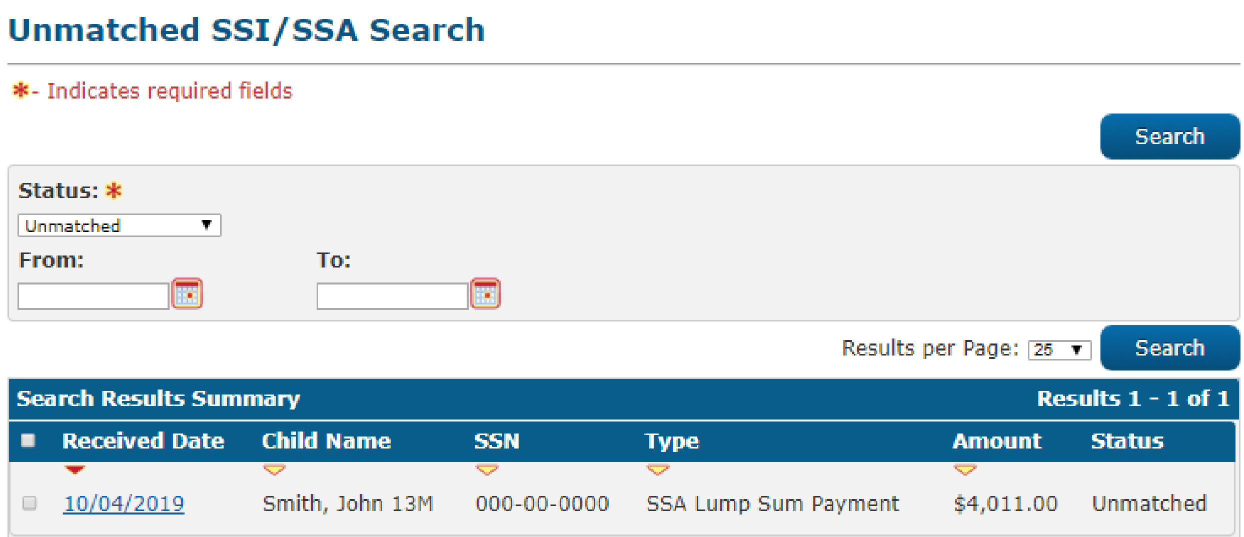

Figure 2.6.1 – Unmatched SSI/SSA Search Mockup under SSIAP Local Navigation

2.6.3 Description of Change

1. Update pages under the Special Units Global Navigation to display the person name as Last Name, First Name Age Gender whenever a person's name appears on a page. Use the example of Unmatched SSI/SSA Search page above for the following pages:
    1. SSIAP Workload Inventory
    2. Hearing Search Results Summary
    3. Person Search Results Summary
    4. WPR Sample Search Summary
    5. Person Search Results Summary
    6. SFIS Results Search Results Summary
    7. Unmatched SSI/SSA Search
    8. Lump Sum Search

2.6.4 Page Location

Global: Special Units

Local: SSIAP Workload Inventory, State Hearings, WPR Sample, SFIS Search, SSIAP

Task: (Various)

2.6.5 Security Updates

N/A

2.6.6 Page Mapping

N/A

2.6.7 Page Usage/Data Volume Impacts

N/A

2.7 Reception Log Page

2.7.1 Overview

Update the Reception Log external page on the Quick Links block on the CalSAWS homepage to display the person name as Last Name, First Name Age Gender.

2.7.2 Reception Log List Mockup

Reception Log List

* - Indicates required fields.

Refine Your Search

Search Results Summary

View Date(s): 12/05/2019 to 12/05/2019

Last Refreshed at 5:17 PM

	Date	Initial Time	Waiting Time	Person	Language	Indiv. Type	Case
	12/05/2019	5:13 PM	00:03	Smith, John 30M			1234567
	12/05/2019	5:14 PM	00:02	Doe, Jane 50M			7654321

Figure 2.7.1 – Reception Log List Mockup (truncated for size)

2.7.3 Description of Change

1. Update the Reception Log List page on the CalSAWS homepage to display the person name as Last Name, First Name Age Gender.

2.7.4 Page Location

Global: CalSAWS homepage > Quick Links

Local: N/A

Task: N/A

2.7.5 Security Updates

N/A

2.7.6 Page Mapping

N/A

2.7.7 Page Usage/Data Volume Impacts

N/A

2.8 <Program> EDBC Pages

2.8.1 Overview

Update applicable <Program> EDBC Pages to display the person name as Last Name, First Name Age Gender.

2.8.2 CalWORKS EDBC Summary Mockup

Figure 2.8.1 – CalWORKS EDBC Summary Mockup

2.8.3 Description of Change

1. Update <Program> EDBC pages to display the person name as Last Name, First Name Age Gender whenever a person's name appears on a page. Use the example of CalWORKS EDBC Summary page above for the following EDBC pages:
    1. <Program> EDBC Summary
    2. <Program> EDBC Summary (Manual)
    3. <Program> EDBC Detail (Manual)
    4. <Program> EDBC List (Manual)
    5. Individual Detail
    6. EDBC Person Line Item Detail (assuming a single update)
    7. Unit Size Detail
    8. WINS Detail
    9. <Program> EDBC Override Detail
    10. <Program> EDBC Override List
    11. Program Configuration List
    12. Program Configuration Detail

13. Program Configuration Override List
14. Program Configuration Override Detail
15. CFAP Calculation Detail
16. Infant Supplemental Payment Detail
17. Negative Action Detail
    - Note: Negative Action Detail page is accessed via Case Info > Case Summary or Eligibility > Case Summary (Not Customer Information)
18. Pickle Disregard Detail
19. Property Detail
20. Sneede EDBC Summary – MC Income Sneede
21. Special Care Increment Proration Detail

2.8.4 Page Location

Global: Eligibility

Local: Customer Information

Task: Run EDBC or Manual EDBC

2.8.5 Security Updates

N/A

2.8.6 Page Mapping

N/A

2.8.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2057	The CONTRACTOR shall display the age and gender after the name of the customer throughout the data collection pages once the user saves the page.	This information will not appear when the name is stored in different fields, i.e. First Name, MI, Last Name.	Update Names throughout the Data Collection pages to display as Last Name, First Name Age Gender.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207218 | DDID 2056

Add Date Signed and Comments fields to the Document Detail page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Linda Zeng
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/22/2019	1.0	Original	Linda Zeng
12/20/2019	1.1	Made updates from QA	Melissa Mendoza
01/07/2020	1.2	Added section 2.1.3.1.a per QA	Linda Zeng
01/10/2020	1.3	Updated section 2.1.3 with regards to Edit button and date validation	Linda Zeng

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1 OVERVIEW

This SCR adds a Date Signed field and a Comments text box to the Document Detail page to indicate the date the customer signed a form. This functionality can be used to track the date the customer signed the "Rights and Responsibilities" and "Statement of Facts" when applying or recertifying for benefits, or any other form generated in CalSAWS.

1.1 Current Design

The Document Detail page does not have a Date Signed field or a Comments text box.

1.2 Requests

Per DDID 2056, add a place in the CalSAWS Software to track the date the customer signed the "Rights and Responsibilities" and the "Statement of Facts." The Document Detail page will be updated with the ability to track the date any generated form is signed, if applicable.

1.3 Overview of Recommendations

Update the Document Detail page to add a Date Signed field to capture the date that a customer signed the form, and a Comments text box to capture additional details.

1.4 Assumptions

1. The date will be informational only and will not impact the Eligibility determination.
2. There will be no Conversion of data.

2 RECOMMENDATIONS

2.1 Document Detail

2.1.1 Overview

Add a Date Signed field and a Comments text box to the Document Detail page.

2.1.2 Document Detail Mockup

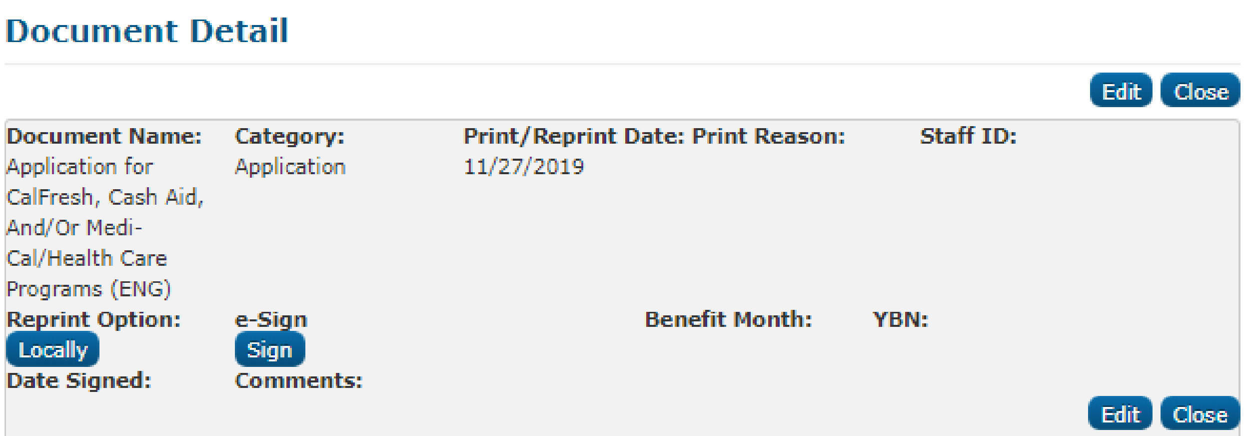

Figure 2.1.1 – Document Detail (View mode) mockup

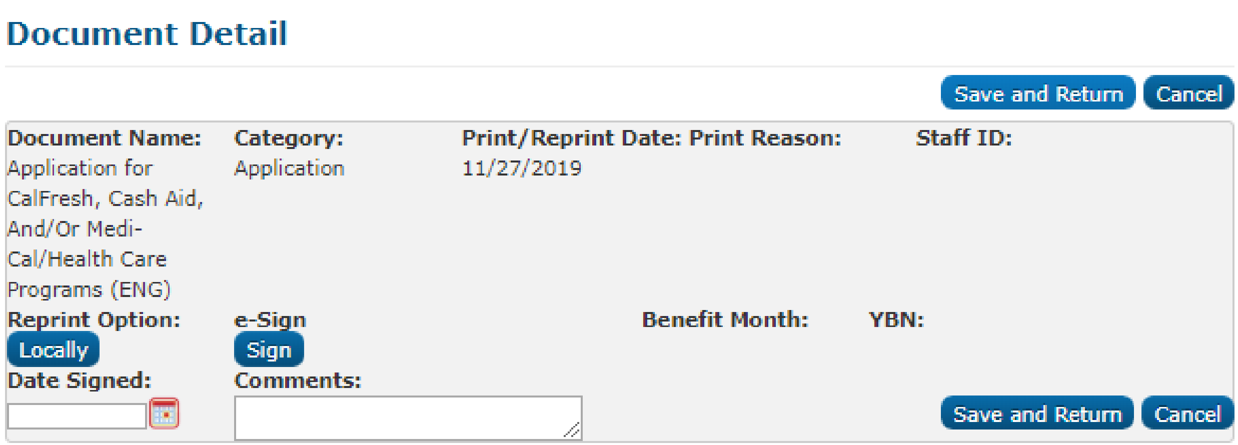

Figure 2.1.2 – Document Detail (Edit mode) mockup

2.1.3 Description of Changes

1. Add a Date Signed field and a Comments text box to the Document Detail page.
2. Update system so that the Edit button always displays.

    a. Updates will apply only to Forms and not to Notices of Action (NOAs).
3. Include date validation to not allow a future date to be entered. The date will need to be a valid date in order to save the record.

2.1.4 Page Location

- **Global:** Client Corresp. / Eligibility/ Empl. Services
- **Local:** Distributed Documents
- **Task:** Distributed Documents Search

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Update Document Detail page mapping to include the Date Signed field and the Comments text box field.

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2056	**Original:** The CONTRACTOR shall add a place in the CalSAWS Software to indicate the following for CalWORKs and Medi-Cal: 1) The Rights and Responsibilities is signed 2) The date the Rights and Responsibilities is signed 3) The Statement of Facts is signed 4) The date the Statement of Facts is signed **Revised:** The CONTRACTOR shall update the Document Detail page to add a place to indicate the date a form was signed.	**Original:** • A new online page will be created to track the new data points that will be added. **Revised:**	A Date Signed field and a Comments box are added to the Document Detail page in CalSAWS to capture the date the customer signed the form.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207226 | DDID 2048

Display all of the EDBC reasons that prevents a User from running EDBC

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Yale Yee
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
9/25/2019	1.0	Initial Document	Yale Yee

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1 OVERVIEW

Both hard and soft validations are displayed on the Run EDBC page. Hard validations restrict the user from running EDBC while soft validations allow the user to run EDBC without resolving the validation.

1.1 Current Design

In CalSAWS, there are different types of validations on the Run EDBC pages.

- There are two types of hard validation on the Run EDBC, Create Manual EDBC, and Negative Action Detail pages:
  - A validation that restricts the user from running EDBC and provides a hyperlink that navigates to the page with missing information.
  - A validation, displayed in black text (hard validation), that restricts the user from running EDBC until the validation is resolved.

  Hard validations are not displayed as a list of validations for each program on the Run EDBC page. One hard validation is displayed for each program at a time.

- There is one type of soft validation on the Run EDBC page:
  - A validation, displayed in red text (soft validation), that allows the user to run EDBC without resolving the validation.
    - Soft validations are displayed as a list on the run EDBC page.
    - Soft validations are displayed when a program is selected after hard validations have been resolved for the program.
    - Soft validations are not displayed based on specific programs.
      - Soft validations are displayed for all programs that are eligible to run EDBC based on the benefit months selected.

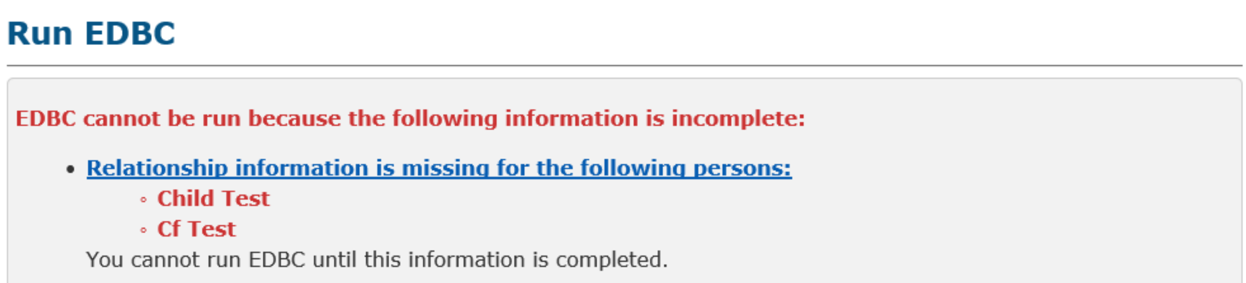

Figure 1.1.1 – Hard Validation with hyperlink on Run EDBC page

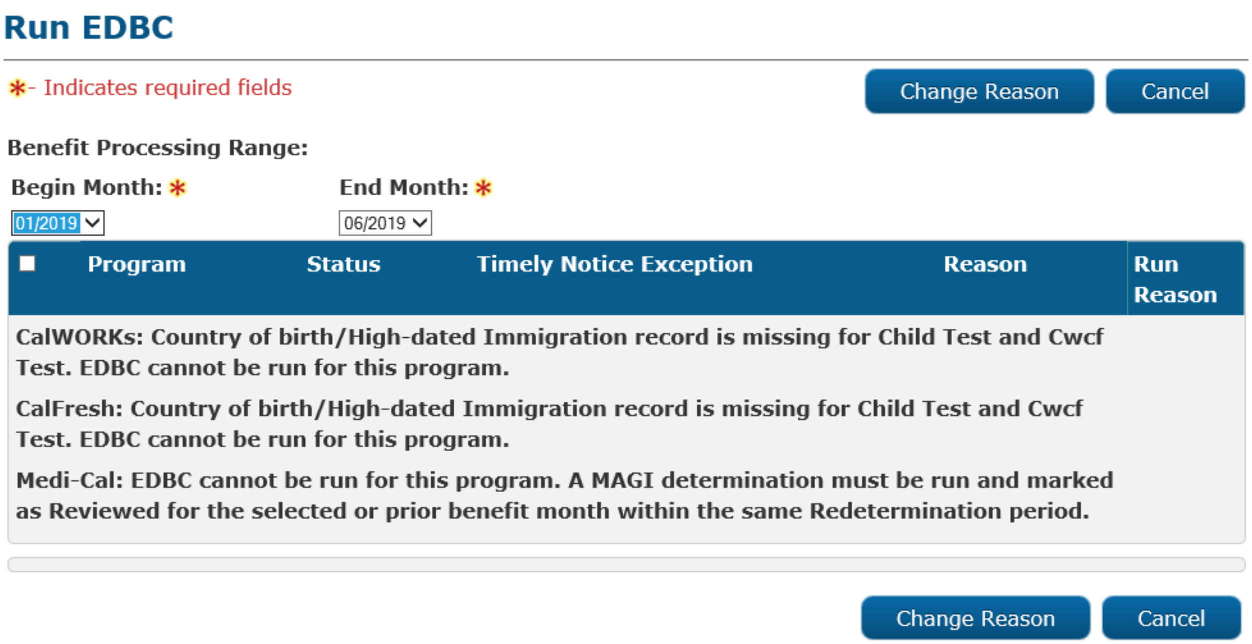

Figure 1.1.2 – Hard Validation on Run EDBC page

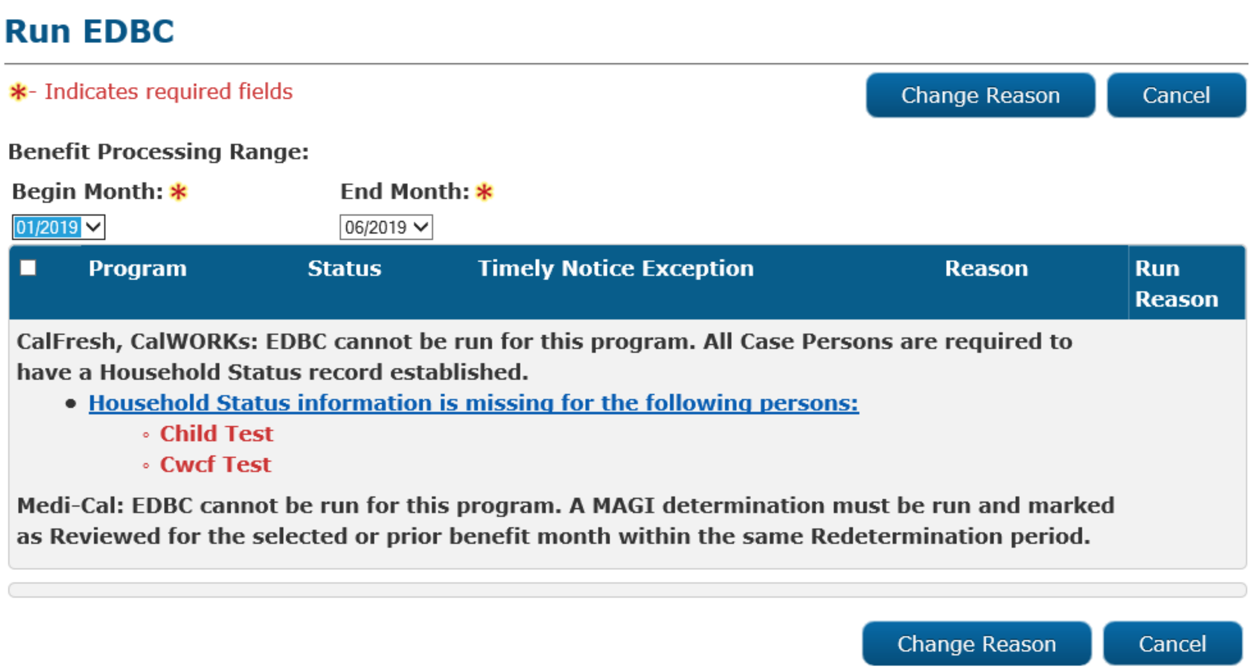

Figure 1.1.3 – Hard Validation for multiple programs on Run EDBC page

Figure 1.4.1 – Soft Validations on EDBC page

1.2 Requests

1. Display all hard validations for relevant programs as a list on the Run EDBC, Create Manual EDBC, and Negative Action Detail pages.
2. Display soft validations for the relevant program as a list on the Run EDBC page.

1.3 Overview of Recommendations

1. The Run EDBC, Create Manual EDBC, and Negative Action Detail pages will display a list of hard validation.
2. The Run EDBC page will display a list of soft validations based on programs selected.

1.4 Assumptions

1. Validations based on verifications will not change.
2. The conditions to display the “Run EDBC w/o Verifications” button will remain the same.
3. Batch EDBC will continue to utilize a hierarchy for the Batch skip reason and will not store multiple skip reasons.
4. Soft validations do not display on the Create Manual EDBC and Negative Action Detail pages.
5. Hard validations are associated to a program.

2 RECOMMENDATIONS

The Run EDBC page will display a list of hard validation and a list of soft validations based on programs selected.

2.1 Hard Validations on Run EDBC page

2.1.1 Overview

The Run EDBC page will display a list of hard validations for the relevant program.

2.1.2 Run EDBC Mockup

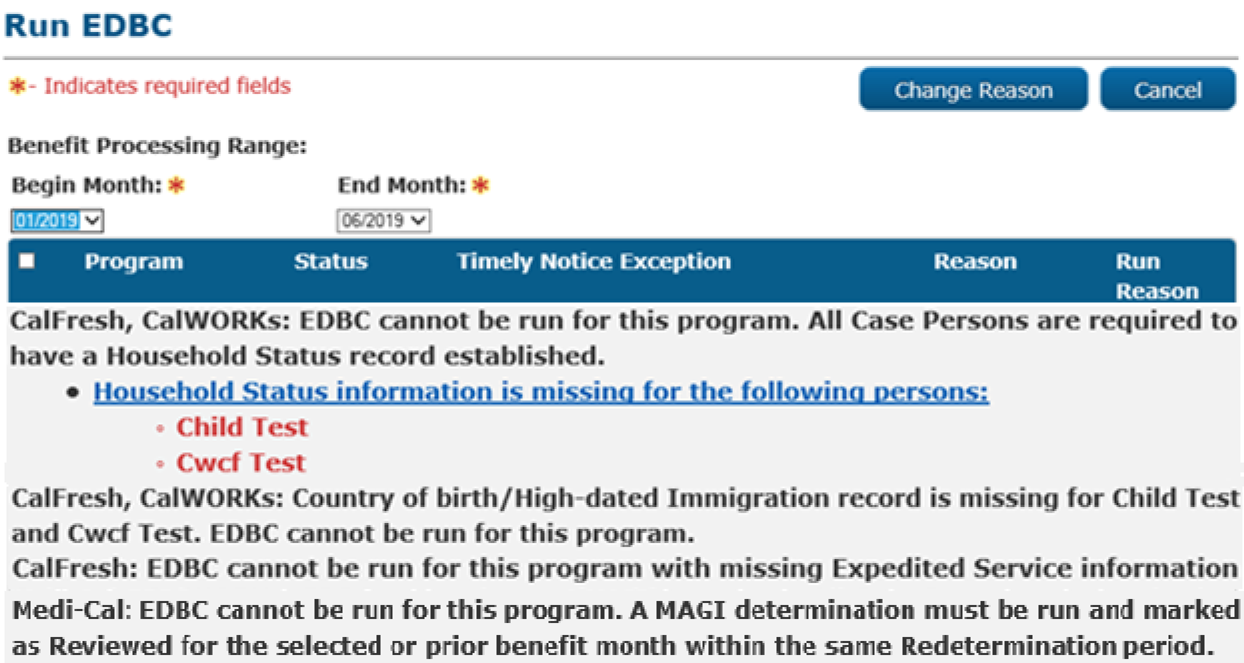

Figure 2.1.1 – All hard validations relevant to the program will display in a list

2.1.3 Description of Changes

1. Update the Run EDBC page to display a list of all hard validations triggered for the relevant program.
    a. If there are multiple programs, display a list of all hard validations triggered for each relevant program.
2. If the same validation is relevant to different programs, one validation will display with each program appended to the beginning of the validation ordered alphabetically based on the program.
3. Display the hard validations as specified in alphabetical order based on the program, respectively:

a. Multiple programs associated to the hard validation with a hyperlink.
b. Single programs associated to the hard validation with a hyperlink.
c. Multiple programs associated to the hard validation without a hyperlink.
d. Single program associated to the hard validation without a hyperlink.

2.1.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Soft Validations on Run EDBC page

2.2.1 Overview

The Run EDBC page displays a list of soft validations for programs including programs that have not addressed all the hard validations.

2.2.2 Run EDBC Mockup

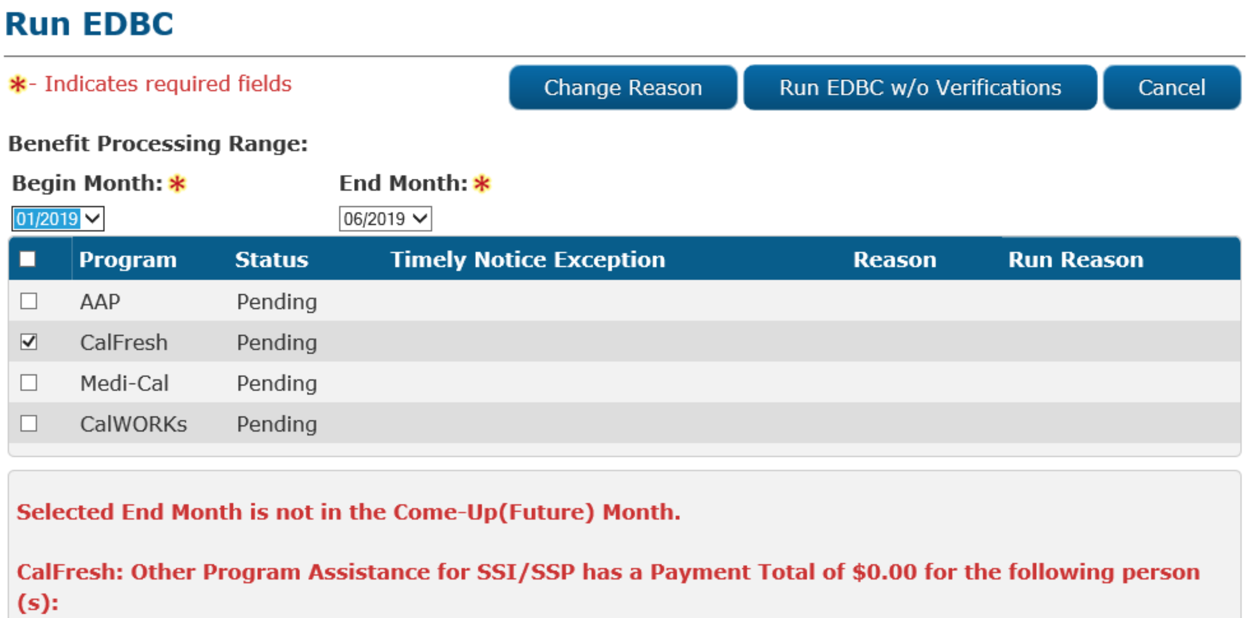

Figure 2.2.1 – All soft validations for selected program(s) will display in a list

2.2.3 Description of Changes

1. Update the Run EDBC page to display a list of all soft validations triggered for the relevant selected program.
2. For program specific soft validations, the name of the program will be appended to the beginning of the soft validation.
3. If the same validation is relevant to different programs, one validation will display with each program appended to the beginning of the validation ordered alphabetically based on the program.
4. Display the soft validations not associated with a specific program before the soft validations associated with a specific program.
5. Display the soft validations as specified in alphabetical order based on the program, respectively:
    a. Multiple programs associated to the soft validation.
    b. Single program associated to the soft validation.

Note:

1. If the soft validation is not associated with a specific program, the validation will always display.
2. The soft validations will display after the user selects the benefit month(s) and program(s) then clicks the Run EDBC button.

2.2.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information

- **Task:** Run EDBC

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

N/A

2.2.7 Page Usage/Data Volume Impacts

N/A

2.3 Hard Validations on Create Manual EDBC page

2.3.1 Overview

The Create Manual EDBC page will display a list of hard validations for the relevant program.

2.3.2 Create Manual EDBC Mockup

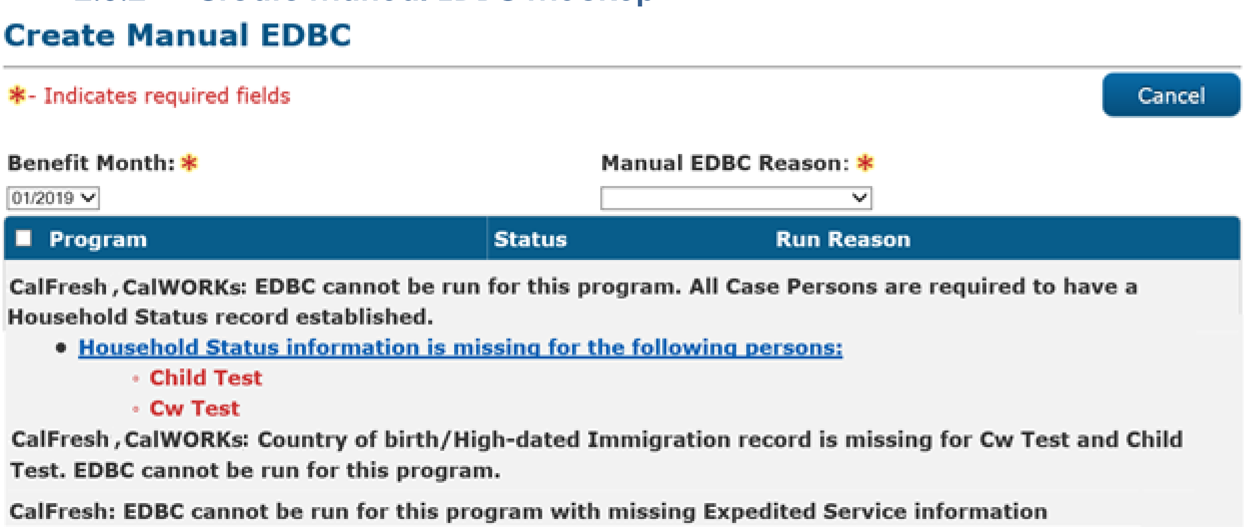

Figure 2.3.1 – All hard validations relevant to the program will display in a list

2.3.3 Description of Changes

1. Update the Create Manual EDBC page to display a list of all hard validations triggered for the relevant program.

    a. If there are multiple programs, display a list of all hard validations triggered for each relevant program.
2. If the same validation is relevant to different programs, one validation will display with each program appended to the beginning of the validation ordered alphabetically based on the program.
3. Display the hard validations as specified in alphabetical order based on the program, respectively:
    a. Multiple programs associated to the hard validation with a hyperlink.
    b. Single programs associated to the hard validation with a hyperlink.
    c. Multiple programs associated to the hard validation without a hyperlink.
    d. Single program associated to the hard validation without a hyperlink.

2.3.4 Page Location

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

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

N/A

2.3.7 Page Usage/Data Volume Impacts

N/A

2.4 Hard Validations on Negative Action Detail page

2.4.1 Overview

The Negative Action Detail page will display a list of hard validations for the relevant program.

2.4.2 Negative Action Detail Mockup

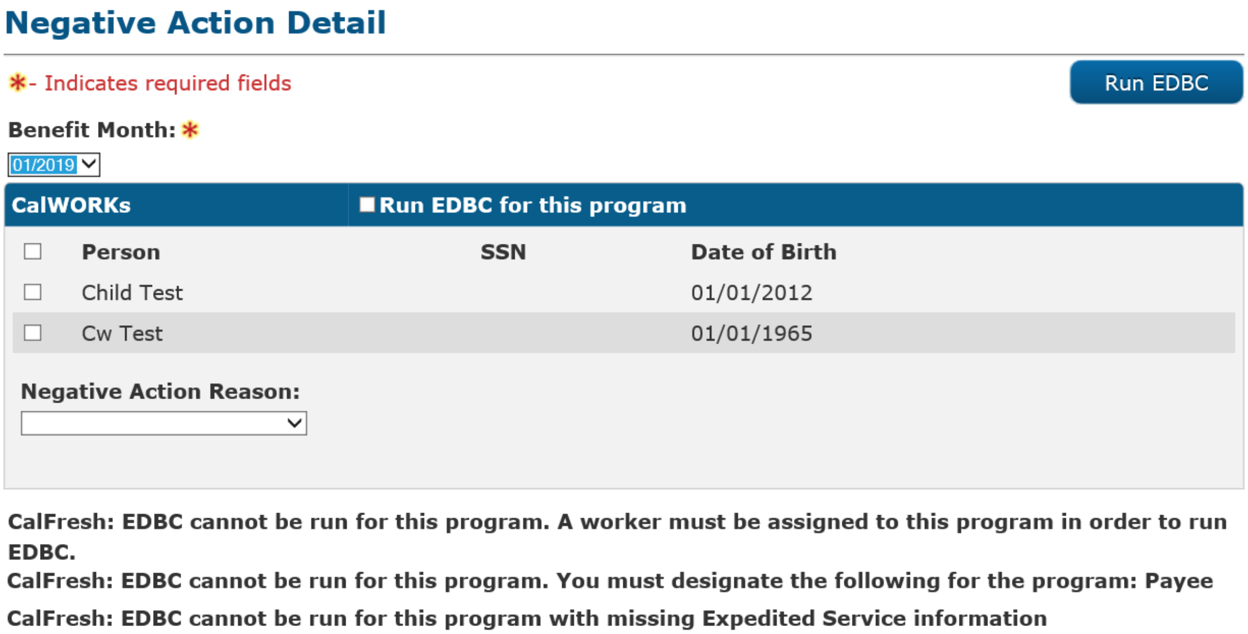

Figure 2.4.1 – All hard validations relevant to the program will display in a list

2.4.3 Description of Changes

1. Update the Negative Action Detail page to display a list of all hard validations triggered for the relevant program.
    a. If there are multiple programs, display a list of all hard validations triggered for each relevant program.
2. If the same validation is relevant to different programs, one validation will display with each program appended to the beginning of the validation ordered alphabetically based on the program.
3. Display the hard validations as specified in alphabetical order based on the program, respectively:
    a. Multiple programs associated to the hard validation with a hyperlink.
    b. Single programs associated to the hard validation with a hyperlink.
    c. Multiple programs associated to the hard validation without a hyperlink.
    d. Single program associated to the hard validation without a hyperlink.

2.4.4 Page Location

- **Global:** Eligibility
- **Local:** Case Summary
- **Task:** Negative Action

2.4.5 Security Updates

N/A

2.4.6 Page Mapping

N/A

2.4.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2048	**Original:** The CONTRACTOR shall display all of the EDBC reasons that prevents the user from running EDBC (hard validations) at the Run EDBC Page and display all missing verifications and associated pages (soft validations). The CONTRACTOR shall display all EDBC failure reasons within the EDBC Detail Page. **Revised:** The CONTRACTOR shall display all of the EDBC reasons that prevents the user from running EDBC (hard validations) at the Run EDBC Page, Create Manual EDBC page and Negative Action Detail page and display all missing verifications and associated pages (soft validations). ~~The CONTRACTOR shall display all EDBC failure reasons within the EDBC Detail Page.~~	**Original:** Requirements to display all validations at Run EDBC and to display all failure reasons on the EDBC Detail pages could result in impacts to Performance and Service Level Agreements. - A new framework will be created to store and identify all applicable EDBC validations. - Batch EDBC will continue to utilize a hierarchy for the Batch skip reason and will not store multiple skip reasons. - Generating additional failure reasons in EDBC may result in additional Notices of Action being generated. - Multiple failure reasons will be displayed on a child page of EDBC Summary. Multiple reasons will not display on non-EDBC pages (e.g., Case Summary, Program History, Person History).	The Run EDBC page, Create Manual EDBC page and Negative Action Detail page displays a list of hard validation and a list of soft validations based on programs selected. The current design of EDBC logic, regarding displaying all EDBC failure reasons within the EDBC Detail page, will not run additional rules when the program is failed, i.e., if a program fails for a non-financial reason, the financial rules will not run. No change is needed to display all EDBC failure reasons as this is existing functionality on the Individual Detail page, which is accessed from the <Program> EDBC Summary page.

		Revised: ~~Requirements to display all validations at Run EDBC and to display all failure reasons on the EDBC Detail pages could result in impacts to Performance and Service Level Agreements.~~ ~~- A new framework will be created to store and identify all applicable EDBC validations.~~ - Batch EDBC will continue to utilize a hierarchy for the Batch skip reason and will not store multiple skip reasons. ~~- Generating additional failure reasons in EDBC may result in additional Notices of Action being generated.~~ ~~- Multiple failure reasons will be displayed on a child page of EDBC Summary. Multiple reasons will not display on non-EDBC pages (e.g., Case Summary, Program History, Person History).~~	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207250 | DDID1787

Migrate C-IV County Specific Batch Jobs

Phase 2

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Avi Bandaranayake
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/10/2019	1.0	Initial Draft	Avi Bandaranayake

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1 OVERVIEW

There are currently 5,158 C-IV batch jobs identified as needing to be evaluated for migration into CalSAWS. This DDID is Phase 2 of a three-phase effort to evaluate 1,573 active C-IV batch jobs for migration into CalSAWS. The batch jobs identified by this DDID cover a variety of functional areas.

1.1 Current Design

The jobs identified in Supporting Document 1 are batch jobs that currently exist only in the C-IV system. Also known as C-IV Jobs.

The jobs identified in Supporting Document 2 are batch jobs that exist in both C-IV and CalSAWS. Also known as Common Jobs.

1.2 Requests

Per DDID 1787, migrate the C-IV County Specific Batch Jobs into CalSAWS.

1.3 Overview of Recommendations

1. Identify batch jobs that are currently active in the C-IV system that do not exist in CalSAWS.
2. Identify batch jobs that are currently active in both the C-IV and CalSAWS systems.
3. Port over C-IV code and batch jobs identified in Supporting Document 1.
4. Verify configuration and batch properties for jobs listed in Supporting Document 2.

1.4 Assumptions

1. Scheduling of any migrated batch jobs in will be handled by DDID 1789.
2. The 5,158 jobs identified include active and inactive jobs. The inactive jobs will be identified during development. The final number of jobs to be migrated may be less than the initial count identified.

2 RECOMMENDATIONS

2.1 C-IV Jobs

2.1.1 Overview

The C-IV jobs identified will be listed in Supporting Document 1. These will be migrated and configured to run in CalSAWS.

2.1.2 Description of Change

1. For each batch job listed in Supporting Document 1:
    a. Port any code associated with the jobs.
    b. Update associated configurations and properties.
2. ‘00’ jobs: Majority of these jobs will fall under Common Jobs and will have the configuration and properties updated to include C-IV and CalWIN counties.
3. County ‘XX’ jobs (County-specific jobs):
    a. If the job is only specific to one county and has no overlap in either system, the batch job will remain unchanged.
    b. If the batch job exists for multiple counties or exists in both systems and is functionally and logically the same, then these will be converted to a ‘00’ job with a county parameter list to handle the multiple counties.

2.1.3 Execution Frequency

Covered under DDID 1789.

2.1.4 Key Scheduling Dependencies

Covered under DDID 1789.

2.1.5 Counties Impacted

All Counties.

2.1.6 Data Volume/Performance

No Change.

2.1.7 Failure Procedure/Operational Instructions

No Change.

2.2 Common Jobs

2.2.1 Overview

The Common Jobs identified will be listed in Supporting Document 2. These will be inspected for configuration and batch property discrepancies. Any jobs identified as having discrepancies will be updated so that the job continues to run for all counties.

2.2.2 Description of Change

1. Compare the batch job configuration between C-IV and CalSAWS.
2. If any discrepancies are found, merge configurations to allow the job to run for all counties.
3. Compare the batch job properties between the two systems.
4. If any discrepancies are found, merge properties to allow the job to run for all counties.
5. '00' jobs: Majority of these jobs will fall under Common Jobs and will have the configuration and properties updated to include C-IV and CalWIN counties.
6. County 'XX' jobs (County-specific jobs):
    a. If the job is only specific to one county and has no overlap in either system, the batch job will remain unchanged.
    b. If the batch job exists for multiple counties or exists in both systems and is functionally and logically the same, then these will be converted to a '00' job with a county parameter list to handle the multiple counties.

2.2.3 Execution Frequency

Covered under DDID 1789.

2.2.4 Key Scheduling Dependencies

Covered under DDID 1789.

2.2.5 Counties Impacted

All Counties.

2.2.6 Data Volume/Performance

No Change.

2.2.7 Interface Partner

No Change.

2.2.8 Failure Procedure/Operational Instructions

No Change.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Batch	List of C-IV jobs to be migrated	SupportingDocument1C-IVJobs.xlsx
2	Batch	List of Common jobs to be merged	SupportingDocument2CommonJobs.xlsx

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1787	The CONTRACTOR shall migrate the C-IV County Specific Batch Jobs across the impacted Batch modules into the CalSAWS Software as determined during the migration design phase.	• All 58 counties will be incorporated into the same batch schedule. • The jobs that are new since side by side will be migrated into the CalSAWS System. • C-IV County interfaces that were included in LRS baseline will not require functional updates. • The Batch properties and scheduling will have to be updated for each wave separately.	C-IV County specific batch jobs will be migrated to CalSAWS through multiple SCRs.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207288 | DDID 1556

Update the logic on the Special Investigation Referral page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Erika Kusnadi-Cerezo
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11.14.2019	1.0	Original	Erika Kusnadi-Cerezo

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1 OVERVIEW

The Special Investigation Referral page allows a user to create a Fraud Referral so a Special Investigation can be opened. This SCR updates the logic for which address will populate in the address field of the Special Investigation Referral page and updates the CIN information that will display.

1.1 Current Design

Currently in CalSAWS, the address that defaults in the address field of the Special Investigation Referral page, as well as the CIN information, is dependent on the information selected by the user.

1.2 Requests

Update the existing logic on the Special Investigation Referral page to default with the primary applicant's address in the address field. Secondly, update the CIN Information to display as part of the Involved Person section within the Special Investigation Referral page.

1.3 Overview of Recommendations

1. Update the logic in the Special Investigation Referral page to default with the primary applicant's physical address in the address field.
2. Update the Involved Person section to include the CIN information.

1.4 Assumptions

N/A

2 RECOMMENDATIONS

2.1 Special Investigation Referral

2.1.1 Overview

The Special Investigation Referral page allows a user to create a Fraud Referral so an investigation can be opened. The logic to determine which address populates in the address field will be updated to display the primary applicant's physical address. Secondly, CIN information will be moved to display in the Involved Person section.

2.1.2 Special Investigation Referral Mockup

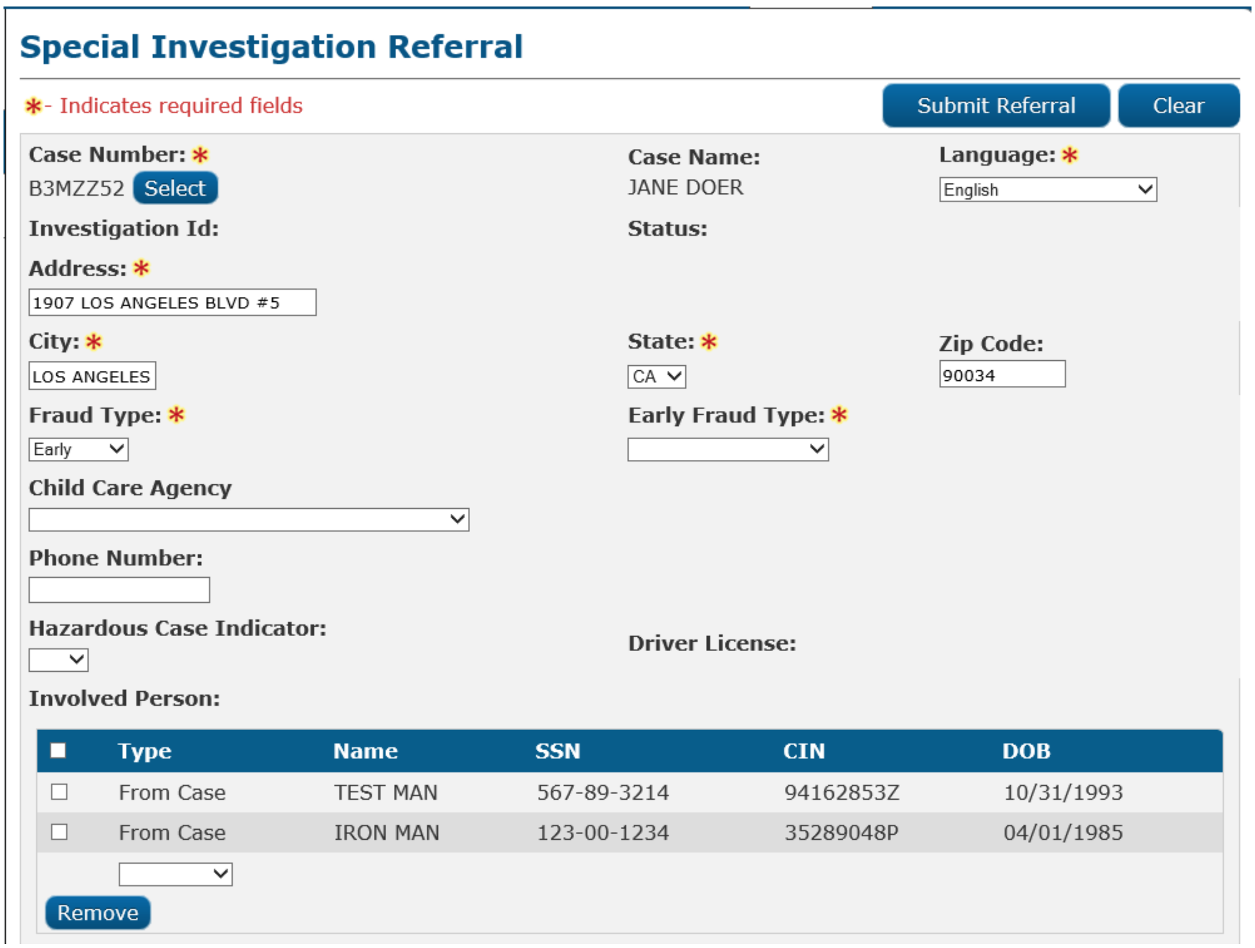

Figure 2.1.1 – Special Investigation Referral Mockup

2.1.3 Description of Changes

1. Update the address field of the Special Investigation Referral page to default to the primary applicant's physical address.

a. If there is more than one program with different Primary Applicants within a case, the address field will default to the primary applicant's physical address based on the program type, in the following order:
    i. Cash Program
        1. CalWORKs
        2. General Assistance/General Relief
        3. CAPI (Cash Assistance Program for Immigrants)
        4. RCA (Refugee Cash Assistance)
    ii. CalFresh
    iii. Medi-Cal
    iv. Other Programs

2. Update the placement of the CIN information to display under the Involved Person section as shown in Figure 2.1.1
    a. CIN information displayed will correspond to the person selected in the Involved Person section.

2.1.4 Page Location

- **Global: Special Units**
- **Local: Special Investigations**
- **Task: Special Investigation Referral**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1556	**Original:** The CONTRACTOR shall update the logic on the Special Investigation Referral page to populate the current primary applicant's physical address in the address fields. **Revised:** The CONTRACTOR shall update the logic on the Special Investigation Referral page to populate the current primary applicant's physical address in the address fields and display the CIN for each person in the Involved Person section.	• Assumption that this only applies to internal cases where a case is directly linked to an investigation.	Update the logic in the Special Investigation Referral page to always display the primary applicant's address in the address field. Secondly, to update the placement on where the CIN information should display.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207332 DDID 1389 – Generate CSF 101 from Valuable Request Detail Page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Jamie Ng, Harish Katragadda
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
5/7/2019	1.0	Original Draft	Jamie Ng

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1 OVERVIEW

1.1 Current Design

A PA 19 – Memorandum to District Cashier – is generated from the Valuable Request Detail page when the Issue button is clicked in CalSAWS.

1.2 Requests

Add a new form to CalSAWS, CSF 101 – Valuable Issuance Acknowledgement (based on the C-IV FIN 115 form), which will generate when a User from a county other than Los Angeles County clicks the Issue button on the Valuable Request Detail page. A PA 19 will generate when a User from Los Angeles County clicks the Issue button on the Valuable Request Detail page.

1.3 Overview of Recommendations

1. Add CSF 101 form that will generate through Valuable Request Detail page and will be available from the Template Repository.
2. Generate the CSF 101 when a user from a county other than Los Angeles County clicks the Issue button on the Valuable Request Detail page.
3. PA 19 will continue to generate for Los Angeles County

1.4 Assumptions

1. The PA 19 will continue to generate for Los Angeles County for Bus Token and Buss Pass - No valid Month Need types. No modifications will be made to the PA 19.
2. The CSF 101 will generate only for 57 migration counties and not Los Angeles County.
3. The CSF 101 will generate for all the Valuable types for the 57 migration counties.
4. The CSF 101 will be added in English and Spanish languages.
5. Threshold languages of the CSF 101 form will be added with CA-211940.

2 RECOMMENDATIONS

2.1 CSF 101 - Valuable Issuance Acknowledgement

2.1.1 Overview

A CSF 101 - Valuable Issuance Acknowledgement – will generate when a User from a county other than Los Angeles County clicks the Issue button on the Valuable Request Detail page. A PA 19 will generate when a User from Los Angeles clicks the Issue button on the Valuable Request Detail page.

Form: CSF 101

Program:

Cal-Learn

CalWORKs

CalFresh Employment & Training

General Assistance/General Relief

Welfare to Work

Forms Category: Forms

Languages:

English, Spanish

2.1.2 Description of Change

1. Add a CSF 101 form in CalSAWS that generates from the Valuable Request Detail page and make it available in the Template Repository using the CalSAWS standard header.

   Form Title: Valuable Issuance Acknowledgement

   Form Number: CSF 101

   Include NA Back 9: No

   Imaging Barcode: Yes

   Form Mockups: Please refer to **Section 3.0 – Supporting Document #1, #2**.

2. **Add New CSF 101 Form Generation Logic**
   Generate the CSF 101 - Valuable Issuance Acknowledgement when a User from a county other than Los Angeles County clicks the Issue button on the Valuable Request Detail page in a pop window.

3. **Variable Population for CSF 101 Form**
   Populate the variables on the CSF 101 - Valuable Issuance Acknowledgement form per the table below.

Section	Field	Description
Header		CalSAWS Standard Header
CSF 101 - Page 1	County Name	County of the logged in Worker
CSF 101 - Page 1	County Address	Address of office of Worker who approved Service Arrangement
CSF 101 - Page 1	Worker Name	Worker who approved Service Arrangement
CSF 101 - Page 1	Worker ID	ID of Worker who approved Service Arrangement
CSF 101 - Page 1	Worker Phone Number	Phone Number of Worker who approved Service Arrangement, Format (###) ###-####
CSF 101 - Page 1	Case Name	Case Name of Case Number on Service Arrangement
CSF 101 - Page 1	Date	Date on which CSF 101 generated
CSF 101 - Page 1	Customer ID	Customer Id of the Participant
CSF 101 - Page 1	Case Number	Case Number on Service Arrangement
CSF 101 - Page 1	Participant's Mailing Address	Mailing Address of Participant
Valuables		
CSF 101 - Page 1	Valuable Request Id	ID of the valuable request VALBL_REQ.ID
CSF 101 - Page 1	Participant Name	Name of Participant from Need Detail page
CSF 101 - Page 1	Payee Name	Payee's Name from Service Arrangement SERV_ARRGMT.PAYEE_PERS_ID

Section	Field	Description
CSF 101 - Page 1	Valuable Type	Type of valuable VALBL_TYPE.VALBL_DESCR
Dynamic Table		
CSF 101 - Page 1	Valid Month	Effective Month for Bus Pass Valid Month VALBL.EFF_DATE
CSF 101 - Page 1	Starting Control Number	Starting valuable number VALBL.CONTROL_NUM_IDENTIF
CSF 101 - Page 1	Ending Control Number	Ending valuable number VALBL.CONTROL_NUM_IDENTIF
CSF 101 - Page 1	Quantity/Amount	Quantity is displayed for non Imprest Cash valuables Bus Pass - Valid Month, Gift Certificate, Bus Ticket, Bus Pass - No Valid Month, Gas Card, Campus Parking: Quantity = Ending Control Number - Starting Control Number + 1 Voucher: Quantity = Count(VALBL.CONTROL_NUM_IDENTIF) Bus Token: Quantity = Count(VALBL.CONTROL_NUM_IDENTIF)
CSF 101 - Page 1	Total	Value and Quantity totals
Footer		
CSF 101 - Page 1	Customer Signature	No population - will be editable for the worker
CSF 101 - Page 1	Date	No population - will be editable for the worker
CSF 101 - Page 1	ID Verified	No population - will be editable for the worker
CSF 101 - Page 1	PICK-UP	No population - will be editable for the worker
CSF 101 - Page 1	MAIL	No population - will be editable for the worker
CSF 101 - Page 1	BY	No population - will be editable for the worker

2.1.3 Add Form Print Options and Mailing Requirements

1. The following Print Options will be included for the CSF 101 Form:

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

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	CSF 101 English	CSF_101_ENGLISH.pdf
2	Client Correspondence	CSF 101 Spanish	CSF_101_SPANISH.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1389	**Original:** The CONTRACTOR shall update the form that generates on the Valuable Request Detail page when the Issue button is selected to generate the FIN 115 for the 57 Counties. Los Angeles County will continue to generate the PA 19. **Revised:** The CONTRACTOR shall update the form that generates on the Valuable Request Detail page when the Issue button is selected to generate the CSF 101 (previously known as the FIN 115) for the 57 migration Counties. Los Angeles County will continue to generate the PA 19.	N/A	CSF 101 will generate when a User from a county other than Los Angeles County clicks the Issue button on the Valuable Request Detail page and the form will be available in template repository.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207344 | DDID 1360

Add Direct Deposit Functionality to CalSAWS for C-IV Migration Counties

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Duke Vang
	Reviewed By	Amy Gill, Jyothimayi Chavata

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
5/28/2019	1.0	Initial Revision	Duke Vang
11/18/2019	1.1	Added additional details and assumptions	Duke Vang
1/7/2020	1.2	Updates with comments from QA	Duke Vang

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1 OVERVIEW

1.1 Current Design

The C-IV Direct Deposit functionality was removed from LRS as part of the Los Angeles County go-live. Though payments can still be issued as Direct Deposit in CalSAWS for Los Angeles County, the data collection for the Customer Account Number, Customer Routing Number information, and Direct Deposit National Automated Clearing House Association (NACHA) interface is done externally outside of CalSAWS.

1.2 Requests

Per Design Differences ID (DDID) 1360, the Direct Deposit functionality, batch job, and interface needs to be added back into CalSAWS for all 58 Counties.

This design will be migrating the Direct Deposit functionality and interfaces for the C-IV Migration Counties only. CA-212363 will add the Direct Deposit interface for the CalWIN Migration Counties.

1.3 Overview of Recommendations

The Direct Deposit functionality will be added back to CalSAWS along with the associated Direct Deposit data collection under Issuance Method Detail page to collect the Customer's Bank Account information.

1.4 Assumptions

1. Los Angeles County will continue to utilize their external Direct Deposit process and interface. The existing Issuance Method Detail page for Direct Deposit will remain for Los Angeles County. A new Issuance Method Detail page for Direct Deposit will be created for the 57 Migration Counties.
2. All Customer Bank Account information for the 57 Migration Counties will be migrated with the conversion effort.
3. All previously verified migrated Customer Bank Accounts will not require another prenote.
4. All county interface testing with the county banks will occur with DDID 1970.
5. The Issuance Type category (CT 112) that determines what Programs can be issued as Direct Deposit, EBT, and Warrants will continue to remain at the Program/Resource level and will not be altered in CalSAWS.
6. The C-IV General Assistance (Managed) Program will be migrated into CalSAWS with DDCR 10002 (CA-201377), including all CM related codes table updates. The DDCR will allow the C-IV General Assistance (Managed) program to be issued as EBT, Warrant, and Direct Deposit.
7. All batch scheduling will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.

8. The Approved Relative Caretaker (ARC) program in C-IV will not be migrated to CalSAWS. All ARC programs from C-IV will be converted in as Foster Care programs with ARC aid codes.
9. The same C-IV security rights, roles, and groups for the Issuance Method Detail page already exists in CalSAWS.
10. CA-212363 will be adding Direct Deposit interface for the CalWIN Counties in a separate release.

2 RECOMMENDATIONS

2.1 Issuance Method Detail

2.1.1 Overview

The Direct Deposit functionality will be added back to CalSAWS along with the associated Direct Deposit data collection under Issuance Method Detail page to collect the Customer's Bank Account information for the 57 Migration Counties.

2.1.2 Issuance Method Detail Mockup

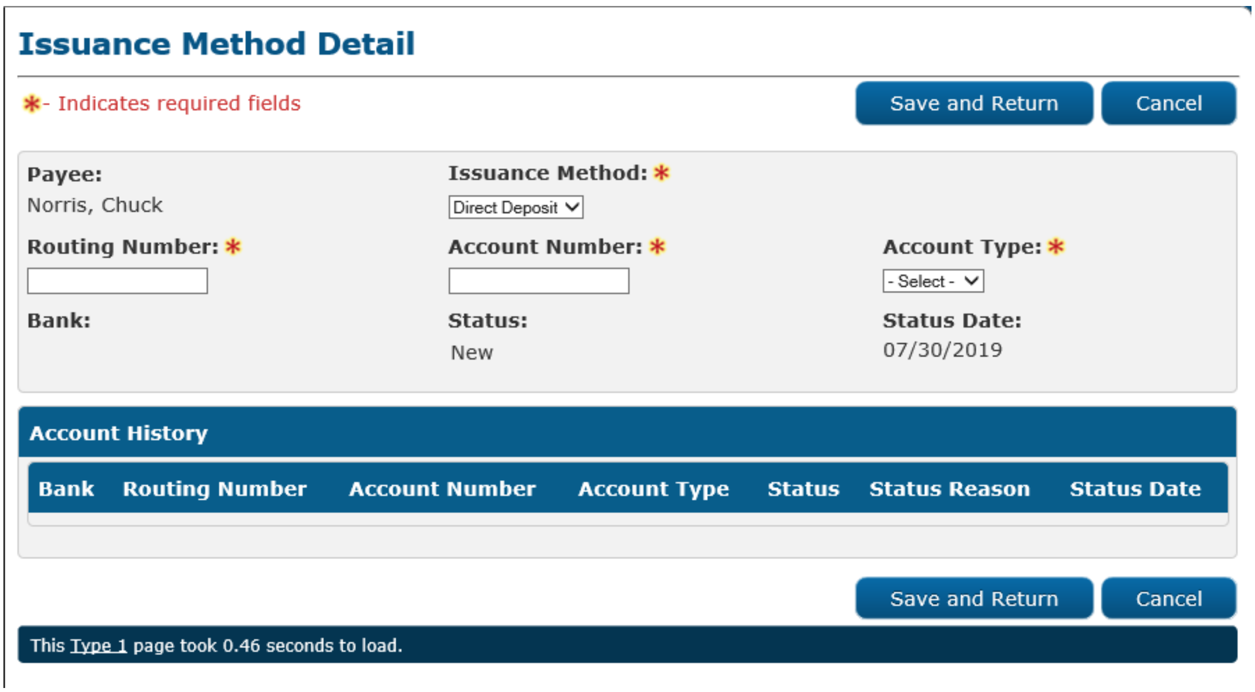
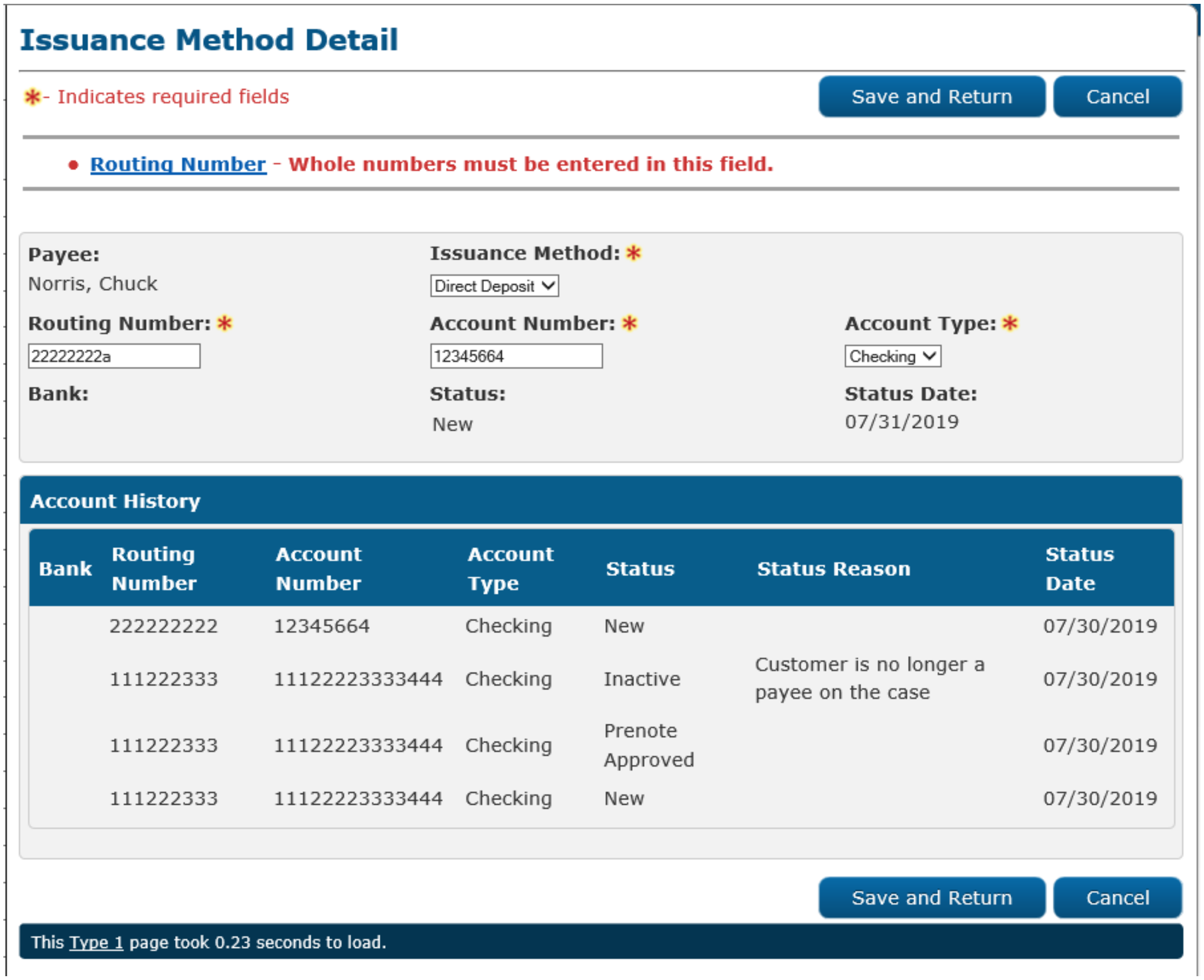


Figure 2.1.1 – Issuance Method Detail in Create Mode



Issuance Method Detail

*- Indicates required fields

Save and Return | Cancel

- Routing Number - Whole numbers must be entered in this field.

Payee: Norris, Chuck

Issuance Method: * Direct Deposit

Routing Number: * 22222222a

Account Number: * 12345664

Account Type: * Checking

Bank:

Status: New

Status Date: 07/31/2019

Account History

Bank	Routing Number	Account Number	Account Type	Status	Status Reason	Status Date
	222222222	12345664	Checking	New		07/30/2019
	111222333	11122223333444	Checking	Inactive	Customer is no longer a payee on the case	07/30/2019
	111222333	11122223333444	Checking	Prenote Approved		07/30/2019
	111222333	11122223333444	Checking	New		07/30/2019

Save and Return | Cancel

This Type 1 page took 0.23 seconds to load.

Figure 2.1.2 – Issuance Method Detail Routing Number Validation

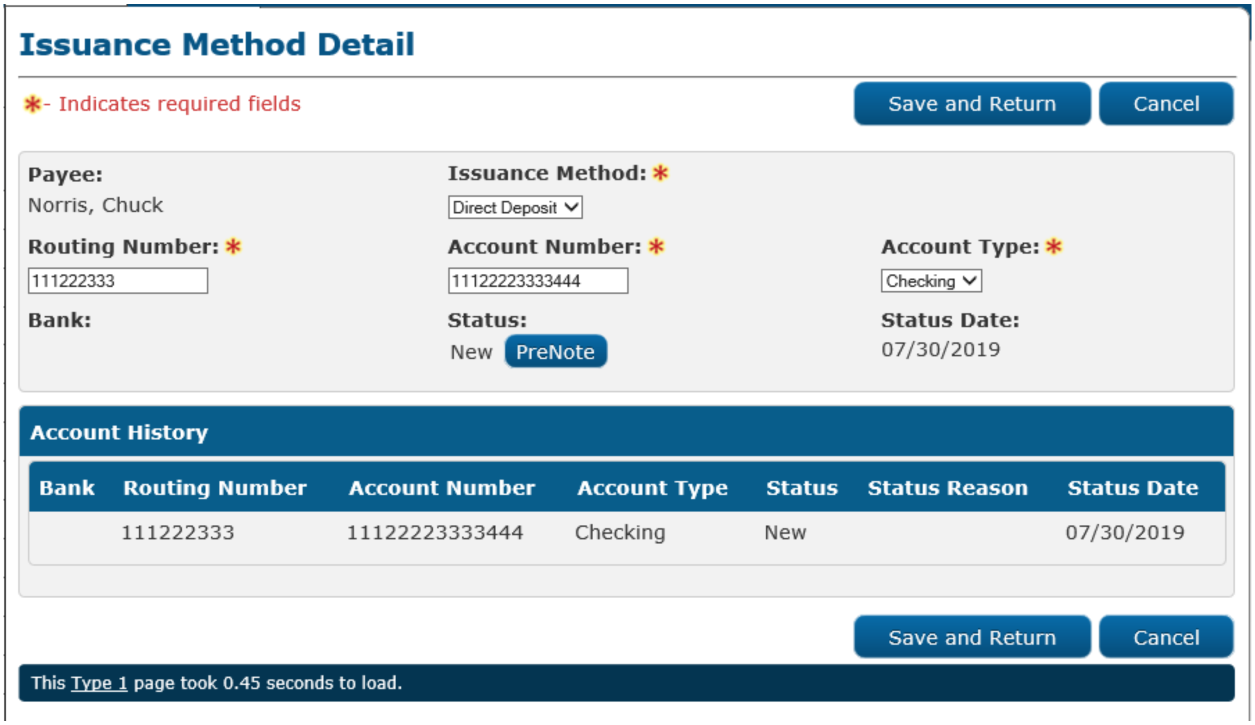


Figure 2.1.3 – Issuance Method Detail Edit Mode at New Status

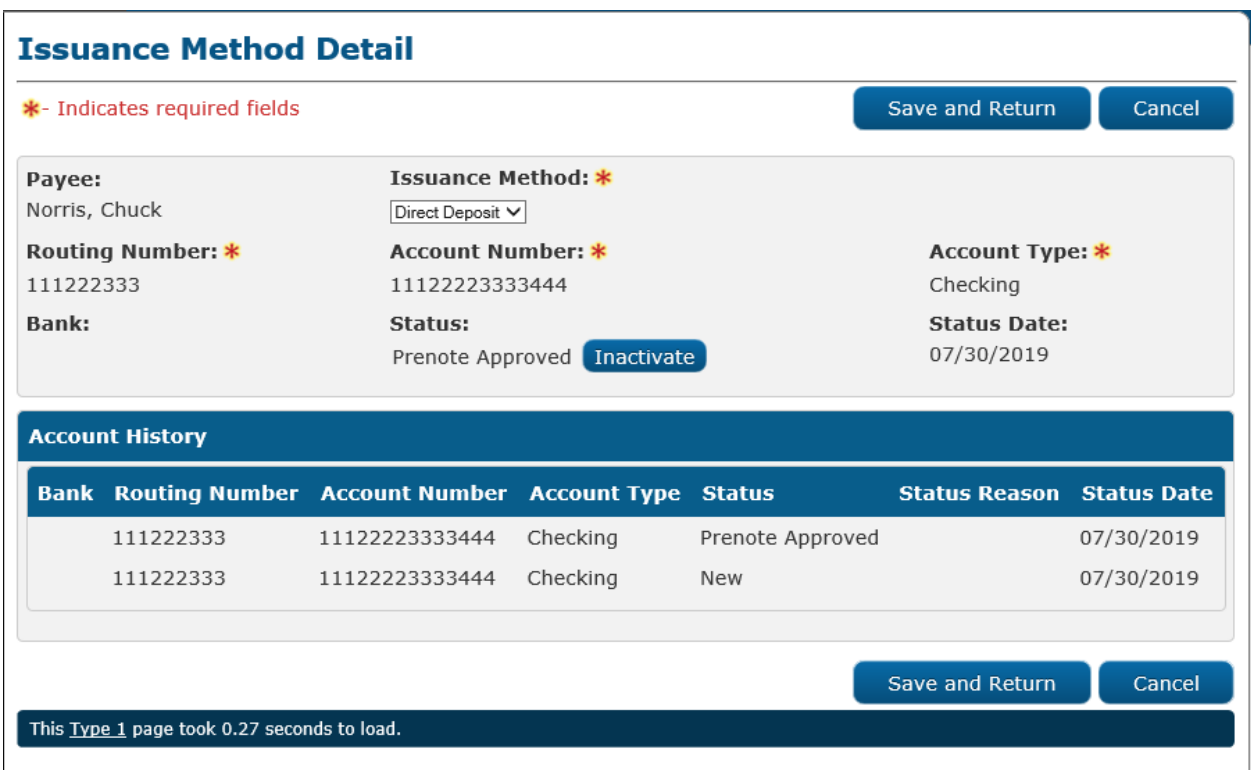


Figure 2.1.4 – Issuance Method Detail Edit Mode at Prenote Approved Status

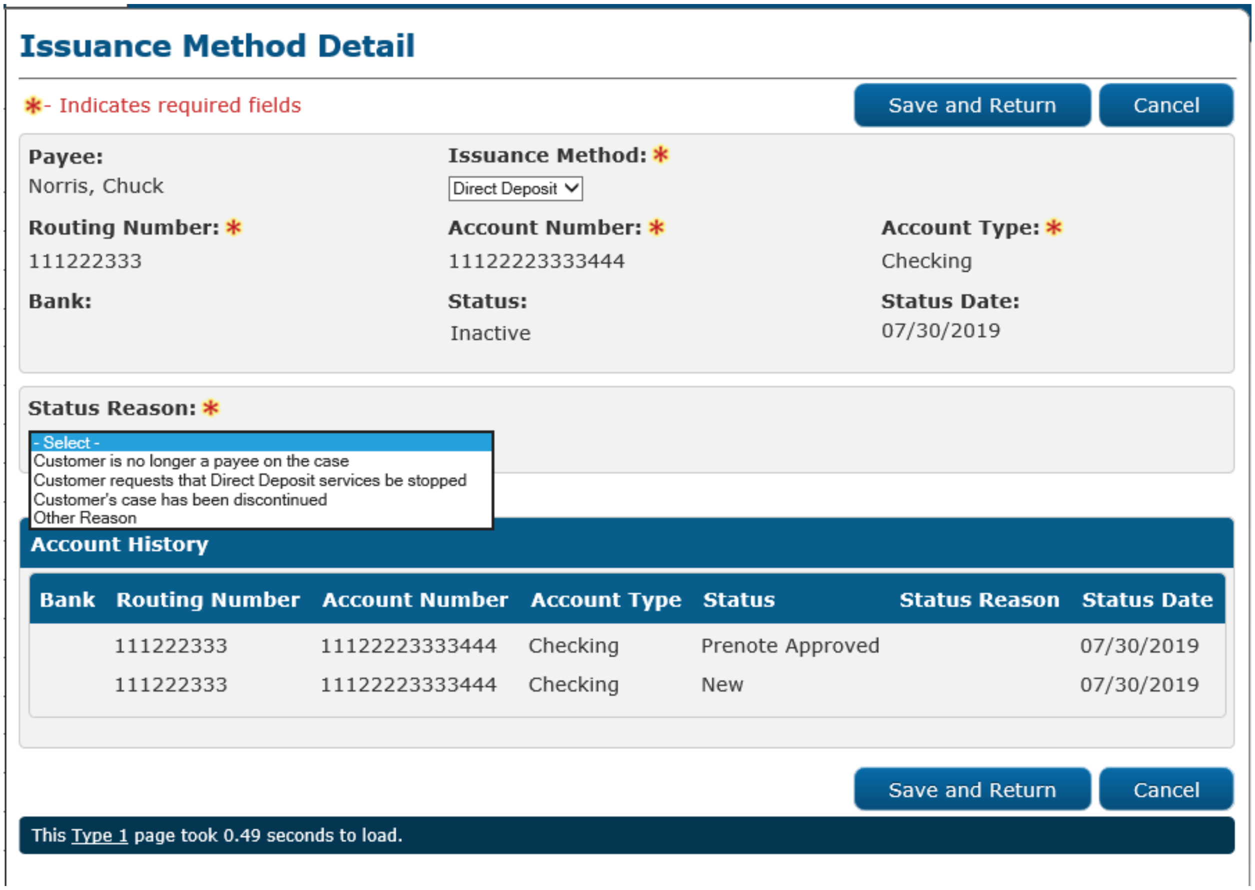


Figure 2.1.5 – Issuance Method Detail Edit Mode at Inactive Status Before Save

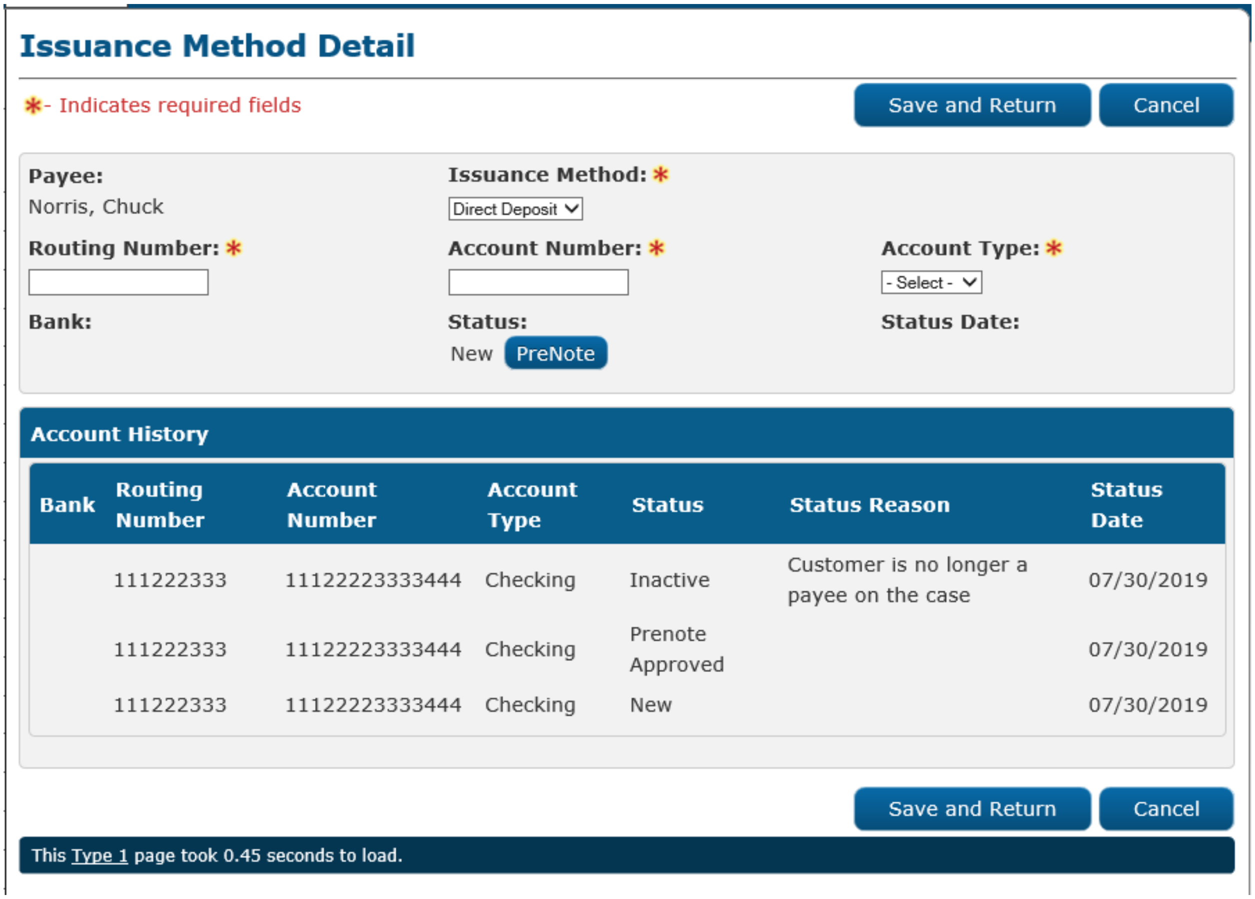


Figure 2.1.6 – Issuance Method Detail Edit Mode at Inactive Status

2.1.3 Description of Changes

1. Update the Issuance Method Detail page for the 57 Migration Counties when in Create mode. The page will dynamically load separate data collection fields for the 57 Migration Counties when "Direct Deposit" is selected from the "Issuance Method" dropdown field on the Issuance Method Detail page (See Figure 2.1.1). The page will contain the following fields, sections, and buttons:
   a. Buttons
      i. Save and Return – Clicking this button will save the current fields and navigate back to the Program Detail page.
      ii. Cancel – Clicking this button will discard all entered data and navigate back to the Issuance Method Detail page in View mode.
   b. Fields
      i. Payee – This will be a non-editable pre-populated value and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The value will be the current Payee on the Program. If the Payee is a person, the name format will be: <Last

Name>, <First Name>. If the Payee is an Organization, the name format will be the full organization's name.

ii. Issuance Method – This will be a mandatory dropdown field. The dropdown values will be populated based on the Program and the Issuance Type category (CT 112).

iii. Routing Number – This will be a mandatory number text field and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The text field will allow a max of 9 characters. A page validation of "Routing Number – Whole numbers must be entered in this field." will be thrown if a non-numeric value is entered and the "Save and Return" button is clicked (See Figure 2.1.2).

iv. Account Number – This will be a mandatory text field and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The text field will allow a max of 17 characters.

v. Account Type – This will be a mandatory dropdown field and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The dropdown values will be based on the values from the Account Type Codes category (CT 419).
   1. Checking
   2. Savings

vi. Bank – This will be a non-editable text value and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. Once a valid Routing Number is entered a dynamic bank lookup will be performed on the Bank Routing Information repository in CalSAWS (BANK_ROUTING_INFO) when the focus is moved off the field. If a bank match is found based on the Routing Number, that bank name will be pre-populated on the Bank field and will be non-editable. If there is no bank match, the Bank field will be blank (null).

vii. Status – This will be a non-editable text value and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The initial value for any new Direct Deposit account will be "New".

   Note: Refer to Appendix 1 for the Direct Deposit Status State Diagram.

viii. Status Date – This will be a non-editable date value and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The date will default to the System Date to act as the pre-notification submit timestamp.

c. Section

i. Account History – This section will contain the change history of the Direct Deposit account and will only be visible for the 57 Migration Counties if "Direct Deposit" is selected under the Issuance Method field. The section will contain the following columns and will show a new record each time there is a change to any of the columns below order by the Status Date in descending order (newer status first):
    1. Bank
    2. Routing Number
    3. Account Number
    4. Account Type
    5. Status
    6. Status Reason
    7. Status Date

2. Update the Issuance Method Detail page for the 57 Migration Counties when in Edit mode and the Direct Deposit is in New Status. The same fields, sections, and editable fields will be available as when the page is in Create mode (recommendation 2.1.3.1). Users with the "IssuanceMethodDetailOverride" security right will see a "PreNote" button next to the "New" Status (See Figure 2.1.3). Clicking the "PreNote" button will update the Direct Deposit Status to "Prenote Approved".

   Note: Users must click on "Save and Return" to save the "Prenote Approved" Status.
3. Update the Issuance Method Detail page for the 57 Migration Counties when in Edit mode and the Direct Deposit is in Prenote Approved Status. The same fields and sections will be available as when the page is in Create mode except all but the "Issuance Method" dropdown field will be non-editable. Users with the "IssuanceMethodDetailEdit" security right will see an "Inactive" button next to the "Prenote Approved" Status (See Figure 2.1.4). Clicking the "Inactivate" button will update the Direct Deposit Status to "Inactive". A new "Status Reason" required dropdown field will dynamically appear (See Figure 2.1.5). The "Status Reason" dropdown field will be populated by the Issuance Status Reason category (CT 338) where the Close Account indicator is 'Y'.
   a. Customer is no longer payee on the case
   b. Customer requests that Direct Deposit services be stopped
   c. Customer's case has been discontinued
   d. Other Reason

   Note: Users must click on "Save and Return" to save the "Inactive" Status and selected Status Reason.
4. Update the Issuance Method Detail page for the 57 Migration Counties when in Edit mode and the Direct Deposit is in Inactive Status. The same fields, sections, and editable fields will be available as when

the page is in Create mode (recommendation 2.1.3.1), however the currently displayed Status will be "New" (See Figure 2.1.6).

2.1.4 Page Location

Global: Case Info/Eligibility

Local: Case Summary

Task: Case Summary

2.1.5 Security Updates

N/A – The security rights, roles and groups mentioned are already part of the existing roles and groups in CalSAWS. No new security updates are required.

2.1.6 Page Mapping

Update the page mappings on the Issuance Method Detail page with the new Direct Deposit related fields.

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Bank Routing Information Data Change

2.2.1 Overview

Update the Bank Routing Information in CalSAWS with the latest E-Payments Routing Direction information from the Federal Reserve website.

2.2.2 Description of Change

1. Perform a one-time update of the Bank Routing Information in CalSAWS using the latest E-Payments Routing Direction information from the Federal Reserve website (https://www.frbservices.org/resources/routing-number-directory/faqs.html).

   Note: A copy of the Bank Routing Information as of October 2019 is attached to Jira.

2.2.3 Estimated Number of Records Impacted/Performance

18,056 records

2.3 Direct Deposit Interface

2.3.1 Overview

The latest Direct Deposit batch modules from the C-IV code repository will be migrated into CalSAWS.

2.3.2 Description of Change

1. Migrate the Direct Deposit batch job properties for the C-IV Migration counties to CalSAWS. This includes the Writer, FTP, and Reader jobs (if applicable).
2. Migrate the latest Direct Deposit XML interface definitions from the C-IV code repository to CalSAWS.
3. Migrate the latest Direct Deposit batch modules from the C-IV code repository to CalSAWS.

   Technical Note: There may be some "code uplifting" changes necessary to get the modules to work in CalSAWS.

2.3.3 Execution Frequency

N/A – The execution frequency will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.

2.3.4 Key Scheduling Dependencies

N/A – All scheduling dependencies will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605.

2.3.5 Counties Impacted

C-IV Counties: All Counites

CalWIN Counties: TBD with CA-212363

Los Angeles County: No

2.3.6 Data Volume/Performance

Average Monthly Direct Deposit Main Payroll Issuances for 2018 based on all C-IV Counties (Los Angeles and CalWIN data not available): 21,994 records

2.3.7 Interface Partner

Individual County IT Departments

2.3.8 Failure Procedure/Operational Instructions

N/A – All procedural/operational instructions will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605

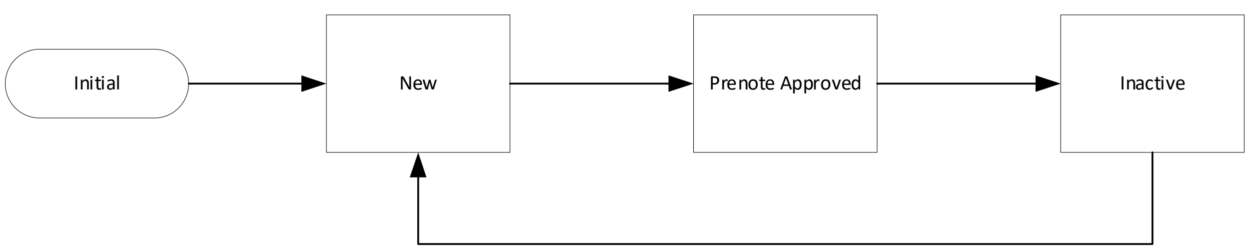
3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1360	**Original:** The CONTRACTOR shall migrate the existing C-IV Direct Deposit functionality on the Issuance Method Detail page for the 58 Counties. **Revised:** The CONTRACTOR shall migrate the existing C-IV Direct Deposit functionality on the Issuance Method Detail page for the 57 Counties.	It is assumed that CALWIN uses the same Direct Deposit Functionality as C-IV. The existing direct deposit functionality that resides in C-IV has been removed from LRS and will need to be added back into LRS. There will be two versions of the Issuance Method Detail page - one for LRS and one for the remaining 57 counties. The C-IV batch jobs for the DD Functionality would have to be migrated along with creating new jobs for the CALWIN counties.	1. A new Issuance Method page for Direct Deposit functionality has been created for the 57 Migration Counties to capture the Customer Banking Account information. 2. All direct deposit batch modules have been migrated into CalSAWS. 3. All direct deposit batch properties for the C-IV migration counties have been migrated/replicated in CalSAWS.

4 APPENDIX

1. Direct Deposit Status State Diagram



CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207348 | DDID 1327

Migrate Valuable Categories from the C-IV Migration Counties into CalSAWS

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Duke Vang
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/1/2019	1.0	Initial Revision	Duke Vang
12/26/2019	1.1	Updated with Valuable Category spreadsheet for the C-IV migration counties	Duke Vang
1/7/2020	1.2	Updates with comments from QA	Duke Vang
1/27/2020	1.3	Updates with comments from Consortia DEL review	Duke Vang

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1 OVERVIEW

This design document describes the changes to CalSAWS to migrate the existing Valuable Categories from the C-IV Migration Counties into CalSAWS.

1.1 Current Design

Valuables are non-monetary Supportive Services issued to Customers. Valuables fall into Valuable Categories and Valuable Types. Valuable Categories are maintained by the CalSAWS Project whereas Valuable Types are maintained by the counties. The following Valuable Categories are available for Los Angeles County in CalSAWS:

- Bus Pass – No Valid Month
- Bus Pass – Valid Month
- Bus Ticket
- Bus Token
- Campus Parking
- EBT Card
- Gas Card
- Gift Certificate
- Imprest Cash
- Personal Care Kit
- Voucher
- Warrant

1.2 Requests

Per Design Differenced ID (DDID) 1327, all applicable Valuable Categories for the 57 Migration Counties will be migrated into CalSAWS.

This design will be migrating the C-IV Migration County Valuable Categories into CalSAWS. A separate effort will be migrating the CalWIN Migration County Valuable Categories into CalSAWS.

1.3 Overview of Recommendations

1. The existing Valuable Categories from the C-IV System will be migrated into CalSAWS for the C-IV Migration Counties.

1.4 Assumptions

1. All CalWIN Migration County Valuable Categories will be migrated with CA-212486.
2. All existing C-IV Migration County Valuable Types will be migrated into CalSAWS with the conversion effort.

3. Historical Valuable Category (CT 414) entries for the C-IV Migration Counties will not be migrated into CalSAWS (i.e. Codes Table entries where END_DATE != 12/31/9999).
4. The "Issue As Cash" functionality on the Valuable Type Detail page will not be impacted. Existing Valuable Types with the option to "Issue As Cash" will not be impacted by the migration of Valuable Categories from the 57 Migration Counties.

2 RECOMMENDATIONS

2.1 Valuable Category

2.1.1 Overview

The applicable Valuable Categories will be migrated for the C-IV Migration Counties.

2.1.2 Description of Changes

1. Migrate all the current C-IV County Valuable Categories from the C-IV Valuable Category codes table (CT 414) to CalSAWS. Refer to Supporting Documentation 1: C-IV Valuable Category.xls, C-IV Valuable Category tab for details.

   Note: The C-IV Valuable Category.xls supporting documentation contains an extra tab to showcase the differences between C-IV and CalSAWS' CT 414 to assist the development team on what updates are needed in CalSAWS.

2.1.3 Page Location

N/A

2.1.4 Security Updates

N/A

2.1.5 Page Mapping

N/A

2.1.6 Page Usage/Data Volume Impacts

N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Valuables	C-IV County Valuable Categories	C-IV Valuable Category.xls

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1327	The CONTRACTOR shall migrate the existing C-IV County specific Valuable Categories into the "Valuable Category" dropdown field on the Valuable Search page. The Valuable Category field shall only display those Valuables that apply to each CONSORTIUM County.	N/A	1. All existing C-IV Valuable Category have been migrated into CalSAWS.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207357 | DDID 1270

Form Updates to Customer Activity Detail

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Jamie Ng, Vallari Bathala
	Reviewed By	Lawrence Samy, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
5/7/2019	1.0	Original Draft	Jamie Ng
12/04/2019	1.1	Updated sections 1, 1.1, 1.2, 1.3, 2, 2.1, 2.1.1, 2.1.2, 3, 3.1 and removed mockups.	Vallari Bathala
01/13/2020	1.2	Updated section 2.1.2 following comments from QA Business Analyst: 1. Removed dublicate GN_6137_B Generate GN6137B Form 2. Switched "Function" and "Button Name" titles to match values	Vallari Bathala
1/28/2020	1.3	Added from GN 6006 to Section 2.1.2	Amy Gill

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1 OVERVIEW

The Customer Activity Detail page displays Los Angeles County specific buttons. Update the Customer Activity Detail page to only display the Los Angeles County-specific form buttons for Los Angeles County and not display those buttons for the remaining 57 counties.

1.1 Current Design

All buttons displayed on the Customer Activity Detail page will display for 58 counties regardless if the button is only relevant to Los Angeles County.

1.2 Requests

Per DDID 1270, the CONTRACTOR shall update the Customer Activity Detail page to not display all the LA specific "Generate Form" buttons per selected activity for the 57 Counties.

1.3 Overview of Recommendations

Update Customer Activity Detail page to not display all the LA-specific form buttons for the 57 counties.

1.4 Assumption

1. The generate form buttons for forms CW61 and CL2 will remain visible for all counties, as these are State forms and are not specific to Los Angeles County.

2 RECOMMENDATIONS

2.1 Customer Activity Detail Page

2.1.1 Overview

Only display the Los Angeles County-specific "Generate Form" buttons for Los Angeles County and not for the remaining 57 Counties.

2.1.2 Description of Change

1. Update the Customer Activity Detail page to only display the following LA-specific buttons for Los Angeles County:

Function	Button Name
ABP_1461_A	Appointment Exemption Form
ABP_1461	Appointment Form
ABP_1461_R	Appointment Reschedule Form
ABP_1463	Assignment Form
ABP_1466	Referral Form
ABP_1463_DVS	Assignment Form
ABP_1467_DVS	Referral Form
ABP_1467_MHS	Referral Form
ABP_1468	Referral Form
ABP_1464_WSC	Verification Form
ABP_1464_WIA	Verification Form
ABP_1464_WSCY	Generate ABP1464 WSC YTH
ABP_1460	Appointment Form
ABP_1464	Verification Form
GN_6137	Generate GN6137 Form
GN_6006_A	Generate GN6006A Form
GN_6006_B	Generate GN6006B Form
GN_6006_D	Generate GN6006D Form
GN_6004	Generate GN 6004
GN_6005A	Generate GN 6005A
GN_6130	Generate GN6130 Form
GN_6006_C	Generate GN6006C Form
GN_6137_A	Generate GN6137A Form
GN_6137_B	Generate GN6137B Form
GN_6129	Generate GN6129 Form

Function	Button Name
GN_6334	Generate GN 6334 Form
GN_6006_W	Generate GN6006W Form
GN_6006	Generate GN 6006 Form

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1270	**Original**: The CONTRACTOR shall update the Customer Activity Detail page as follows: 1) Do not display all the LA specific "Generate Form" buttons per selected activity for the 57 Counties 2) Migrate the "Generate Form" button that generates the Plan 109 (Referral to Activity) for the 57 Counties **Revised**: The CONTRACTOR shall update the Customer Activity Detail page to not display all the LA specific "Generate Form" buttons per selected activity for the 57 Counties.	N/A	Update Customer Activity Detail page to not display all the LA-specific form buttons for the 57 counties. The PLAN 109 form will be re-named for CalSAWS and added as part of the Non-State Forms Functional Design Session requirements.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207368 | DDID 1198

Update Generate Form Button on Verification List Page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Rainier Dela Cruz
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/20/2019	1.0	Initial Revision	Rainier Dela Cruz
01/28/2020	2.0	Updated sections 1.1, 2.1.1, 2.1.2, 2.2.4 per ClearBest	Linda Zeng

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1 OVERVIEW

1.1 Current Design

The Verification List page displays the verifications associated to the case and allows the user to view or edit those verifications. It also allows the user to add new verifications. In C-IV, when the user clicks on the 'Generate Form' button on the Verification List page, the Document Parameters page opens in a new window. The user is able to generate either the C-IV VER 100 or the CW 2200 form based on their selection. In CalSAWS, when the user clicks the 'Generate Form' button on the page, the Document Parameters page opens in a new window, however, the user can only generate the CW 2200 form.

1.2 Requests

The system change request will add the new CSF 103 – Verification Request List form (based on the C-IV VER 100 form) to CalSAWS. It will add a new Document Parameters page that will open in a separate window when the 'Generate Form' button is clicked that will give the user the option to generate either the CW 2200 or the CSF 103 form.

1.3 Overview of Recommendations

1. Add the new CSF 103 form that will generate from the Verification List page and will be available from the Template Repository.
2. Add a new Document Parameters page (based on the CalSAWS standard document parameters page) that opens in a separate window when the 'Generate Form' button is clicked on the Verification List page to give the user the option to generate either the CW 2200 or the CSF 103 form.

1.4 Assumptions

1. The implementation of the CSF 103 in the threshold languages will be done with CA-212107 - Add CSF 103 form in threshold languages.

2 RECOMMENDATIONS

2.1 CSF 103 – Verification Request List

2.1.1 Overview

The CSF 103 is a notice sent to recipients to notify them that additional verifications are necessary to maintain eligibility. The CSF 103 form is currently not available in CalSAWS. This section will describe the necessary updates to add the form to the system.

Form: CSF 103
Program: All programs
Forms Category: Forms
Languages: English, Spanish

2.1.2 Description of Change

1. Add the CSF 103 Form

Add a CSF 103 form in CalSAWS that generates from the Verification List page. It will also be available in the Template Repository. The form will use the CalSAWS standard header.

Form Title: Verification Request List
Form Number: CSF 103
Include NA Back 9: No
Imaging Barcode: Yes
Form Mockups: Please refer to **Section 3.0 – Supporting Document #1 - #4**.

2. Add the generation logic for the CSF 103 Form

Update the CalSAWS functionality to give the user the ability to generate the CSF 103 from the Verification List page. For more details, please refer to **Section 2.2 – Verification List Page**.

3. Add the population logic for the CSF 103 Form

The form will be populated as follows:

Header:

Section	Field	Description
CSF 103 – Page 1	**County Name**	This field will be populated with the county of the logged in worker.

Section	Field	Description
CSF 103 – Page 1	**County Address**	This field will be populated with the office address of the worker assigned to the program. If the program does not have a worker, it will use the office address of the worker who generated the form.
CSF 103 – Page 1	**Office Phone Number**	This field will be populated with office phone number of the worker assigned to the program. If the program does not have a worker, it will use the office phone number of the worker who generated the form. The phone number will have the following format: (###) ###-####
CSF 103 – Page 1	**Worker Name**	This field will be populated with the name of the worker assigned to the program. If the program does not have a worker, it will use the name of the worker who generated the form.
CSF 103 – Page 1	**Worker ID**	This field will be populated with the Id of the worker assigned to the program. If the program does not have a worker, it will use the Id of the worker who generated the form.
CSF 103 – Page 1	**Worker Phone Number**	This field will be populated with phone number of the worker assigned to the program. If the program does not have a worker, it will use the phone number of the worker who generated the form. The phone number will have the following format: (###) ###-####
CSF 103 – Page 1	**Case Name**	This field will be populated with the case name of the current case.
CSF 103 – Page 1	**Case Number**	This field will be populated with the case number of the current case.

Section	Field	Description
CSF 103 – Page 1	**Recipient/Organization's Mailing Address**	This field will be populated with the mailing address of the person selected on the Document Parameters page. If the program is Foster Care, it will be populated with the mailing address of the placement selected on the Document Parameter's page.

Business Reply Mail:

Update the Business Reply Mail (BRM) address location on Page 2 to the CalSAWS prepaid envelope location. BRM address fields and location will be updated when BRM is implemented in CalSAWS.

Verification Request List:

If the form is generated from the Verification List page, the third page will contain a repeatable dynamic section with the fields below. This section will repeat for each verification the worker has selected on the Verification List page (please see **Section 3.0 – Supporting Document #1 and #2** for an example).

If the form is generated from the Template Repository, this section will be repeated 10 times to accommodate up to 10 user inputted verifications (please see **Section 3.0 – Supporting Document #3 and #4** for an example). The fields will be blank, but editable.

If the form is generated in Spanish from the Verification List page, the type of verification will be translated to Spanish. For translations, please refer to **CA-207451 DDID 452 Update CW 2200 – Request for Verification**.

Section	Field	Description
CSF 103 – Page 3	**Type of Verification**	This field will be populated with the type of the verification. The type can be found on the Verification Detail page. The field is read only.
CSF 103 – Page 3	**For Person**	This field will be populated with the name of the person the verification was created for. The name of the person can be found on the Verification Detail page. The field is read only.
CSF 103 – Page 3	**Due Date**	This field will be populated with the due date of the verification was created for. The due date can be

Section	Field	Description
		found on the Verification Detail page. The field is read only.
CSF 103 – Page 3	**Description**	This field will be populated with the description of the verification. The description can be found on the Verification Detail page. The field is read only when it is prepopulated, otherwise, it is editable.

4. Add Form Print Options for the CSF 103 Form

The following print options will be included for the CSF 103 form:

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

2.2 Verification List Page

2.2.1 Overview

Currently in CalSAWS, when the user clicks on the ‘Generate Form’ button on the Verification List page, the Document Parameters page opens in a new window, but the user can only generate the CW 2000 form. A new Document Parameters page will be added to replace the existing one to give the user the option to generate either the CSF 103 or the CW 2200 form.

2.2.2 Document Parameters Mockup

Figure 2.2.2.1 – Document Parameters

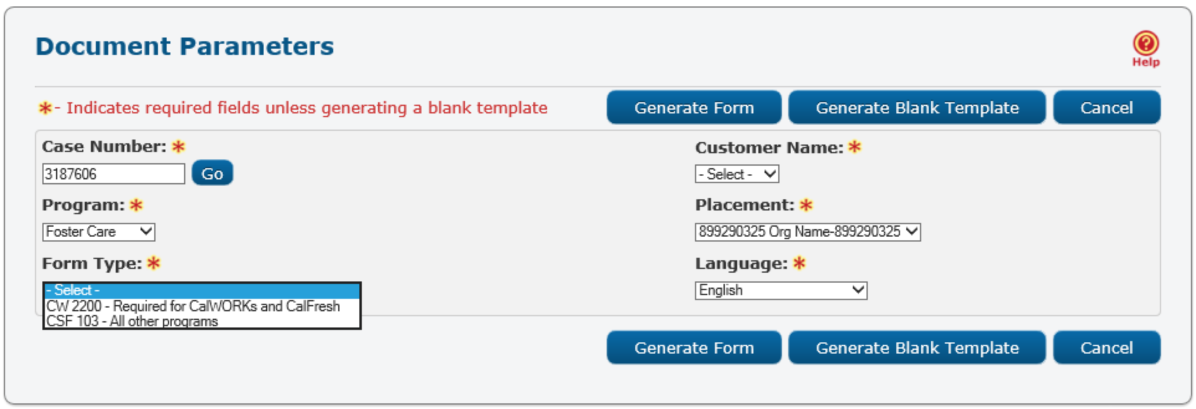

Figure 2.2.2.2 – Document Parameters when the program is Foster Care

2.2.3 Description of Changes

Add a new Document Parameters page that will open in a separate window when the 'Generate Form' button is clicked on the Verification List page. The Document Parameters page will have the following fields:

1. **Case Number**: This field will contain the number of the current case.
2. **Program**: This dropdown will contain all the programs the form can generate for.
3. **Customer Name:** This dropdown will contain all the persons on the case.
4. **Placement:** This dropdown will only be visible when the program selected is Foster Care. It will contain all the child placements for the case.
5. **Language:** This dropdown will contain the languages the form is available in. It will be defaulted to English. When the person is selected in the Customer Name dropdown, the language will default to the person's language, if available. If not, it will be set to English.

6. **Form Type:** This dropdown will contain the CW 2200 and the CSF 103 forms.

2.2.4 Page Location

Global: Eligibility

Local: Customer Information

Task: Verifications

2.2.5 Security Updates

No changes.

2.2.6 Page Mapping

No changes.

2.2.7 Page Usage/Data Volume Impacts

No changes.

3 SUPPORTING DOCUMENTS

Note: The examples below show how the C-IV VER 100 currently generates in the C-IV system. The examples give a reference on how the verification request list section should look after generation. When the functionality is migrated to CalSAWS, the C-IV VER 100 (CSF 103) will generate with the CalSAWS standard header and follow the placement of the recipient's address. It will also follow the CalSAWS prepaid envelope location.

Number	Functional Area	Description	Attachment
1	Client Correspondence	English CSF 103 generated from the Verification List page	CSF 103 EN Verification List Page.pdf
2	Client Correspondence	Spanish CSF 103 generated from the Verification List page	CSF 103 SP Verification List Page.pdf
3	Client Correspondence	English CSF 103 generated from the Template Repository	CSF 103 EN Template Repository.pdf
4	Client Correspondence	Spanish CSF 103 generated from the Template Repository	CSF 103 SP Template Repository.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1198	**Original:** The Contractor shall update the "Generate Form" button functionality on the Verification List page to give the user the option of generating the CW 2200 or the VER 100 form. **Revised:** The Contractor shall update the "Generate Form" button functionality on the Verification List page to give the user the option of generating the CW 2200 or the CSF 103 form.	N/A	The functionality to generate the CSF 103 (formerly called the VER 100) from the Verification List page is added.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207384 | DDID 1062 | DDID 1063 | DDID 1066 | DDID 1172 | DDID 1240

Add CMSP Notices of Action

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Rainier Dela Cruz
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/28/2019	1.0	Initial Revision	Rainier Dela Cruz
1/28/2020	1.1	Update section 2.3.3 regarding default CMSP regulations	Lawrence Samy
2/5/2020	1.2	Added Assumption #4	Amy Gill

Table of Contents

1 OVERVIEW

The County Medical Services Program (CMSP) provides health care coverage for uninsured low-income, indigent adults that are not otherwise eligible for other publicly funded health care programs. A CMSP Notice of Action (NOA) is sent out to inform the recipient when an action (approval, denial, or discontinuance) has occurred on their case.

1.1 Current Design

The functionality to dynamically generate CMSP NOAs after running EDBC is not in CalSAWS.

1.2 Requests

Update the CalSAWS functionality to dynamically generate CMSP NOAs after running EDBC.

1.3 Overview of Recommendations

1. Migrate the CMSP NOA template and fragments over to CalSAWS. The templates will be updated to follow the current CalSAWS address placement on the NOAs.
2. The CalSAWS functionality will be updated to add generation and population logic for the CMSP NOA template and fragments.
3. The CalSAWS functionality will be updated to allow the CMSP NOAs to generate in the following threshold languages: Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese.
   **One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

1.4 Assumptions

1. Any CMSP fragments related to Path2Health will not be migrated over.
2. Any CMSP fragments related to the LIHP conversion will not be migrated over.
3. Any CMSP fragments related to the discontinuance of individuals on aid code 85, 88, and 89 because of ACA requirements will not be migrated over. Individuals on those aid codes were discontinued for the January 2014 benefit month and the discontinuance NOA informed the individuals to reapply for benefits through Covered California.
4. Updated regulation references for CMSP NOAs will be handled in a separate SCR in a later release: CA-213083.

2 RECOMMENDATIONS

2.1 Add CMSP Template

2.1.1 Overview

This section will describe the updates needed to add the CMSP NOA template to CalSAWS. It will add the template fragment XDP. An XDP stands for XML Data Package and it is the source file for the fragment. It will also add the generation and population logic for the template.

Program(s): CMSP

Include CMSP Legal Section: Yes

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.1.2 Description of Change

Add the CMSP NOA Template to CalSAWS. The template will generate for all action types (approval, denial, discontinuance, etc.).

NOA Mockups/Examples: Please refer to **Section 3 Supporting Document – Document #1 to #6**.

Template Layout:

2.1.2.1 Main Page (Page1)

The first page of the template will contain the standard CalSAWS header. The State Hearing information will be under the header. There will be a main section where the action, reason, and/or message fragments will be placed. There will be a dynamic NOA title that populates based on whether the benefit month the EDBC is running is a retroactive month. The footer will also be populated based on whether the benefit month the EDBC is running is a retroactive month or not. It will also contain the page number and total number of pages. The regulations section will be above the footer, but below the main section and will be populated with the CMSP regulations (please refer to **Section 2.3 – Add CMSP Regulations Fragment** for more details on the fragment).

COUNTY OF {CountyName}

{OfficeAddress}

NOTICE DATE:	{NoticeDate}
CASE NAME:	{CaseName}
CASE NUMBER:	{CaseNumber}
WORKER NAME:	{WorkerName}
WORKER ID:	{WorkerId}
TELEPHONE NUMBER:	{TelephoneNumber}
CUSTOMER ID:	{CustomerId}

COUNTY MEDICAL SERVICES PROGRAM
NOTICE OF ACTION
{NoaTitle}

{RecipientAddress}

Questions ? Ask your Worker

State Hearing: If you think this action is wrong, you can ask for a hearing. The back page tells you how. Your benefits may not be changed if you ask for a hearing before this action takes place.

The authority that requires this action is in CMSP All County Letter No. {CmspRetroRegulation}and/or CMSP Eligibility Manual sections: {Regulations}

{Footer} Page # of ##

2.1.2.2 CMSP Legal Section (Page 2)

On the back of the first page, also known as the second page, the CMSP Legal Section will generate (please refer to **Section 2.2 – Add CMSP Legal Section Fragment** for more details on the fragment). The page number and total number of pages will generate at the bottom of the page.

YOUR ELIGIBILITY HEARING RIGHTS

If you are dissatisfied with an action taken, or not taken, by the county Department of Social Services that resulted in the denial, reduction or discontinuance of your eligibility, and you wish to have an **eligibility hearing,** you must request one within thirty (30) calendar days of the date the Notice of Action (NOA) was mailed to you. If you do not receive a Notice of Action, you must request the hearing within thirty (30) calendar days of the date that you became aware of the action about which you are dissatisfied.

TO KEEP YOUR SAME BENEFITS WHILE YOU ARE WAITING FOR YOUR ELIGIBILITY HEARING

You must ask for a hearing before the action takes place. Your County Medical Services Program (CMSP) benefits will stay the same until the hearing process is completed or until your certification period ends, whichever occurs first. Under no circumstances will aid extend beyond the existing certification period.

TO GET HELP

You may get free legal aid at your local legal aid office or welfare rights group.
{LegalAidAddress}

HOW TO ASK FOR FOR AN ELIGIBILITY HEARING

The way to ask for a hearing is to fill out this page. Make a copy of the front and back for your records. Then, send or take this page to:
{HearingsAddress}

HEARING REQUEST

I want a hearing because of an action by the Welfare Department of {CountyName} County about my County Medical Services Program (CMSP) eligibility. Here's why:

☐ Check here and add a page if you need more space.

☐ I want the person named below to represent me at this hearing. I give my permission for this person to see my records or come to this hearing for me.

Name:

Address:

Phone Number:

☐ I need a free interpreter. My language or dialect is:

My Name: Phone:

Address:

Case Number:

My Signature: Date:

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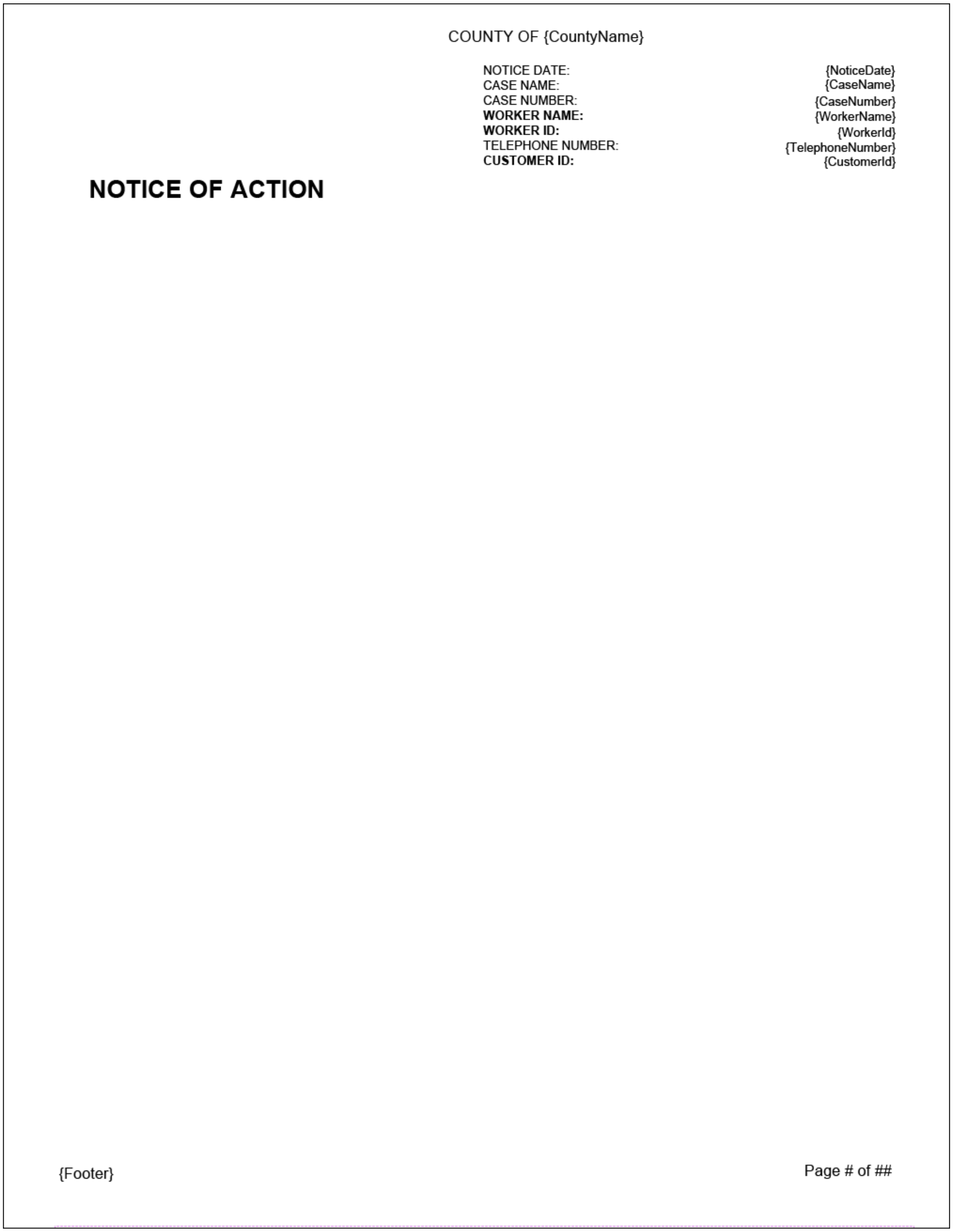
2.1.2.3 Overflow Pages (Page 3 and ongoing)

The third page and all the pages following the third page will be the continuation pages. Similar to the first page, there will be a main section where the action, reason, and/or message fragments will be placed. The pages will generate with the header and footer.



COUNTY OF {CountyName}

NOTICE DATE:	{NoticeDate}
CASE NAME:	{CaseName}
CASE NUMBER:	{CaseNumber}
WORKER NAME:	{WorkerName}
WORKER ID:	{WorkerId}
TELEPHONE NUMBER:	{TelephoneNumber}
CUSTOMER ID:	{CustomerId}

NOTICE OF ACTION

{Footer}

Page # of ##

2.1.3 Add Dynamic Template Title Section

The section that contains 'COUNTY OF MEDICAL SERVICES PROGRAM' will be suppressed if the NOA Title is not populated.

Section	General Conditions
COUNTY MEDICAL SERVICES PROGRAM	If the NOA Title is populated, make this section visible on the template, otherwise, suppress this section on the template.

2.1.4 Add Template Variable Population

This section will describe the population of the template variables. Populate each of the variables as follows:

Variable	Description	Population
CountyName	The name of the county.	This variable will be populated with the name of the county the case is managed in.
OfficeAddress	The office address.	This variable will be populated with the worker's office address.
NoticeDate	The date when the NOA generated.	This variable will be populated with the date when the notice was generated.
CaseName	The case name.	This variable will be populated with the name of the recipient.
CaseNumber	The case number.	This variable will be populated with the case number of the recipient.
WorkerName	The worker's name.	This variable will be populated with the worker's name.
WorkerId	The worker number.	This variable will be populated with the worker number.
TelephoneNumber	The worker's telephone number.	This variable will be populated with the worker's telephone number.
CustomerId	The recipient's customer Id.	This variable will be populated with the recipient's customer Id.
RecipientAddress	The recipient's address.	This variable will be populated with the recipient's address.

NoaTitle	The title will be populated when the NOA generates for a retroactive month.	If the NOA generates for a Retro CMSP Approval, populate the title with 'APPROVAL OF RETROACTIVE BENEFITS'. If the NOA generates for a Retro CMSP Denial, populate the title with 'DENIAL OF RETROACTIVE BENEFITS'. If the NOA generates for a Retro Approval and Denial, populate the title with 'APPROVAL/DENIAL OF RETROACTIVE BENEFITS. Otherwise, the title will be blank. Please refer to **Section 3 Supporting Document – Document #9** for the translation of the titles.
Footer	The footer will be populated with 'NOA' or a form number.	If the NOA generates for a Retro CMSP Approval, populate the footer with 'CMSP 239F'. If the NOA generates for a Retro CMSP Denial, populate the footer with 'CMSP 239G'. If the NOA generates for a Retro Approval and Denial, populate the footer with 'CMSP 239F/CMSP 239G'. Otherwise, populate the footer with 'NOA'.

2.2 Add CMSP Legal Section Fragment

2.2.1 Overview

This section will describe the updates needed to add the CMSP Legal Section to CalSAWS. This fragment will be added to the CMSP template fragment as the second page. The population logic will also be added to CalSAWS.

Program(s): CMSP

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.2.2 Description of Change

Add the CMSP Legal Section fragment to CalSAWS. It will be added to the CMSP template fragment as the second page.

NOA Mockups/Examples:

YOUR ELIGIBILITY HEARING RIGHTS
If you are dissatisfied with an action taken, or not taken, by the county Department of Social Services that resulted in the denial, reduction or discontinuance of your eligibility, and you wish to have an **eligibility hearing,** you must request one within thirty (30) calendar days of the date the Notice of Action (NOA) was mailed to you. If you do not receive a Notice of Action, you must request the hearing within thirty (30) calendar days of the date that you became aware of the action about which you are dissatisfied.

TO KEEP YOUR SAME BENEFITS WHILE YOU ARE WAITING FOR YOUR ELIGIBILITY HEARING
You must ask for a hearing before the action takes place. Your County Medical Services Program (CMSP) benefits will stay the same until the hearing process is completed or until your certification period ends, whichever occurs first. Under no circumstances will aid extend beyond the existing certification period.

TO GET HELP
You may get free legal aid at your local legal aid office or welfare rights group.
{LegalAidAddress}

HOW TO ASK FOR FOR AN ELIGIBILITY HEARING
The way to ask for a hearing is to fill out this page. Make a copy of the front and back for your records. Then, send or take this page to:
{HearingsAddress}

HEARING REQUEST
I want a hearing because of an action by the Welfare Department of {CountyName} County about my County Medical Services Program (CMSP) eligibility. Here's why:

____

____

☐ Check here and add a page if you need more space.

☐ I want the person named below to represent me at this hearing. I give my permission for this person to see my records or come to this hearing for me.

Name: ____

Address: ____

Phone Number: ____

☐ I need a free interpreter. My language or dialect is: ______________________

My Name: ______________________ Phone: ______________________

Address: ____

Case Number: ____

My Signature: ______________________ Date: ______________________

CMSP NOA BACK (04/15)

2.2.3 Add CMSP Legal Section Variable Population

This section will describe the population of the template variables. Populate each of the variables as follows:

Variable	Description	Population
LegalAidAddress	The legal aid address.	This variable will be populated with the County's legal aid address.
HearingsAddress	The hearings address.	This variable will be populated with the County's hearings address.
CountyName	The county name.	This variable will be populated with the name of the county the case resides in.

2.3 Add CMSP Regulations Fragment

2.3.1 Overview

This section will describe the updates needed to add the CMSP regulation fragment to CalSAWS. This fragment will be added to the bottom of the first page on the CMSP template fragment. The population logic will also be added to CalSAWS.

Program(s): CMSP

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.3.2 Description of Change

Add the CMSP regulations fragment to CalSAWS. It will be added to the bottom of the first page on the CMSP template fragment.

NOA Mockups/Examples:

The authority that requires this action is in CMSP All County Letter No. {CmspRetroRegulation}and/or CMSP Eligibility Manual sections: {Regulations}

2.3.3 Add CMSP Regulations Variable Population

This section will describe the population of the template variables. Populate each of the variables as follows:

Variable	Description	Population
CMSPRetroRegulation	The regulation reference for retroactive CMSP.	The variable will be populated with '16-02' when the CMSP NOA generates for a Retro Approval, Retro Denial, or Retro Approval and Denial, otherwise it will be blank.
Regulations	The regulation references for CMSP.	The default CMSP regulations 'Article 15; 3-033' will populate for all CMSP NOAs Following the default regulations, 'ACL 04-07' will populate for all CMSP Approval NOAs Any specific regulation associated to the fragments will populate after default regulations

2.4 Add CMSP Action Fragments

2.4.1 Overview

This section will describe the updates needed to add the CMSP action fragments to CalSAWS. It will add the action fragment XDPs and the generation and population logic for each action fragment.

Program(s): CMSP

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.

2.4.2 Description of Change

2.4.2.1 Add the CMSP Approval Action Fragment

Add the CMSP approval action fragment.

Action Type: Approval

Fragment Level: Program

2.4.2.1.1 Create the CMSP Approval Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	As of <EffectiveDate>, eligibility has been approved for the following member(s) of your family: **Name(s):** <PersonNames>	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.1.2 Add Generation Logic for CMSP Approval Action Fragment

Generate the CMSP approval action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The status of the program is 'Active'.
3. The benefit month is not a retroactive month.
4. There is at least one person approved for CMSP benefits (receiving non-LTC CMSP or LTC CMSP aid code).

2.4.2.1.3 Add Population Logic for CMSP Approval Action Fragment

Populate the CMSP approval action fragment as follows:

Variable	Description	Population
EffectiveDate	The effective date of the action.	The variable will be populated with the date when the approval action was taken. The format will be MM DD, YYYY (ex. July 26, 2019).
PersonNames	The list of individuals.	The variable will be populated with the names of the individuals that are approved for CMSP.

2.4.2.1.4 Add Ordering Logic for the CMSP Approval Action Fragment

The CMSP approval action fragment will be the first fragment on the CMSP Approval NOA.

2.4.2.1.5 Add Regulations for the CMSP Approval Action Fragment

Add the following regulations for the action fragment: 3-028; 3-033; 11-010

2.4.2.2 Add the CMSP Certification Period Action Fragment

Add the CMSP certification period action fragment.

Action Type: Approval

Fragment Level: Person

2.4.2.1.1 Create the CMSP Certification Period Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName>'s certification period begins the first day of <CertificationBeginDate> and ends the last day of <CertificationEndDate>. You will be eligible as follows:	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.1.2 Add Generation Logic for the CMSP Certification Period Action Fragment

Generate the CMSP certification period action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The person meets all the conditions below. The fragment generates for each person that meets the conditions.
    a. The person is a CMSP applicant. This means the person has an open CMSP application for the benefit month.
    b. The status of the person was previously 'Pending', 'Denied', or 'Discontinued', but is now 'Active'
    OR
    The current status of the person is Active, and the person is reapplying for CMSP.
    c. The role of the person is 'Member'.
    d. The person is receiving a non-Long-Term Care (LTC) CMSP aid code.

3. One of the following is true:
    a. The Certification Determination Month (CDM) has been established and the CDM is the same month as the benefit month the EDBC is running for. The CDM is typically established when running EDBC for the Beginning Date of Aid (BDA) month. It can be the same month as the BDA, the following month, or two months after. The CMSP Approval NOA will not generate until after EDBC has run and the CDM is established.
    b. The benefit month is a retroactive month and EDBC has approved the person for retroactive benefits. The reason why the check for CDM does not apply for a retroactive month is because the CDM cannot be before the BDA.

Example #1 - CDM is the same month as BDA
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as the same month. The person is approved for CMSP benefits. The CMSP approval NOA will generate after running the EDBC.

Example #2 – CDM is the month after the BDA
The person's BDA is 10/01/2019. When the user runs the EDBC for the BDA, the CDM is established as the following month, 11/2019. After the EDBC is run for the BDA, no NOA generates. The user runs the EDBC for the 11/2019 benefit month. The person is approved for CMSP benefits for both months. The CMSP Approval NOA generates after running the EDBC for the 11/2019 benefit month.

Example #3 – CDM is two months after the BDA
The person's BDA is 10/01/2019. When the user runs the EDBC for the BDA, the CDM is established as two months from the BDA, 12/2019. After the EDBC is run for the BDA, there is no NOA that generates. The user runs the EDBC for the 11/2019 benefit month, and again, there is no NOA that generates. The user runs the EDBC for the 12/2019 benefit month. The person is approved for CMSP benefits for all the months. The CMSP Approval NOA generates after running the EDBC for the 12/2019 benefit month.

Example #4 – At Recertification
The current system date is 10/15/2019 and the person's Certification End Date (CED) is 10/31/2019. The person has reapplied for CMSP and the BDA of the new application is the following month, which is also the come-up month. The user runs the EDBC for the 11/2019 benefit month and the person's new application is approved. The CMSP Approval NOA generates after running the EDBC.

Example #5 – Retroactive Approval
The person has a BDA of 10/01/2019 and requested a retroactive month for 09/2019. The user runs the EDBC for 09/2019 and the person is approved for CMSP. A CMSP Retro Approval NOA generates after running the EDBC.

2.4.2.2.3 Add Population Logic for CMSP Certification Period Action Fragment

Populate the CMSP certification period action fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	The variable will be populated with the name of the person who is approved for CMSP.
CertificationBeginDate	The certification begin date.	If it is not a retroactive approval, the variable will be populated with the person's Begin Date of Aid and will be in MM YYYY format (ex. July 2019). If it is a retroactive approval, the variable will be populated with the retroactive month and will be in MM YYYY format.
CertificationEndDate	The certification end date.	The variable will be populated with the person's Certification End Date (CED) and will be in MM YYYY format (ex. October 2019). If it is a retroactive approval, the variable will be populated with the retroactive month and will be in MM YYYY format.

2.4.2.1.4 Add Ordering Logic for the CMSP Certification Period Action Fragment

The CMSP certification period action fragment will follow the individual MC change statement action fragment (defined in **Section 2.4.2.6**).

2.4.2.1.5 Add Regulations for the CMSP Certification Period Action.

Add the following regulation for the action fragment: 11-011

2.4.2.3 Add the CMSP Retro Approval Action Fragment

Add the CMSP retroactive approval action fragment.

Action Type: Approval

Fragment Level: Program

2.4.2.3.1 Add the CMSP Retro Approval Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	As of <EffectiveDate>, CMSP retroactive eligibility has been approved for <RetroMonth> for the following member(s) of your family: **Name(s):** <PersonNames>	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.3.2 Add Generation Logic for the CMSP Retro Approval Action Fragment

Generate the CMSP retroactive approval action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The status of the program is 'Active'.
3. The benefit month is a retroactive month.
4. There is at least one person approved for CMSP benefits (receiving a non-LTC CMSP aid code or LTC CMSP aid code).

2.4.2.3.3 Add Population Logic for the CMSP Retro Approval Action Fragment

Populate the CMSP retroactive approval action fragment as follows:

Variable	Description	Population
EffectiveDate	The effective date of the action.	The variable will be populated with the date when the approval action was taken.

		The format will be MM DD, YYYY (ex. July 26, 2019).
RetroMonth	The retroactive month.	The variable will be populated with the month the CMSP benefits were retroactively approved. It will have the MM YYYY format (ex. July 2019).
PersonNames	The list of the names of the individuals.	The variable will be populated with the names of the individuals approved for retroactive benefits.

2.4.2.3.4 Add Ordering Logic for the CMSP Retro Approval Action

The CMSP retroactive approval action will be the first fragment on the CMSP Retro Approval NOA.

2.4.2.3.5 Add Regulations for the CMSP Retro Approval Action

Add the following regulations for the action fragment: 3-015; 3-027; 3-032; 8-011; 8-012; 8-053; 10-012; 11-011

2.4.2.4 Add the CMSP Retro Denial Action Fragment

Add the CMSP retroactive denial action fragment.

Action Type: Denial

Fragment Level: Program

2.4.2.4.1 Add the CMSP Retro Denial Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	As of <EffectiveDate>, CMSP retroactive eligibility has been denied for <RetroMonth> for the following member(s) of your family: **<u>Name(s):</u>** <PersonNames>	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.4.2 Add the Generation Logic for the CMSP Retro Denial Action Fragment

Generate the CMSP retroactive denial action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The status of the program is ‘Denied’.
3. The benefit month is a retroactive month.
4. There is at least one person who is a CMSP applicant and the person has been denied for retroactive benefits.

2.4.2.4.3 Add Population Logic for the CMSP Retro Denial Action Fragment

Populate the CMSP retroactive denial action fragment as follows:

Variable	Description	Population
EffectiveDate	The effective date of the action.	The variable will be populated with the date when the approval action was taken. The format will be MM DD, YYYY (ex. July 26, 2019).
RetroMonth	The retroactive month.	The variable will be populated with the month the CMSP benefits were retroactively denied. It will have the MM YYYY format (ex. July 2019).
PersonNames	The list of the names of the individuals.	The variable will be populated with the names of the individuals denied for retroactive benefits.

2.4.2.4.4 Add Ordering Logic for the CMSP Retro Denial Action

The CMSP retroactive denial action will be the first fragment on the CMSP Retro Denial NOA.

2.4.2.4.5 Add Regulations for the CMSP Retro Denial Action

Add the following regulations for the action fragment: 3-018; 3-028; 3-029; 3-030; 3-032

2.4.2.5 Add the CMSP Retro Approval and Denial Action Fragment

Add the CMSP retroactive approval and denial action fragment.

Action Type: Approval

Fragment Level: Program

2.4.2.5.1 Add the CMSP Retro Approval and Denial Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	As of <EffectiveDate>, CMSP retroactive eligibility has been approved for <RetroMonth> for the following member(s) of your family: **Name(s):** <ApprovedPersonNames> As of <EffectiveDate>, CMSP retroactive eligibility has been denied for <RetroMonth> for the following member(s) of your family: **Name(s):** <DeniedPersonNames>	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.5.2 Add Generation Logic for the CMSP Retro Approval and Denial Action Fragment

Generate the CMSP retroactive approval and denial action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The status of the program is 'Active'.
3. The benefit month is a retroactive month.
4. There is at least one person approved for CMSP benefits (receiving a non-LTC CMSP aid code or LTC CMSP aid code) and there is at least one person who is a CMSP applicant and has been denied for retroactive benefits.

2.4.2.5.3 Add Population Logic for the CMSP Retro Approval and Denial Action Fragment

Populate the CMSP retroactive approval and denial action fragment as follows:

Variable	Description	Population
EffectiveDate	The effective date of the action.	The variable will be populated with the date when the approval action was taken. The format will be

		MM DD, YYYY (ex. July 26, 2019).
RetroMonth	The retroactive month.	The variable will be populated with the month the CMSP benefits were retroactively approved/denied. It will have the MM YYYY format (ex. July 2019).
ApprovedPersonNames	The list of the names of the individuals.	The variable will be populated with the names of the individuals approved for retroactive benefits.
DeniedPersonNames	The list of the names of the individuals.	The variable will be populated with the names of the individuals denied for retroactive benefits.

2.4.2.5.4 Add Ordering Logic for the CMSP Retro Approval and Denial Action Fragment

The CMSP retroactive approval and denial action will be the first fragment on the CMSP Retro Approval NOA.

2.4.2.5.5 Add Regulations for the CMSP Retro Approval and Denial Action Fragment

Add the following regulations for the action fragment: 3-015; 3-018; 3-027; 3-028; 3-029; 3-30; 3-032; 8-011; 8-012; 8-053; 10-012; 11-011

2.4.2.6 Add the Individual MC Change Statement Action Fragment

Add the individual Medi-Cal change statement action fragment.

Action Type: Approval

Fragment Level: Person

2.4.2.6.1 Add the Individual MC Change Statement Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	This message explains eligibility for **<PersonName>**.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.6.2 Add Generation Logic for the Individual MC Change Statement Action Fragment

Generate the individual MC change statement action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The status of the program is 'Active'.
3. The person is approved for CMSP benefits (receiving a non-LTC CMSP aid code). This fragment generates for each person who is approved for benefits.

2.4.2.6.3 Add Population Logic for the Individual MC Change Statement Action Fragment

Populate the individual MC change statement action fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	The variable will be populated with the name of the person who was approved for benefits.

2.4.2.6.4 Add Ordering Logic for the Individual MC Change Statement Action Fragment

The fragment will be after the CMSP approval action, CMSP retroactive approval action, and the CMSP retroactive approval and denial action fragments. However, it will before the CMSP certification period action fragment.

2.4.2.7 Add the CMSP Long-Term Care Approval Action Fragment

Add the CMSP LTC approval action fragment.

Action Type: Approval

Fragment Level: Program

2.4.2.7.1 Add the CMSP LTC Approval Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting

Static	<PersonName> has been approved for companion benefits to his/her long term Medi-Cal care benefits. These companion benefits, covered under the County Medical Services Program (CMSP) are for inpatient acute care services only.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.7.2 Add Generation Logic for the CMSP LTC Approval Action Fragment

Generate the CMSP LTC approval action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The person meets all the conditions below. The fragment generates for each person that meets the conditions.
    a. The person is a CMSP applicant. This means the person has an open CMSP application for the benefit month.
    b. The status of the person was previously 'Pending', 'Denied', or 'Discontinued', but is now 'Active'
    OR
    The current status of the person is Active, and the person is reapplying for CMSP.
    c. The role of the person is 'Member'.
    d. The person is receiving a CMSP LTC aid code (8F).

When approving CMSP LTC benefits for a non-retroactive month, there is no concept of a CDM. The benefits are approved when the user runs EDBC for the BDA. Therefore, the CMSP approval NOA will generate after running the EDBC for the BDA.

2.4.2.7.3 Add Population Logic for the CMSP LTC Approval Action Fragment

Populate the CMSP LTC approval action fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	The variable will be populated with the name of the person who was approved for CMSP LTC.

2.4.2.7.4 Add Ordering Logic for the CMSP LTC Approval Action Fragment

The CMSP LTC approval action fragment will be after the CMSP approval action, CMSP retroactive approval action, or the CMSP retroactive approval and denial action fragments.

2.4.2.7.5 Add Regulations for the CMSP LTC Approval Action Fragment

Add the following regulations for the action fragment: 1-069; 3-016

2.4.2.8 Add the CMSP Denial Action Fragment

Add the CMSP denial action fragment.

Action Type: Denial

Fragment Level: Program

2.4.2.8.1 Add the CMSP Denial Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	As of <EffectiveDate>, the County has denied your application for <ProgramName> dated <ApplicationDate>. Here's why:	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.8.2 Add Generation Logic for the CMSP Denial Action Fragment

Generate the CMSP denial action fragment on the NOA when all the following is true:

1. The program type is Medi-Cal.
2. The status of the program is 'Denied' or 'Discontinued'.
3. The benefit month is not a retroactive month.
4. There is at least one person who is a CMSP applicant and the person is denied CMSP benefits or discontinued for CMSP benefits.

Note: The reason why logic checks for a discontinued status is because the person is not truly approved for CMSP benefits until the EDBC is run for the CDM and approves the person. Since the CDM can be the same month as the BDA, the following month, or two months after the BDA month, if the EDBC is run for any of those months including the CDM and it results in a denial or discontinuance, the logic will need to generate a CMSP denial NOA.

In a two-person case where one person is being approved for CMSP and the other person is denied/discontinued and it is not a retroactive month, the CMSP Approval and CMSP Denial will generate separately from each other.

Example #1 – The CDM is the same month as the BDA
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as the same month. However, the results of the EDBC causes the person to be denied CMSP benefits. A CMSP denial NOA will generate after running the EDBC.

Example #2 – The CDM is the month following the BDA
<u>2a:</u>
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as the month following the BDA. However, the results of the EDBC causes the person to be denied CMSP benefits. A CMSP denial NOA will generate after running the EDBC for the 10/2019 benefit month.

<u>2b:</u>
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as the month following the BDA. The result of the EDBC causes the person to be approved for CMSP benefits for the 10/2019 benefit month. However, when the user run the EDBC for the CDM (11/2019), the person is not eligible for CMSP benefits and the EDBC discontinues the person. The CMSP denial NOA will generate after running the EDBC for the 11/2019 benefit month.

Example #3 – The CDM is two months after the BDA
<u>3a:</u>
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as two months following the BDA (12/2019). However, the results of the EDBC causes the person to be denied CMSP benefits. A CMSP denial NOA will generate after running the EDBC for the 10/2019 benefit month.

<u>3b:</u>
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as two months following the BDA (12/2019). The result of the EDBC causes the person to be approved for CMSP benefits for the 10/2019 benefit month. However, when the user run the EDBC for the 11/2019 benefit month, the person is not eligible for CMSP benefits and the EDBC discontinues the person. The CMSP denial NOA will generate after running the EDBC for the 11/2019 benefit month.

<u>3c:</u>
The person's BDA is 10/01/2019. When the user runs the EDBC, the CDM is established as two months following the BDA (12/2019). The result of the EDBC causes the person to be approved for CMSP benefits for the 10/2019 benefit month. The user run the EDBC for the 11/2019 benefit month, the person is approved for CMSP benefits for that month. However, when the user run the EDBC for the CDM, the person is not

eligible for CMSP benefits and the EDBC discontinues the person. The CMSP denial NOA will generate after running the EDBC for the 12/2019 benefit month.

2.4.2.8.3 Add Population Logic for the CMSP Denial Action Fragment

Populate the CMSP denial action fragment as follows:

Variable	Description	Population
EffectiveDate	The effective date of the action.	The variable will be populated with the date when the denial action was taken. The format will be MM DD, YYYY (ex. July 26, 2019).
<ProgramName>	The name of the program.	The variable will be populated with 'County Medical Services Program'.
<ApplicationDate>	The application date for the primary applicant.	The variable will be populated with the primary applicant's application date.

2.4.2.8.4 Add Ordering Logic for the CMSP Denial Action Fragment

The CMSP denial action fragment will be the first fragment on the CMSP Denial NOA.

2.4.2.9 Add the Individual CMSP Denial Action Fragment

Add the individual CMSP denial action fragment.

Action Type: Denial

Fragment Level: Person

2.4.2.9.1 Add the Individual CMSP Denial Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	This message explains the denial for **<PersonName>**. Here's why:	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.9.2 Add Generation Logic for the Individual CMSP Denial Action Fragment

Generate the individual CMSP denial action fragment on the NOA when:

1. The program is Medi-Cal.
2. The benefit month is a retroactive month.
3. There is at least one person who is a CMSP applicant and the person has been denied for retroactive benefits.

2.4.2.9.3 Add Population Logic for the Individual CMSP Denial Action Fragment

Populate the CMSP denial action fragment as follows:

Variable	Description	Population
PersonName	The person's name.	This variable will be populated with the name of the person who is denied.

2.4.2.9.4 Add Ordering Logic for the Individual CMSP Denial Action Fragment

The individual CMSP denial action will generate right after the CMSP retroactive action fragment or the CMSP retroactive approval and denial action fragment. If the CMSP retroactive approval and denial action fragment is on the NOA, then the fragment will generate on the NOA after approval actions and messages.

2.4.2.10 Add the CMSP Discontinuance Action Fragment

Add the CMSP discontinuance action fragment.

Action Type: Discontinuance

Fragment Level: Program

2.4.2.10.1 Add the CMSP Discontinuance Action Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	As of <EffectiveDate>, the County is stopping your <ProgramName>. Here's why:	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.4.2.10.2 Add Generation Logic for the CMSP Discontinuance Action Fragment

Generate the CMSP discontinuance action fragment on the NOA when:

1. The program type is Medi-Cal.
2. The benefit month is a non-retroactive month.
3. There is at least one person who was receiving a CMSP aid code in the previous benefit month but is getting discontinued in the current benefit month.

2.4.2.10.3 Add Population Logic for the CMSP Discontinuance Action Fragment

Populate the CMSP discontinuance action fragment as follows:

Variable	Description	Population
EffectiveDate	The effective date of the discontinuance.	The variable will be populated with the date when the discontinuance action was taken. The format will be MM DD, YYYY (ex. July 26, 2019).
ProgramName	The program name.	The variable will be populated with 'County Medical Services Program'.

2.4.2.10.4 Add Ordering Logic for the CMSP Discontinuance Action Fragment

The CMSP discontinuance action fragment will be the first fragment on the CMSP Discontinuance NOA.

2.5 Add CMSP Reason Fragments

2.5.1 Overview

This section will describe the updates needed to add the CMSP reason fragments to CalSAWS. It will add the reason fragment XDPs, the generation and population logic for each reason fragment.

Program(s): CMSP

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.5.2 Description of Change

2.5.2.1 Add the CMSP County Residence Reason Fragment

Add the CMSP county residence reason fragment.

Action Type: Discontinuance

Fragment Level: Person

2.5.2.1.1 Add the CMSP County Residence Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> has moved out of the county.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.1.2 Add Generation Logic for the CMSP County Residence Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type is CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Moved Out of County (CMSP)' on the CMSP budget.

2.5.2.1.3 Add Population Logic for the CMSP County Residence Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being discontinued.

2.5.2.1.4 Add Ordering Logic for the CMSP County Residence Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.1.5 Add Regulations for the CMSP County Residence Reason Fragment

Add the following regulations for the reason fragment: 1-098; 5-018; 5-020; 11-012

2.5.2.2 Add the CMSP Did Not Request Discontinuance Reason Fragment

Add the CMSP did not request discontinuance reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.2.1 Add the CMSP Did Not Request Discontinuance Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	The required person did not request discontinuance from CMSP.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.2.2 Add Generation Logic for the CMSP Did Not Request Discontinuance Reason Fragment

Generate the reason fragment when the person is a CMSP applicant and the person is denied for the reason of 'Req Pers Didn't Request Disc'.

2.5.2.2.3 Add Ordering Logic for the CMSP Did Not Request Discontinuance Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.2.4 Add Regulations for the CMSP Did Not Request Discontinuance Reason Fragment

Add the following regulation for the reason fragment: 10-012

2.5.2.3 Add the CMSP FPL Exceed Income Reason Fragment

Add the CMSP FPL exceed income reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.3.1 Add the CMSP FPL Exceed Income Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Income exceeds 300% of the Federal Poverty Level.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.3.2 Add Generation Logic for the CMSP FPL Exceed Income Reason Fragment

Generate the reason fragment when all the following is true:

1. The status of the person is ‘Denied’.
2. There is a budget on the EDBC with the Medi-Cal Test Type is CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of ‘Over Income’ on the CMSP budget.

2.5.2.3.3 Add Ordering Logic for the CMSP FPL Exceed Income Reason Fragment

The reason fragment will generate after the ‘Here’s why:’ section of the action fragment.

2.5.2.3.4 Add Regulations for the CMSP FPL Exceed Income Reason Fragment

Add the following regulations for the reason fragment: 1-111; 3-029; 8-011

2.5.2.4 Add the CMSP Fleeing Felon Reason Fragment

Add the CMSP fleeing felon reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.4.1 Add the CMSP Fleeing Felon Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> is a fleeing felon and is not eligible to receive CMSP.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.4.2 Add Generation Logic for the CMSP Fleeing Felon Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied' or 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Fleeing Felon' on the CMSP budget.

2.5.2.4.3 Add Population Logic for the CMSP Fleeing Felon Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.4.4 Add Ordering Logic for the CMSP Fleeing Felon Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.4.5 Add Regulations for the CMSP Fleeing Felon Reason Fragment

Add the following regulations for the reason fragment: 1-052; 6-013

2.5.2.5 Add the CMSP Out of the County Reason Fragment

Add the CMSP out of the county reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.5.1 Add the CMSP Out of the County Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	You are living in another county and do not plan to move to this county.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.5.2 Add Generation Logic for the CMSP Out of the County Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Does Not Live in County (CMSP)' on the CMSP budget.

2.5.2.5.3 Add Ordering Logic for the CMSP Out of the County Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.5.4 Add Regulations for the CMSP Out of the County Reason Fragment

Add the following regulations for the reason fragment: 1-098; 2-015; 5-018

2.5.2.6 Add the CMSP Person Linked to Medi-Cal Reason Fragment

Add the CMSP person linked to MC reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.6.1 Add the CMSP Person Linked to Medi-Cal Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> is linked to Medi-Cal for one of the following reasons: • A child under 21 • Over 65 Years of Age • Blind • Permanently Disabled • Pregnant • In Long Term Care/Board and Care • In need of specific medical services and meets program specific requirements.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.6.2 Add Generation Logic for the CMSP Person Linked to Medi-Cal Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of 'Linkage to Medi-Cal'.
2. The person is discontinued from CMSP aid for the reason of 'Linkage to Medi-Cal'.

2.5.2.6.3 Add Population Logic for the CMSP Person Linked to Medi-Cal Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.6.4 Add Ordering Logic for the CMSP Person Linked to Medi-Cal Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.6.5 Add Regulations for the CMSP Person Linked to Medi-Cal Reason Fragment

Add the following regulations for the reason fragment: 3-010; 3-012; 11-012

2.5.2.7 Add the CMSP Person Moved into Home Reason Fragment

Add the CMSP person moved into home reason fragment.

Action Type: Discontinuance

Fragment Level: Person

2.5.2.7.1 Add the CMSP Person Moved into Home Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> requested a discontinuance because a CMSP applicant has moved into his/her home.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.7.2 Add Generation Logic for the CMSP Person Moved into Home Reason Fragment

Generate the reason fragment on the NOA when the person is discontinued from CMSP aid for the reason of 'Requested Disc. (CMSP) - Add Person'.

2.5.2.7.3 Add Population Logic for the CMSP Person Moved into Home Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being discontinued.

2.5.2.7.4 Add Ordering Logic for the CMSP Person Moved into Home Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.7.5 Add Regulations for the CMSP Person Moved into Home Reason Fragment

Add the following regulations for the reason fragment: 3-019; 10-012

2.5.2.8 Add the CMSP Verbal Withdrawal Reason Fragment

Add the CMSP verbal withdrawal reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.8.1 Add the CMSP Verbal Withdrawal Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> verbally requested to withdraw his/her application.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.8.2 Add Generation Logic for the CMSP Verbal Withdrawal Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied' or 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Requested Disc. (CMSP) – Verbal' on the CMSP budget.

2.5.2.8.3 Add Population Logic for the CMSP Verbal Withdrawal Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.8.4 Add Ordering Logic for the CMSP Verbal Withdrawal Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.8.5 Add Regulation for the CMSP Verbal Withdrawal Reason Fragment

Add the following regulation for the reason fragment: 3-019

2.5.2.9 Add the CMSP Verifications Reason Fragment

Add the CMSP verifications reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.9.1 Add the CMSP Verifications Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	We asked you to bring verifications we need to make a decision about your application of eligibility for CMSP. You did not bring in the verifications we asked you for.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.9.2 Add Generation Logic for the CMSP Verifications Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'FTP Verification (CMSP)' on the CMSP budget.

2.5.2.9.3 Add Ordering Logic for the CMSP Verifications Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.9.4 Add Regulations for the CMSP Verifications Reason Fragment

Add the following regulations for the reason fragment: 3-025; 3-029

2.5.2.10 Add the CMSP Voluntary Child Exclusion Reason Fragment

Add the CMSP voluntary child exclusion reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.10.1 Add the CMSP Voluntary Child Exclusion Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> has voluntarily excluded the last/only child who could have provided Medi-Cal linkage.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.10.2 Add Generation Logic for the CMSP Voluntary Child Exclusion Reason Fragment

Generate the reason fragment on the NOA when the person is a CMSP applicant and the person is denied for the reason of 'Excl Child - MC Linkage'.

2.5.2.10.3 Add Population Logic for the CMSP Voluntary Child Exclusion Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.10.4 Add Ordering Logic for the CMSP Voluntary Child Exclusion Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.10.5 Add Regulation for the CMSP Voluntary Child Exclusion

Add the following regulation for the reason fragment: 6-014

2.5.2.11 Add the CMSP Didn't Apply for OHC Reason Fragment

Add the CMSP didn't apply for OHC reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.11.1 Add the CMSP Didn't Apply for OHC Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not apply for Other Health Care Coverage.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.11.2 Add Generation Logic for the CMSP Didn't Apply for OHC Reason Fragment

Generate the reason fragment on the NOA when the person is a CMSP applicant and the person is denied for the reason of 'Didn't Apply OHC'.

2.5.2.11.3 Add Population Logic for the CMSP Didn't Apply for OHC Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.11.4 Add Ordering Logic for the CMSP Didn't Apply for OHC Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.11.5 Add Regulations for the CMSP Didn't Apply for OHC Reason Fragment

Add the following regulations for the reason fragment: 3-035; 11-012; 13-010

2.5.2.12 Add the CMSP Didn't Cooperate with DDSD Reason Fragment

Add the CMSP didn't cooperate with DDSD reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.12.1 Add the CMSP Didn't Cooperate with DDSD Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	We have information from the State Determination Service Division (DDSD) that <PersonName> did not cooperate with them in making a disability determination.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.12.2 Add Generation Logic for the CMSP Didn't Cooperate with DDSD Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of 'Didn't Co-op with SP-DDSD'.
2. The person is discontinued from CMSP aid for the reason of 'Didn't Co-op with SP-DDSD'.

2.5.2.12.3 Add Population Logic for the CMSP Didn't Cooperate with DDSD Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.12.4 Add Ordering Logic for the CMSP Didn't Cooperate with DDSD Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.12.5 Add Regulations for the CMSP Didn't Cooperate with DDSD Reason Fragment

Add the following regulations for the reason fragment: 3-029; 11-012

2.5.2.13 Add the CMSP Eligible to Medi-Cal Reason Fragment

Add the CMSP eligible to MC reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.13.1 Add the CMSP Eligible to Medi-Cal Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> is eligible to Medi-Cal.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.13.2 Add Generation Logic for the CMSP Eligible to Medi-Cal Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of 'Eligible to MC'.
2. The person is discontinued from CMSP aid for the reason of 'Eligible to MC'.

2.5.2.13.3 Add Population Logic for the CMSP Eligible to Medi-Cal Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.13.4 Add Ordering Logic for the CMSP Eligible to Medi-Cal Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.13.5 Add Regulations for the CMSP Eligible to Medi-Cal Reason Fragment

Add the following regulations for the reason fragment: 3-029; 11-012

2.5.2.14 Add the CMSP Exceeded Property Limit Reason Fragment

Add the CMSP exceeded property limit reason fragment.

Action Type: Denial

Fragment Level: Program

2.5.2.14.1 Add the CMSP Exceeded Property Limit Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Your property is more than the <PropertyLimit> allowable limit. Here is how we figured your countable property: **Property** **Countable Value** <PropertyType> <CountableValue> Total Value <TotalValue>	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.14.2 Add Generation Logic for the CMSP Exceeded Property Limit Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Failed Property' on the CMSP budget.

2.5.2.14.3 Add Population Logic for the CMSP Exceeded Property Limit Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PropertyLimit	The property limit.	The variable will be populated with the property limit. The property limit will be on the budget on the EDBC with type 'CMSP Property'.
PropertyType	The type of property.	The variable will be populated with the type of property. On the CMSP Property Budget, there is a list of Budget Person Property. The property type will be the type code for each Budget Person Property in the list.

CountableValue	The amount of the countable property.	The variable will be populated with the value of property. On the CMSP Property Budget, there is a list of Budget Person Property. There is a value for each Budget Person Property in the list.
TotalValue	The total amount of the countable property.	The variable will be populated with the total of the properties in the Budget Person Property list.

2.5.2.14.4 Add Ordering Logic for the CMSP Exceeded Property Limit Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.14.5 Add Regulations for the CMSP Exceeded Property Limit Reason Fragment

Add the following regulations for the reason fragment: 3-029; 7-010; 7-027; 7-028; 7-029

2.5.2.15 Add the CMSP Failed to Provide Verification for OHC Reason Fragment

Add the CMSP failed to provide verification for OHC reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.15.1 Add the CMSP Failed to Provide Verification for OHC Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> has failed to provide the county with information regarding Other Health Care Coverage.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.15.2 Add Generation Logic for the CMSP Failed to Provide Verification for OHC Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is ‘Denied’.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of ‘FTP Other Health Care’ on the CMSP budget.

2.5.2.15.3 Add Population Logic for the CMSP Failed to Provide Verification for OHC Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.15.4 Add Ordering Logic for the CMSP Failed to Provide Verification for OHC Reason Fragment

The reason fragment will generate after the ‘Here’s why:’ section of the action fragment.

2.5.2.15.5 Add Regulation for the CMSP Failed to Provide Verification for OHC Reason Fragment

Add the following regulation for the reason fragment: 3-025; 3-035

2.5.2.16 Add the CMSP Failed to Pay APTC Premium Reason Fragment

Add the CMSP failed to pay APTC premium reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.16.1 Add the CMSP Failed to Pay APTC Premium Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not provide proof of enrollment in or payment of premiums for a Covered CA Insurance Plan.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.16.2 Add Generation Logic for the CMSP Failed to Pay APTC Premium Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of 'Failure to Enroll/Pay APTC Premiums'.
2. The person is discontinued from CMSP aid for the reason of 'Failure to Enroll/Pay APTC Premiums'.

2.5.2.16.3 Add Population Logic for the CMSP Failed to Pay APTC Premium Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.16.4 Add Ordering Logic for the CMSP Failed to Pay APTC Premium Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.16.5 Add Regulation for the CMSP Failed to Pay APTC Premium Reason Fragment

Add the following regulation for the reason fragment: 3012.3

2.5.2.17 Add the CMSP Failed to Provide Proof of Income Reason Fragment

Add the CMSP failed to provide proof of income reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.17.1 Add the CMSP Failed to Provide Proof of Income Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not provide proof of his/her income.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.17.2 Add Generation Logic for the CMSP Failed to Provide Proof of Income Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of ‘FTP Income’.
2. The person is discontinued from CMSP aid for the reason of ‘FTP Income’.

2.5.2.17.3 Add Population Logic for the CMSP Failed to Provide Proof of Income Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.17.4 Add Ordering Logic for the CMSP Failed to Provide Proof of Income Reason Fragment

The reason fragment will generate after the ‘Here’s why:’ section of the action fragment.

2.5.2.17.5 Add Regulations for the CMSP Failed to Provide Proof of Income Reason Fragment

Add the following regulations for the reason fragment: 3-025; 3-029

2.5.2.18 Add the CMSP Gets APTC Reason Fragment

Add the CMSP gets APTC reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.18.1 Add the CMSP Gets APTC Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> is receiving an Advanced Premium Tax Credit.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.18.2 Add Generation Logic for the CMSP Gets APTC Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied' or 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Gets APTC' on the CMSP budget.

2.5.2.18.3 Add Population Logic for the CMSP Gets APTC Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.18.4 Add Ordering Logic for the CMSP Gets APTC Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.18.5 Add Regulation for the CMSP Gets APTC Reason Fragment

Add the following regulation for the reason fragment: 3012.3

2.5.2.19 Add the CMSP Incomplete MAGI Application Reason Fragment

Add the CMSP incomplete MAGI application reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.19.1 Add the CMSP Incomplete MAGI Application Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not complete the process or provide information necessary to be evaluated for Modified Adjusted Gross Income (MAGI), Medi-Cal, or a Covered CA Insurance Plan.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.19.2 Add Generation Logic for the CMSP Incomplete MAGI Application Reason Fragment

Generate the reason fragment on the NOA when the person is a CMSP applicant and the person is denied for the reason of 'Incomplete MAGI Application'.

2.5.2.19.3 Add Population Logic for the CMSP Incomplete MAGI Application Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.19.4 Add Ordering Logic for the CMSP Incomplete MAGI Application Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.19.5 Add Regulation for the CMSP Incomplete MAGI Application Reason Fragment

Add the following regulation for the reason fragment: 3012.3

2.5.2.20 Add the CMSP Reapply with a Budget Change Reason Fragment

Add the CMSP reapply with a budget change reason fragment.

Action Type: Discontinuance

Fragment Level: Person

2.5.2.20.1 Add the CMSP Reapply with a Budget Change Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> requested a discontinuance to reapply with a budget change.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.20.2 Add Generation Logic for the CMSP Reapply with a Budget Change Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Requested Disc. (CMSP) - Reapply with Budget Change' on the CMSP budget.

2.5.2.20.3 Add Population Logic for the CMSP Reapply with a Budget Change Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being discontinued.

2.5.2.20.4 Add Ordering Logic for the CMSP Reapply with a Budget Change Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.20.5 Add Regulations for the CMSP Reapply with a Budget Change Reason Fragment

Add the following regulations for the reason fragment: 3-019; 10-012

2.5.2.21 Add the CMSP Reapply After LTC Reason Fragment

Add the CMSP reapply after LTC reason fragment.

Action Type: Discontinuance

Fragment Level: Person

2.5.2.21.1 Add the CMSP Reapply After LTC Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Upon release from a Long Term Care/Skilled Nursing Facility, you must reapply for CMSP if you wish to continue benefits.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.21.2 Add Generation Logic for the CMSP Reapply After LTC Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Did not Reapply after LTC' on the CMSP budget.

2.5.2.21.3 Add Ordering Logic for the CMSP Reapply After LTC Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.21.4 Add Regulation for the CMSP Reapply After LTC Reason Fragment

Add the following regulation for the reason fragment: 11-011

2.5.2.22 Add the CMSP Unable to Locate Reason Fragment

Add the CMSP unable to locate reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.22.1 Add the CMSP Unable to Locate Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	You are not living at the last address you gave.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.22.2 Add Generation Logic for the CMSP Unable to Locate Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of 'Whereabouts Unknown'.
2. The person is discontinued from CMSP aid for the reason of 'Whereabouts Unknown'.

2.5.2.22.3 Add Ordering Logic for the CMSP Unable to Locate Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.22.4 Add Regulation for the CMSP Unable to Locate Reason Fragment

Add the following regulation for the reason fragment: 3-029

2.5.2.23 Add the CMSP Deceased Reason Fragment

Add the CMSP deceased reason fragment.

Action Type: Denial and Discontinuance

Fragment Level: Person

2.5.2.23.1 Add the CMSP Deceased Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	The county has information that <PersonName> is deceased.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.23.2 Add Generation Logic for the CMSP Deceased Reason Fragment

Generate the reason fragment on the NOA when one of the following is true:

1. The person is a CMSP applicant and the person is denied for the reason of ‘Deceased’.
2. The person is discontinued from CMSP aid for the reason of ‘Deceased’.

2.5.2.23.3 Add Population Logic for the CMSP Deceased Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied or discontinued.

2.5.2.23.4 Add Ordering Logic for the CMSP Deceased Reason Fragment

The reason fragment will generate after the ‘Here’s why:’ section of the action fragment.

2.5.2.23.5 Add Regulation for the CMSP Deceased Reason Fragment

Add the following regulation for the reason fragment: 3-031

2.5.2.24 Add the CMSP Didn’t Apply for DIB Reason Fragment

Add the CMSP didn’t apply for DIB reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.24.1 Add the CMSP Didn’t Apply for DIB Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get Disability Insurance Benefits (DIB) but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.24.2 Add Generation Logic for the CMSP Didn’t Apply for DIB Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused DIB' on the CMSP budget.

2.5.2.24.4 Add Population Logic for the CMSP Didn't Apply for DIB Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.24.4 Add Ordering Logic for the CMSP Didn't Apply for DIB Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.24.5 Add Regulations for the CMSP Didn't Apply for DIB Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.25 Add the CMSP Didn't Apply for Military Benefits Reason Fragment

Add the CMSP didn't apply for military benefits reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.25.1 Add the CMSP Didn't Apply for Military Benefits Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get Military Benefits but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.25.2 Add Generation Logic for the CMSP Didn't Apply for Military Benefits Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused Military Ben' on the CMSP budget.

2.5.2.25.3 Add Population Logic for the CMSP Didn't Apply for Military Benefits Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.25.4 Add Ordering Logic for the CMSP Didn't Apply for Military Benefits Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.25.5 Add Regulations for the CMSP Didn't Apply for Military Benefits Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.26 Add the CMSP Didn't Apply for Retirement Reason Fragment

Add the CMSP didn't apply for retirement reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.26.1 Add the CMSP Didn't Apply for Retirement Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get Retirement Benefits (SSA, Railroad, or Other) but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.26.2 Add Generation Logic for the CMSP Didn't Apply for Retirement Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused Retirement' on the CMSP budget.

2.5.2.26.3 Add Population Logic for the CMSP Didn't Apply for Retirement Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.26.4 Add Ordering Logic for the CMSP Didn't Apply for Retirement Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.26.5 Add Regulations for the CMSP Didn't Apply for Retirement Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.27 Add the CMSP Didn't Apply for SDI Reason Fragment

Add the CMSP didn't apply for SDI reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.27.1 Add the CMSP Didn't Apply for SDI Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get State Disability Insurance Benefits (SDI) but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.27.2 Add Generation Logic for the CMSP Didn't Apply for SDI Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused SDI' on the CMSP budget.

2.5.2.27.3 Add Population Logic for the CMSP Didn't Apply for SDI Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.27.4 Add Ordering Logic for the CMSP Didn't Apply for SDI Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.27.5 Add Regulations for the CMSP Didn't Apply for SDI Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.28 Add the CMSP Didn't Apply for UIB Reason Fragment

Add the CMSP didn't apply for UIB reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.28.1 Add the CMSP Didn't Apply for UIB Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get Unemployment Insurance Benefits (UIB) but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.28.2 Add Generation Logic for the CMSP Didn't Apply for UIB Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused UIB' on the CMSP budget.

2.5.2.28.3 Add Population Logic for the CMSP Didn't Apply for UIB Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.28.4 Add Ordering Logic for the CMSP Didn't Apply for UIB Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.28.5 Add Regulations for the CMSP Didn't Apply for UIB Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.29 Add the CMSP Didn't Apply for VA Reason Fragment

Add the CMSP didn't apply for VA reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.29.1 Add the CMSP Didn't Apply for VA Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get veteran's benefits (VA) but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.29.2 Add Generation Logic for the CMSP Didn't Apply for VA Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused VA' on the CMSP budget.

2.5.2.29.3 Add Population Logic for the CMSP Didn't Apply for VA Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.29.4 Add Ordering Logic for the CMSP Didn't Apply for VA Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.29.5 Add Regulations for the CMSP Didn't Apply for VA Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.30 Add the CMSP Didn't Apply for Worker Compensation Reason Fragment

Add the CMSP didn't apply for worker compensation reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.30.1 Add the CMSP Didn't Apply for Worker Compensation Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> did not try to get unconditionally available income. This person could get Workman's Compensation (WC) but did not apply.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.30.2 Add Generation Logic for the CMSP Didn't Apply for Worker Compensation Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Refused Wrk Cmp' on the CMSP budget.

2.5.2.30.3 Add Population Logic for the CMSP Didn't Apply for Worker Compensation Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.30.4 Add Ordering Logic for the CMSP Didn't Apply for Worker Compensation Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.30.5 Add Regulations for the CMSP Didn't Apply for Worker Compensation Reason Fragment

Add the following regulations for the reason fragment: 3-036; 6-013

2.5.2.31 Add the CMSP Failed to Complete Eligibility Determination Reason Fragment

Add the CMSP failed to complete eligibility determination reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.31.1 Add the CMSP Failed to Complete Eligibility Determination Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	We asked <PersonName> to complete and return the paperwork we need to make a decision about your application of eligibility for CMSP. You did not return your completed eligibility determination paperwork.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.31.2 Add Generation Logic for the CMSP Failed to Complete Eligibility Determination Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and the person is denied for the reason of 'Failed to Complete Determination'.

2.5.2.31.3 Add Population Logic for the CMSP Failed to Complete Eligibility Determination Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.31.4 Add Ordering Logic for the CMSP Failed to Complete Eligibility Determination Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.31.5 Add Regulations for the CMSP Failed to Complete Eligibility Determination Reason Fragment

Add the following regulations for the reason fragment: 3-014; 3-029; 50165; 50175; 50189; 50167

2.5.2.32 Add the CMSP Failed to Cooperate with the MC Process Reason Fragment

Add the CMSP failed to cooperate with the MC process reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.32.1 Add the CMSP Failed to Cooperate with the MC Process Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> failed to cooperate with the Medi-Cal process.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.32.2 Add Generation Logic for the CMSP Failed to Cooperate with the MC Process Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and the person is denied for the reason of 'Didn't Coop w. MC Linkage'.

2.5.2.32.3 Add Population Logic for the CMSP Failed to Cooperate with the MC Process Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.32.4 Add Ordering Logic for the CMSP Failed to Cooperate with the MC Process Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.32.5 Add Regulations for the CMSP Failed to Cooperate with the MC Process Reason Fragment

Add the following regulations for the reason fragment: 3-012; 11-012

2.5.2.33 Add the CMSP Failed to Provide SSN Reason Fragment

Add the CMSP failed to provide SSN reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.33.1 Add the CMSP Failed to Provide SSN Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	You did not give the following information: Social Security Number or Proof of Application for a SSN for: <PersonName>	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.33.2 Add Generation Logic for the CMSP Failed to Provide SSN Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'SSN Enumeration' on the CMSP budget.

2.5.2.33.3 Add Population Logic for the CMSP Failed to Provide SSN Reason Fragment

Populate the fragment as follows:

Variable	Description	Population
PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.33.4 Add Ordering Logic for the CMSP Failed to Provide SSN Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.33.5 Add Regulations for the CMSP Failed to Provide SSN Reason Fragment

Add the following regulations for the reason fragment: 3-037; 6-013

2.5.2.34 Add the CMSP Failed to Provide HIC Reason Fragment

Add the CMSP failed to provide HIC reason fragment.

Action Type: Denial

Fragment Level: Person

2.5.2.34.1 Add the CMSP Failed to Provide HIC Reason Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	<PersonName> or the person responsible for completing the application process in his/her behalf, did not provide his/her Medicare HIC number.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.5.2.34.2 Add Generation Logic for the CMSP Failed to Provide HIC Reason Fragment

Generate the reason fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Denied'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'FTP HIC #' on the CMSP budget.

2.5.2.34.3 Add Population Logic for the CMSP Failed to Provide HIC Reason Fragment

Populate the fragment as follows:

Variable	Description	Population

PersonName	The name of the person.	This variable will be populated with the name of the person who is being denied.

2.5.2.34.4 Add Ordering Logic for the CMSP Failed to Provide HIC Reason Fragment

The reason fragment will generate after the 'Here's why:' section of the action fragment.

2.5.2.34.5 Add Regulation for the CMSP Failed to Provide HIC Reason Fragment

Add the following regulation for the reason fragment: 6-013

2.6 Add CMSP Message Fragments

2.6.1 Overview

This section will describe the updates needed to add the CMSP message fragments to CalSAWS. It will add the message fragment XDPs, the generation and population logic for each message fragment.

Program(s): CMSP

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.6.2 Description of Change

2.6.2.1 Add the CMSP LTC Community Spouse Resource Allowance (CSRA) Property Message Fragment

Add the CMSP LTC CSRA property message fragment.

Action Type: Discontinuance

Fragment Level: Program

2.6.2.1.1 Add the CMSP LTC CSRA Property Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting

Static	You were notified on <InitialNoticeDate> that you must transfer <PropertyAmount> of the property owned by you alone or jointly by you and your spouse. You were to do this by <TransferDueDate> for you to remain eligible. The total net non-exempt property remaining in your name and in both spouses' names is <TotalPropertyAmount>. This exceeds property limits of <PropertyLimit> for one person.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.1.2 Add Generation Logic for CMSP LTC CSRA Property Message Fragment

Generate the message fragment on the NOA when all the following are true:

1. The person was receiving CMSP LTC aid code 8F.
2. The person has the status of 'Discontinued'.
3. In the prior EDBC, there is a waived CMSP property budget with the CSRA property limit.
4. In the current EDBC, there is failed CMSP property budget with the CSRA property limit.

2.6.2.1.3 Add Population Logic for the CMSP LTC CSRA Property Message Fragment

Populate the fragment as follows:

Variable	Description	Population
InitialNoticeDate	The date the individual was notified about CSRA.	The variable will be populated with the application date.
PropertyAmount	The property amount needed to be transferred.	The variable will be populated with the difference between the total property amount and the CSRA property limit.
TransferDueDate	The date when the individual needed to transfer the property over to the spouse.	The variable will be populated with application date plus 90 days.
TotalPropertyAmount	The total property amount.	The variable will be populated with the total property amount. The value can be found on the failed CMP property budget.

PropertyLimit	The CSRA property limit.	The variable will be populated with the CSRA property limit. The property limit can be found on the failed CMSP property budget.

2.6.2.1.4 Add Ordering Logic for the CMSP LTC CSRA Property Message Fragment

This message fragment will generate after all reason fragments, but before any other message fragments on the NOA.

2.6.2.2 Add the CMSP Continued LTC Eligibility Message Fragment

Add the CMSP Continued LTC Eligibility Message Fragment

Action Type: Approval

Fragment Level: Person

2.6.2.2.1 Add the CMSP Continued LTC Eligibility Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Your eligibility for these CMSP companion benefits may continue as long as you reside in the long term care facility. When you are discharged from the long term care facility you must notify your worker and/or apply for continuing health care under a different program. If you have a share-of-cost under the Medi-Cal Program for your long term care benefits, the same share-of -cost applies to the CMSP companion benefits. However, paying or obligating to pay your Share-of-Cost (SOC) to the long term care facility each month will satisfy the SOC requirements for both programs. If you do not already have one, a plastic benefits identification card will be mailed to you at the long term care facility.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.2.2 Add Generation Logic for CMSP Continued LTC Eligibility Message Fragment

Generate the message fragment on the NOA when there is a person approved for CMSP LTC.

2.6.2.2.3 Add Ordering Logic for the CMSP Continued LTC Eligibility Message Fragment

This message fragment will generate after the CMSP LTC approval action fragment.

2.6.2.3 Add the CMSP BIC Life Health Id Card Message Fragment

Add the CMSP BIC life health Id card message fragment.

Action Type: Approval

Fragment Level: Program

2.6.2.3.1 Add the CMSP BIC Life Health Id Card Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	You will receive your plastic Benefits Identification Card (BIC) soon. Do not throw this card away. This card is good as long as you are eligible for this program. Take this plastic card to a pharmacy, doctor, or other provider participating in the CMSP network administered by Advanced Medical Management for your healthcare services. Your BIC will show the provider if you have a share-of-cost to pay. The amount that you pay or obligate to pay healthcare provider(s) will be automatically computed. After your total monthly share-of-cost has been paid or obligated, you will not have to pay for covered healthcare services received that month from providers participating in the CMSP network administered by Advanced Medical Management. In addition to the plastic BIC as described above, you will soon receive a CMSP identification card. You should present this card along with the BIC to your provider when obtaining services, including medications.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.3.2 Add Generation Logic for CMSP BIC Life Health Id Card Message Fragment

Generate the message fragment on the NOA when the NOA is an approval NOA, the person is approved for CMSP benefits, and the benefit month is not a retroactive month.

2.6.2.3.3 Add Ordering Logic for the CMSP BIC Life Health Id Card Message Fragment

This message fragment will generate after the action fragments and any person level messages that directly follow an action fragment.

2.6.2.4 Add the CMSP Death Burial Benefits Message Fragment

Add the CMSP death burial benefits message fragment.

Action Type: Discontinuance

Fragment Level: Person

2.6.2.4.1 Add the CMSP Death Burial Benefits Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Also for your information, there are no special death or burial benefits provided under the CMSP.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.4.2 Add Generation Logic for CMSP Death Burial Benefits Message Fragment

Generate the message fragment on the NOA when the NOA is a discontinuance NOA, the person was receiving CMSP aid, but is discontinued for reason of 'Deceased'.

2.6.2.4.3 Add Ordering Logic for the CMSP Death Burial Benefits Message Fragment

This message fragment will generate right after the CMSP deceased reason fragment (defined in **Section 2.5.2.23**).

2.6.2.4.4 Add Regulation for the CMSP Death Burial Benefits Message Fragment

Add the following regulation for the message fragment: 3-031

2.6.2.5 Add the CMSP Denial for Emergency Approval Message Fragment

Add the CMSP denial for emergency approval message fragment.

Action Type: Approval

Fragment Level: Person

2.6.2.5.1 Add the CMSP Denial for Emergency Approval Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Your application for full CMSP benefits is denied. We have granted you, instead, eligibility for emergency medical treatment.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.5.2 Add Generation Logic for the CMSP Denial for Emergency Approval Message Fragment

Generate the message fragment on the NOA when a person is approved for restricted CMSP benefits.

2.6.2.5.3 Add Ordering Logic for the CMSP Denial for Emergency Approval Message Fragment

This message fragment will generate after CMSP emergency medical condition message fragment (defined in **Section 2.6.2.8**).

2.6.2.5.4 Add Regulations for the CMSP Denial for Emergency Approval Message Fragment

Add the following regulations for the message fragment: 3-028; 5-016; 11-011

2.6.2.6 Add the CMSP Additional Facts Discontinuance Message Fragment

Add the CMSP additional facts discontinuance message fragment.

Action Type: Discontinuance

Fragment Level: Program

2.6.2.6.1 Add the CMSP Additional Facts Discontinuance Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting

Static	**If you have any questions about this action, or if there are additional facts relating to your circumstances which you have not reported to us, please write or telephone. We will answer your questions or make an appointment to see you in person. Please remember that this action pertains only to the circumstances you reported to us and that you may reapply at any time.**	Arial Font Size 10, Bolded

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.6.2 Add Generation Logic for the CMSP Additional Facts Discontinuance Message Fragment

Generate the message fragment on the NOA when the person is discontinued for CMSP aid.

2.6.2.6.3 Add Ordering Logic for the CMSP Additional Facts Discontinuance Message Fragment

This message fragment will generate right after CMSP discontinuance reason(s).

2.6.2.6.4 Add Regulation for the CMSP Additional Facts Discontinuance Message Fragment

Add the following regulation for the message fragment: 3-038

2.6.2.7 Add the CMSP Eligibility Length Message Fragment

Add the CMSP eligibility length message fragment.

Action Type: Approval

Fragment Level: Program

2.6.2.7.1 Add the CMSP Eligibility Length Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	CMSP eligibility is limited to individuals aged 21 through 64 years. **CMSP limits the length of your eligibility. You will automatically be discontinued from CMSP at the end of the last month stated above.**	Arial Font Size 10

	If you continue to need aid after the date of discontinuance, you can reapply during your last month of eligibility. Please do not reapply sooner. You may reapply online at www.c4yourself.com, by mail or in person.	

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.7.2 Add Generation Logic for the CMSP Eligibility Length Message Fragment

Generate the message fragment on the NOA when the NOA that generates is an approval NOA and the person is approved for non-LTC CMSP benefits.

2.6.2.7.3 Add Ordering Logic for the CMSP Eligibility Length Message Fragment

This message fragment will generate after CMSP action fragments.

2.6.2.8 Add the CMSP Emergency Medical Condition Message Fragment

Add the CMSP emergency medical condition message fragment.

Action Type: Approval

Fragment Level: Program

2.6.2.8.1 Add the CMSP Emergency Medical Condition Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	An emergency medical condition means: a medical condition manifesting itself by acute symptoms of recent onset and sufficient severity (including without limitation severe pain) such that a prudent layperson, possessing an average knowledge of health and medicine, could reasonably believe that the absence of immediate medical attention could reasonably result in: placing the member's health in jeopardy; serious impairment to bodily function other serious medical consequences or serious and /or permanent dysfunction to any bodily organ or part. The CMSP Governing Board may review the provider's decision that an emergency service was required.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.8.2 Add Generation Logic for the CMSP Emergency Medical Condition Message Fragment

Generate the message fragment on the NOA when the person is approved for CMSP restricted aid code 50.

2.6.2.8.3 Add Ordering Logic for the CMSP Emergency Medical Condition Message Fragment

This message fragment will generate right after CMSP certification period action fragment (defined in **Section 2.4.2.1**).

2.6.2.8.4 Add Regulations for the CMSP Emergency Medical Condition Message Fragment

Add the following regulations for the message fragment: 1-101; 1-045

2.6.2.9 Add the CMSP Non-Citizen Message Fragment

Add the CMSP non-citizen message fragment.

Action Type: Approval

Fragment Level: Program

2.6.2.9.1 Add the CMSP Non-Citizen Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	We are taking this action because you are a non-citizen who (one of the following reasons applies): • Does not have satisfactory immigration status according to information received from the U.S. Citizenship and Immigration Services (USCIS). • Lacks documentary proof of satisfactory immigration status for CMSP purposes. • Has been admitted to the United States as a nonimmigrant for a limited period of time.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.9.2 Add Generation Logic for the CMSP Non-Citizen Message Fragment

Generate the message fragment on the NOA when the person is approved for CMSP restricted aid code 50.

2.6.2.9.3 Add Ordering Logic for the CMSP Non-Citizen Message Fragment

This message fragment will generate right after CMSP denial for emergency approval message fragment (defined in **Section 2.6.2.5**).

2.6.2.9.4 Add Regulations for the CMSP Non-Citizen Message Fragment

Add the following regulations for the message fragment: 1-102; 1-109; 5-016

2.6.2.10 Add the CMSP Don't Throw Away BIC Message Fragment

Add the CMSP don't throw away BIC message fragment.

Action Type: Approval, Denial, Discontinuance

Fragment Level: Program

2.6.2.10.1 Add the CMSP Don't Throw Away BIC Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	Do not throw your plastic ID card away. You can use it again if you become eligible for CMSP or Medi-Cal.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.10.2 Add Generation Logic for the CMSP Don't Throw Away BIC Message Fragment

Generate the message fragment on the NOA when the person one of the following is true:

1. The person is approved for CMSP benefits.
2. The person is a CMSP applicant and denied for CMSP.
3. The person is discontinued from CMSP aid.

2.6.2.10.3 Add Ordering Logic for the CMSP Don't Throw Away BIC Message Fragment

This message fragment will generate after any action fragments and, if applicable, any reason fragments.

2.6.2.10.4 Add Regulations for the CMSP Don't Throw Away BIC Message Fragment

Add the following regulations for the message fragment: 1-024; 12-010; 12-015

2.6.2.11 Add the CMSP Exceeded FPL Message Fragment

Add the CMSP exceeded FPL message fragment.

NOTE: Currently in C-IV, this is called the Exceeded 200 FPL message fragment (MSG_EXCEEDED_200_FPL). The name will be updated to not reference any percentages so that the fragment name and the content will not be mis-matched in the future.

Action Type: Approval

Fragment Level: Person

2.6.2.11.1 Add the CMSP Exceeded FPL Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	*If this information indicates you are not eligible for a particular month, it was because your Net Nonexempt Income exceeded 300% of the Federal Poverty Level (FPL).	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.11.2 Add Generation Logic for the CMSP Exceeded FPL Message Fragment

Generate the message fragment on the NOA when CMSP Non-Federal budget fragment (defined in **Section 2.7.2.1)** is on the NOA.

2.6.2.11.3 Add Ordering Logic for the CMSP Exceeded FPL Message Fragment

This message fragment will generate right after the CMSP Non-Federal budget fragment. If there are multiple budget fragments on the NOA, it will generate after all the budget fragments.

2.6.2.12 Add the CMSP LTC Companion Explanation Message Fragment

Add the CMSP LTC companion explanation message fragment.

Action Type: Discontinuance

Fragment Level: Person

2.6.2.12.1 Add the CMSP LTC Companion Explanation Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting

Static	These companion benefits were for inpatient acute care services only while you were in the long term care facility.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.12.2 Add Generation Logic for the CMSP LTC Companion Explanation Message Fragment

Generate the message fragment on the NOA when the person is discontinued from CMSP and the person was receiving a CMSP LTC aid code.

2.6.2.12.3 Add Ordering Logic for the CMSP LTC Companion Explanation Message Fragment

This message fragment will generate after any reason fragments.

2.6.2.12.4 Add Regulations for the CMSP LTC Companion Explanation Message Fragment

Add the following regulations for the message fragment: 3-016; 11-011

2.6.2.13 Add the CMSP LTC Reapply Message Fragment

Add the CMSP LTC reapply message fragment.

Action Type: Discontinuance

Fragment Level: Person

2.6.2.13.1 Add the CMSP LTC Reapply Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	If you have a continuing need for health care services, you must submit an application to your county department of social services. If you have a disability that continues after your release from the long term care facility, you may qualify for Medi-Cal benefits. Please contact your county department of social services.	Arial Font Size 10

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.13.2 Add Generation Logic for the CMSP LTC Reapply Message Fragment

Generate the message fragment on the NOA when a person is a CMSP applicant and all the following is true:

1. The status of the person is 'Discontinued'.
2. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
3. The person is on the CMSP Income budget.
4. The person has a Role Reason of 'Did not Reapply after LTC' on the CMSP budget.

2.6.2.13.3 Add Ordering Logic for the CMSP LTC Reapply Message Fragment

This message fragment will generate right after CMSP LTC reapply reason fragment (defined in **Section 2.5.2.21**).

2.6.2.13.4 Add Regulations for the CMSP LTC Reapply Message Fragment

Add the following regulations for the message fragment: 11-011

2.6.2.14 Add the CMSP Write or Call About an Action Message Fragment

Add the CMSP write or call about an action message fragment.

Action Type: Discontinuance

Fragment Level: Person

2.6.2.14.1 Add the CMSP Write or Call About an Action Message Fragment

The fragment will have the following verbiage:

Description	Text	Formatting
Static	**If there are any questions about this action, please write or telephone. We will answer your questions or make an appointment to see you in person.**	Arial Font Size 10, Bolded

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.6.2.14.2 Add Generation Logic for the CMSP LTC Reapply Message Fragment

Generate the message fragment on the NOA when the NOA is a discontinuance NOA, the person was receiving CMSP aid, but is discontinued for reason of 'Deceased'.

2.6.2.14.3 Add Ordering Logic for the CMSP Write or Call About an Action Message Fragment

This message fragment will generate right after the CMSP death burial benefits message fragment (defined in **Section 2.6.2.4).**

2.6.2.14.4 Add Regulations for the CMSP Write or Call About an Action Message Fragment

Add the following regulations for the message fragment: 3-038

2.7 Add CMSP Budget Fragment

2.7.1 Overview

This section will describe the updates needed to add the CMSP budget fragment to CalSAWS. It will add the budget fragment XDP, the generation and population logic for each budget fragment.

Program(s): CMSP

Languages:

English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

2.7.2 Description of Change

2.7.2.1 Add the CMSP Budget Fragment

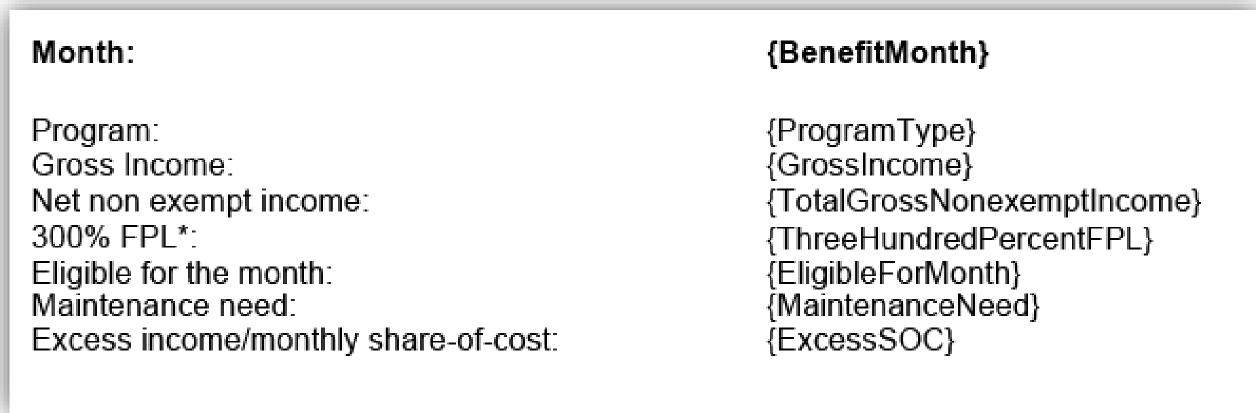
Add the CMSP budget fragment.

Action Type: Approval, Denial

Fragment Level: Person

2.7.2.1.1 Add the CMSP Budget Fragment

The fragment will have the following verbiage:



Month:	**{BenefitMonth}**
Program:	{ProgramType}
Gross Income:	{GrossIncome}
Net non exempt income:	{TotalGrossNonexemptIncome}
300% FPL*:	{ThreeHundredPercentFPL}
Eligible for the month:	{EligibleForMonth}
Maintenance need:	{MaintenanceNeed}
Excess income/monthly share-of-cost:	{ExcessSOC}

Note: Formatting is for English only, Spanish and threshold will generate based on project standards for that language.

2.7.2.1.2 Add Generation Logic for the CMSP Budget Fragment

Generate the budget fragment when all the following is true:

1. The program is Medi-Cal.
2. The NOA type is a CMSP approval NOA.
3. The benefit month is either a retroactive month or a non-retroactive month.
4. The person is approved for a non-LTC CMSP aid code.

<u>**OR**</u>

Generate the budget fragment when all the following is true:

5. The program is Medi-Cal.
6. The NOA type is a CMSP denial NOA.
7. The benefit month is a non-retroactive month.
8. The status of the person is 'Denied'.
9. There is a budget on the EDBC with the Medi-Cal Test Type of CMSP Income.
10. The person is on the CMSP Income budget.
11. The person has a Role Reason of 'Over Income'.

2.7.2.1.3 Add Population Logic for the CMSP Budget Fragment

Variable	Description	Population
BenefitMonth	The benefit month.	The variable will be populated with the benefit month(s). Refer to the examples below on how the variable will be populated.
ProgramType	The program type.	The variable will be populated with 'CMSP'.

GrossIncome	The gross income.	The variable will be populated with the sum of the unearned and earned income. The incomes can be on the CMSP budget.
TotalGross NonexemptIncome	The total gross non-exempt income.	The variable will be populated with the total gross non-exempt income. The income can be found on the CMSP budget.
ThreeHundred PercentFPL	The 300% FPL limit.	The variable will be populated with the 300% FPL limit. The value can be found using a lookup on the codes table.
EligibleForMonth	The person's eligibility for the month.	The variable will be populated with 'Yes' if the person's role on the CMSP budget is Member. If it is not, then it will be populated with 'No'.
MaintenanceNeed	The maintenance need.	The variable will be populated with the maintenance need. The value can be found using a lookup on the code tables.
ExcessSOC	The excess share of cost.	The variable will be populated with the share of cost. The share of cost can be found on the CMSP budget.

Example #1 – The BDA is the same month as the CDM

The person has a BDA of 10/01/2019. The CDM is the same month as the BDA. The user runs the EDBC for the BDA. The person is approved for CMSP benefits. The CMSP approval NOA generates after the EDBC is run. On the approval NOA, there is only one CMSP budget. The benefit month variable will be populated with the CDM and the CED. For example, if the CED is 03/2019, the variable will say '10/2019 – 03/2019'.

Example #2 – The CDM is the month following the BDA

The person has a BDA of 10/01/2019. The CDM is the following month (11/2019). The user runs the EDBC for the BDA. Then, the user runs the EDBC for the CDM. The person is approved for CMSP benefits. The CMSP approval NOA generates after the EDBC is run. On the approval NOA, there are two CMSP budgets. On the first CMSP budget, the benefit month variable is populated with the BDA, 10/2019. On the second CMSP budget, the benefit month variable is populated with the CDM and the CED. For example, if the CED is 03/2019, the variable will say '11/2019 – 03/2019'.

Example #3 – The CDM is two months after the BDA

The person has a BDA of 10/01/2019. The CDM is two months after the BDA (12/2019). The user runs the EDBC for the BDA. Then, the user runs the EDBC for the second month. The user then runs the EDBC for the CDM. The person is approved for CMSP benefits. The CMSP approval NOA generates after the EDBC is run. On the approval NOA, there are three CMSP budgets. On the first CMSP budget, the benefit month variable is populated with the BDA, 10/2019. On the second CMSP budget, the benefit month variable is populated with second month. In this example, the variable will be populated with 11/2019. On the last CMSP budget, the benefit month variable will be populated with the CDM and the CED. For example, if the CED is 03/2019, the variable will say '12/2019 – 03/2019'.

Example #4 – The benefit month is a retroactive month

The person has a BDA of 10/01/2019. The person has requested a retroactive month. The user adds a retro month for 09/2019. The user runs the EDBC for 09/2019 benefit month. The person is approved for retroactive CMSP and the CMSP retro approval NOA generates after running the EDBC. On the retro approval NOA, there is one CMSP budget. The benefit month variable is populated with the retroactive month (09/2019).

2.7.2.1.4 Add Ordering Logic for the CMSP Budget Fragment

The budget fragment will generate on the approval NOA right after the CMSP certification period action fragment (defined in **Section 2.4.2.2**). If there are multiple budget fragments, the budgets will follow each other sequentially, starting with the earliest benefit month.

If the NOA is a denial NOA, the budget fragment will generate on the denial NOA right after the CMSP FPL exceeded income reason fragment (defined in **Section 2.5.2.3**).

2.7.2.1.5 Add Regulations for the CMSP Budget Fragment

Add the following regulations for the budget fragment: 8-011; 8-012; 8-013; 8-014; 8-023; 8-045; 8-053; Article 9; 10-012

2.8 Add the Fragment in Threshold Languages

2.8.1 Overview

This section will describe the necessary changes to allow the generation of the CMSP NOAs in the different threshold languages. The update will require values to be added to the code tables to turn on the language switches for all CMSP fragments.

2.8.2 Description of Change

Add values to the code tables for each CMSP fragment to allow them to generate in the following languages: English, Spanish, Armenian, Arabic, Cambodian, Chinese*, Farsi, Tagalog/Filipino, Hmong, Korean, Lao, Russian, Vietnamese.

**One translation is provided to support the three Chinese threshold languages: Cantonese, Chinese and Mandarin.*

3 SUPPORTING DOCUMENTS

Note: The examples below show how the CMSP NOAs currently generate in the C-IV system. The examples give a reference on where the action, reason, message, and budget fragments will generate on the NOA. When the functionality is migrated to CalSAWS, the CMSP NOAs will generate with the standard header and footer and follow the placement of the recipient's address.

Number	Functional Area	Description	Attachment
1	Client Correspondence	CMSP Approval Example	CMSP Approval.pdf
2	Client Correspondence	CMSP Denial Example	CMSP Denial.pdf
3	Client Correspondence	CMSP Discontinuance Example	CMSP Discontinuance.pdf
4	Client Correspondence	CMSP Retro Approval Example	CMSP Retro Approval.pdf
5	Client Correspondence	CMSP Retro Denial Example	CMSP Retro Denial.pdf
6	Client Correspondence	CMSP Retro Approval and Denial Example	CMSP Retro Approval and Denial.pdf
7	Client Correspondence	LTC CMSP Approval Example	LTC CMSP Approval.pdf
8	Client Correspondence	LTC CMSP Retro Approval Example	LTC CMSP Retro Approval.pdf
9	Client Correspondence	CMSP NOA Titles	CMSP NOA Titles.xlsx
10	Client Correspondence	CMSP Action Fragments in English, Spanish and Threshold Languages	CMSP Action Fragments.pdf
11	Client Correspondence	CMSP Reason Fragments in English, Spanish and Threshold Languages	CMSP Reason Fragments.pdf
12	Client Correspondence	CMSP Message Fragments in English, Spanish and Threshold Languages	CMSP Message Fragments.pdf
13	Client Correspondence	CMSP Budget Fragment in English, Spanish and Threshold Languages	CMSP Budget Fragments.pdf

14	Client Correspondence	CMSP Legal Section in English, Spanish and Threshold Languages	CMSP Legal Section Fragments.pdf
15	Client Correspondence	CMSP Regulation Fragment in English, Spanish and Threshold Languages	CMSP Regulation Fragments.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1062	The CONTRACTOR shall add the CMSP program specific fragments as part of Migration.	**Original:** • 81 CMSP NOA Fragments will be migrated. Any new CMSP NOA fragments added to the system post July of 2018 will be estimated by the CONTRACTOR and submitted to the CONSORTIUM for approval and to determine the appropriate method of funding the work. • Refer to attachment for an inventory listing of the C-IV CMSP NOA Fragments as of July 2018. **Revised:** • 62 CMSP NOA Fragments will be migrated.	The CMSP fragments, generation and population logic is added.
1063	The CONTRACTOR shall update existing NOAs that are specific to C-IV county programs (e.g., CMSP) to align with the existing LRS address placement on all NOAs which will appear on the right hand side.	• Counties will need to procure new envelope stock (for their offices) required to disseminate NOAs generated out of the CalSAWS printed locally. • Counties will need to have a plan in place to maintain current envelope stock (recommended 3-month period post migration go-live) to support NOA local reprints of NOAs generated with the legacy C-IV and CalWIN address placement.	The CMSP template has been modified to align the address placement with LRS
1066	The CONTRACTOR shall update the system to generate the appropriate translated NOA fragments.	• There will be a single set of NOAs. The LRS NOAs at the time of County go-live will be used by all 58 counties and accepted as is. In the event that NOA changes are requested they will be estimated by the CONTRACTOR and submitted to the CONSORTIUM for approval and to determine the appropriate method of funding the work.	Added the functionality to generate the CMSP NOAs in the different threshold languages.

		• The C-IV and CalWIN counties will accept Los Angeles County substitutes where they provide additional information to the recipient. If the substitutes include data fields that C-IV and/or CalWIN counties do not use, those fields will be blank on the NOA. • There are 13,963 LRS NOA fragment translations required, as of July 2018. • The 13 threshold languages are: - Arabic - Armenian - Cambodian - Cantonese (Chinese) - Farsi - Hmong - Korean - Lao - Mandarin (Chinese) - Other Chinese Language - Russian - Tagalog/Filipino - Vietnamese	
1172	The CONTRACTOR shall migrate the value of "Failure to Enroll/Pay APTC Premiums" in the "Reason" dropdown on the Eligibility Non-Compliance Detail page when Non Payment of Premium is selected as a Type and Medi-Cal is selected as the Program.	N/A	The non-compliance reason was added with CA-207235. The CMSP NOA that generates because of the non-compliance is added as part of this change request.
1240	The CONTRACTOR shall migrate "Gets APTC" in the "Negative Action Reason" field on	The following changes will also be required to facilitate the new negative action reason: - Add eligibility rules to leave the person or program pending when the person is	The negative action reason was added with CA-207235. The CMSP NOA that generates

	Negative Action Detail page.	Pending Eligible on the corresponding MAGI determination and running negative action with a reason of "Gets APTC (CMSP)". - Add logic for a new denial discontinuance NOA for "Gets APTC (CMSP)". - Add a new denial discontinuance NOA for "Gets APTC (CMSP)" based on existing C-IV NOA fragment. CalSAWS will utilize the existing C-IV functionality.	because of the negative action is added as part of this change request.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207444 | DDID 525, 2277

Update the Special Investigation pages

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Kim Lam
	Reviewed By	Melissa Mendoza, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/21/2019	1.0	Initial Document	Kim Lam

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1 OVERVIEW

This SCR will make updates to the Special Investigation Detail page and the Special Investigation Referral pages as part of the migration effort to support all 58 counties.

1.1 Current Design

In CalSAWS, when a case number is selected, the Special Investigation Detail page does not pre-populate the following fields for the Primary Applicant:

- Phone number
- Email address
- Physical Address
- Mailing Address

In CalSAWS, on the Special Investigation Detail page and the Special Investigation Referral page, the “Allegation” dropdown field has values (many with acronyms) that are specific to Los Angeles County.

1.2 Requests

1. Per DDID 525, update the values in the "Allegation" dropdown field on the Special Investigation Detail page and Special Investigation Referral page to be more generic in order to support all 58 Counties.
2. Per DDID 2277, update the fraud investigation tracking functionality to pre-populate as many investigation fields as possible with data from the case to be investigated when a new investigation is created.

1.3 Overview of Recommendations

1. Pre-populate fields on the Special Investigation Detail page for the Primary Applicant.
2. On both the Special Investigation Detail page and the Special Investigation Referral page, update the “Allegation” dropdown values.

1.4 Assumptions

N/A

2 RECOMMENDATIONS

2.1 Special Investigation Detail

2.1.1 Overview

The Special Investigation Detail page will be updated with pre-populated fields and updated values for the "Allegation" field.

2.1.2 Special Investigation Detail Mockup

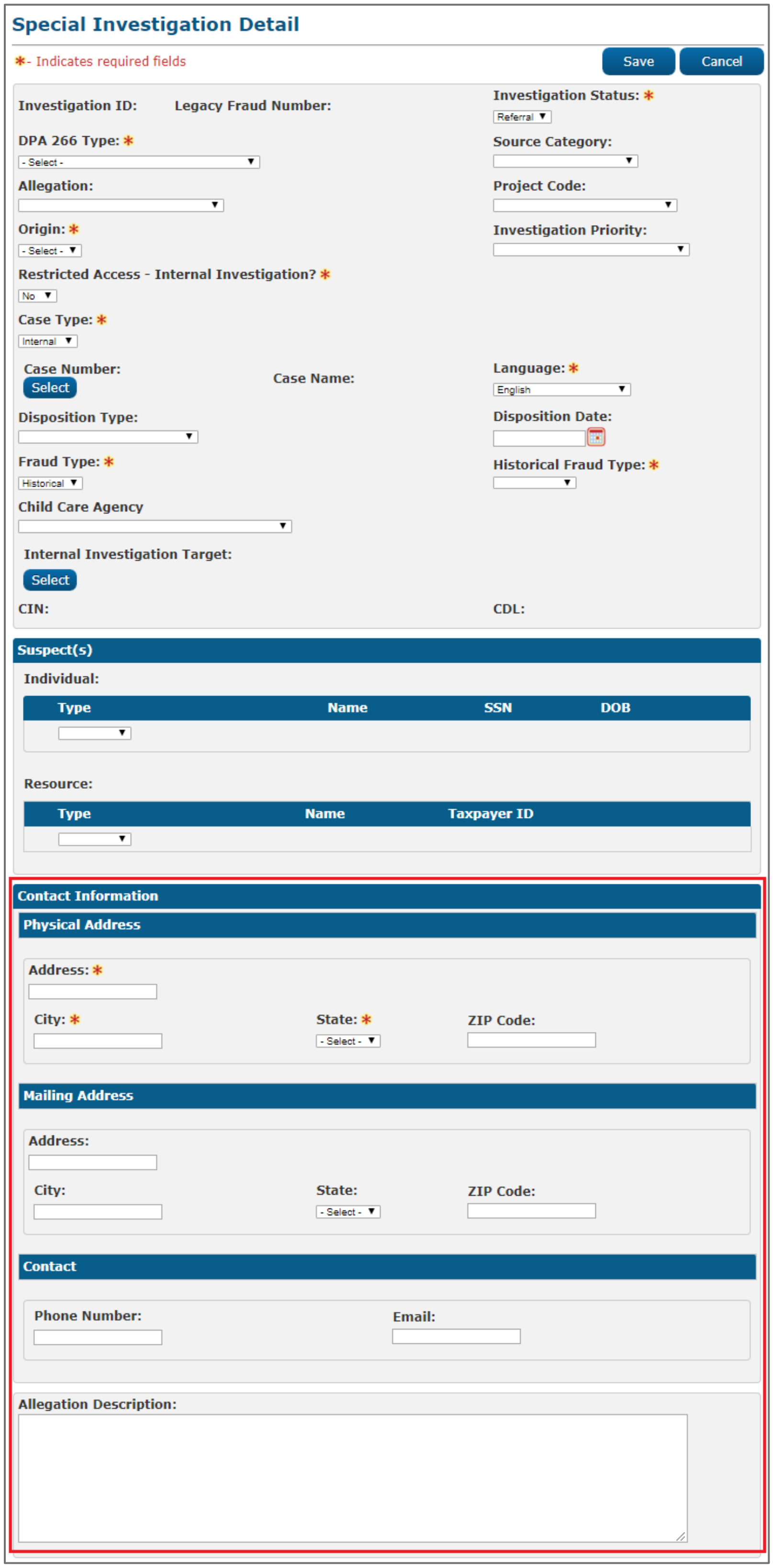

Figure 2.1.1 – Special Investigation Detail page mockup

2.1.3 Description of Changes

On the Special Investigation Detail page:

1. Rename "Address" header to "Physical Address".
    a. Note: Special Investigation records created prior to the implementation of this SCR should have the Address section relabeled to Physical Address.
2. Pre-populate the following fields on the Special Investigation Detail page once the case number and/or Primary Applicant has been selected, if the values are available in the database. The prepopulation logic should be bypassed if there are manual overrides from the user during "Edit" mode.
    a. Physical Address
        i. The section "Physical Address" has the following fields:
            1. Address
            2. City
            3. State
            4. Zip Code
    b. Phone Number
        i. Check database to bring in phone number using the following hierarchy:
            1. Home
            2. Cell
            3. Main
            4. The remaining in any order.
    c. Email Address
        i. Create new field titled "Email"
    d. Mailing Address
        i. Create new subsection titled "Mailing Address" with the following fields:
            1. Address
            2. City
            3. State
            4. Zip Code

Note: If a case number and/or Primary Applicant is not selected then all the fields above should remain open entry fields.

On both the Special Investigation Detail and Special Investigation Referral page:

3. Update the "Allegation" dropdown field with new values below. If there does not exist a new value for the corresponding current value, then the current value remains the same.

a. Remove the highlighted values "HH-Other" and "NEI-Other" . Note that these values will not appear in the dropdown for new records but will remain for existing records.
b. Re-alphabetize the updated list

	Current Values	New Values
1	AU composition	
2	Address Match	
3	Attempted fraud only	
4	Child Care Stage 2	
5	Child Care Stage 3	
6	Children with near Birthday	
7	DA-False ID On One Or More Cases	False ID On One Or More Cases
8	DA-No ID On One Or More Cases	No ID On One Or More Cases
9	DA-True ID On More Than One Case	True ID On More Than One Case
10	DE-Absent Parent In The Home	Absent Parent In The Home
11	DE-Other Lack Of Deprivation	Other Lack Of Deprivation
12	DE-PWE Employed Full Time	PWE Employed Full Time
13	DE-PWE No Longer Incapacitated	PWE No Longer Incapacitated
14	DMV Matches	
15	Data Mining Referral	
16	Duplicate/Multiple Aid	
17	EB-Resides Out of LA County	Resides Out of County
18	EB-Resides Outside of State	Resides Outside of State
19	EB-Whereabouts Unknown	Whereabouts Unknown
20	EI-DPSS Employee	Social Services Employee
21	EI-Non-County Employee	Non-County Employee
22	EI-Other LA CO Employee	Other County Employee
23	Forgeries	

	Current Values	New Values
24	GA-1st Sanction	WTW 1st Sanction
25	GA-2nd Sanction	WTW 2nd Sanction
26	GA-3rd Sanction	WTW 3rd Sanction
27	GA-Case Study (sanction)	WTW Case Study (sanction)
28	GA-Child Care - Stage 1	WTW Child Care - Stage 1
29	Gain	WTW
30	HH-Aided Child Ineligible	Aided Child Ineligible
31	HH-Aided Child Not In Home	Aided Child Not In Home
32	HH-Aided Parent Ineligible	Aided Parent Ineligible
33	HH-Aided Parent Not In Home	Aided Parent Not In Home
34	HH-Other	[Remove]
35	HH-Other Aided Adult Ineligible	Other Aided Adult Ineligible
36	HH-Other Needy Caretaker Ineligible	Other Needy Caretaker Ineligible
37	Invalid Social Security Numbers	
38	MF-Homeless Fraud	Homeless Fraud
39	MF-Other Misuse Of Funds	Other Misuse Of Funds
40	MF-Other Unaided Illegal Alien In H	Other Unaided Illegal Alien In H
41	MF-UAM In Home, Not Contributing	UAM In Home, Not Contributing
42	MF-Unaided Child in Home/No Income	Unaided Child in Home/No Income
43	MF-Unaided Illegal Alien Parent/Home	Unaided Illegal Alien Parent/Home
44	MF-Unaided Stepparent/Home/No Contr	Unaided Stepparent/Home/No Contr
45	Misuse of funds	
46	Multiple case fraud	
47	NEI-Child Support	Child Support
48	NEI-Disability Insurance	Disability Insurance

	Current Values	New Values
49	NEI-In Kind Income	In Kind Income
50	NEI-Other	[Remove]
51	NEI-RSDHI	Retirement Survivors Disability and Health Insurance
52	NEI-Room and Board	Room and Board
53	NEI-SSI/SSP	SSI/SSP
54	NEI-UIB	UIB
55	NEI-Veterans Benefits	Veterans Benefits
56	NEI-Workers Compensation	Workers Compensation
57	No deprivation	
58	OT-Deceased IHSS Provider	Deceased IHSS Provider
59	OT-Deceased IHSS Recipient	Deceased IHSS Recipient
60	OT-Not a State/County Resident	Not a State/County Resident
61	Other	
62	Provider Site Visit	
63	RE-Other Personal Property	Other Personal Property
64	RE-Unreported Liquid Assets	Unreported Liquid Assets
65	RE-Unreported Motor Vehicle	Unreported Motor Vehicle
66	RE-Unreported Real Property	Unreported Real Property
67	Residence	
68	SS Numb.Issued prior to BDay	
69	Social Security not yet Issued	
70	Transportation	
71	Unreported earnings	
72	Unreported non-earned income	
73	Unreported personal property	
74	Unreported real property	

2.1.4 Page Location

2.1.4.1 Special Investigation Detail

- **Global:** Special Units
- **Local:** Special Investigations
- **Task:** Special Investigation Search → Add Special Investigation → Special Investigation Detail

2.1.4.2 Special Investigation Referral

- **Global:** Special Units
- **Local:** Special Investigation Referral

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Updated page mapping for new/modified fields on Special Investigation Detail.

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
525	**Original:** The CONTRACTOR shall update the values in the "Allegation" dropdown field on the Special Investigation Detail page to be more generic in order to support all 58 Counties: 1) Data Mining Referral 2) EI-Other LA CO Employee 3) EI-DPSS Employee 4) EB-Resides Out of LA County 5) NEI-RSHDI **Revised:** The CONTRACTOR shall update the values in the "Allegation" dropdown field on the Special Investigation Detail page and the Special Investigation Referral page to be more generic in order to support all 58 Counties.	The exact verbiage for the renaming of the allegation drop down values will be defined during the Migration design phase. There are no other functional areas in the system that require the "Allegation" field to be mandatory.	The “Allegation” dropdown field has been updated with values defined during the Migration design phase.

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2277	**Original:** The CONTRACTOR shall update the fraud investigation tracking functionality to pre-populate as many investigation fields as possible with data from the case to be investigated when a new investigation is created. **Revised:** The CONTRACTOR shall update the fraud investigation tracking functionality to pre-populate the contact information fields with data from the case to be investigated when a new investigation is created.	• Data will be pulled into the Special Investigation Detail Page by selecting an existing case. • No more than 5 new fields will be added to the Special Investigation Detail Page.	The Special Investigation Detail page has been updated with new fields that pre-populate values from the database based on committee input.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA–207463 | DDID 374

Enhancements to Homeless Assistance Functionality in CalSAWS

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Duke Vang, S Meenavalli, Rainier Dela Cruz, Yale Yee
	Reviewed By	Girish Chakkingal, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
9/4/2019	1.0	Initial Revision	Duke Vang
12/17/2019	1.1	Added EDBC sections	Yale Yee
01/02/2020	1.2	Added the child page hyperlink for Past Due Rent	S Meenavalli
1/13/2020	1.3	Updates from QA comments	Duke Vang
1/28/2020	1.4	Updates with comments for DEL review	Duke Vang

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1 OVERVIEW

The purpose of this design is to update the Homeless Assistance (HA) program to allow more flexibility in the issuing of HA benefits to Customers and Vendors.

1.1 Current Design

In CalSAWS, HA benefits are authorized through Eligibility Determination and Benefits Calculations (EDBC).

Note: For the purposes of this design, HA refers to both Homeless Temporary (HT) and Homeless Permanent (HP).

1.2 Requests

Per Design Differences ID (DDID) 374, the following HA updates to the CalSAWS System were requested:

- Add the ability to evaluate that the total monthly household income (TMHI) is at or below the approved State Standard percentage (currently 80%) and the rent amount should be broken out month by month for 2 months separately for each month on the Expense Detail page for the Expense Category and Expense Type below:
  - Shelter
    - Homeless-Past Due Rent
- Add Money Management functionality to HA in order to:
  - Issue single party checks to vendors without the Payee/Case name (e.g., landlord, hotel, utility company).
  - Split Utility Payments.
  - Issue the remainder amount of an HT payment to the Customer when hotel cost is less than the amount issued.
- Add the ability to issue vouchers for HA Supportive Services.

1.3 Overview of Recommendations

1. Update Past Due Rent to be broken-out month-by-month for 2 months separately on the data collection Expense Amount Detail page under the Expense Category "Shelter" and Expense Type "Homeless-Past Due Rent".
    a. First Month Back Rent
    b. Second Month Back Rent
2. Update the Past Due Rent EDBC rules to evaluate the First Month and Second Month amounts separately entered in the Expense Amount Detail page to account for 80% of TMHI.
3. The Money Management List page will be updated to allow HP and HT as programs under the Program dropdown list.
4. Allow Vouchers to be issued under Money Management for counties that allow Vouchers to be issued for HP or HT.

5. Update HP and HT EDBC pages to account for Money Management and Vouchers. When issuing a Money Management payment as a Voucher, the Worker must create a Need and Service Arrangement for the HP or HT program to issue the Voucher. When the Voucher is redeemed by the Vendor, the Worker must enter the redeemed amount into the Payment Amount Used by EDBC page.
6. Add a new Homeless Permanent (HP) Denial Notice of Action (NOA) when the HP program is denied due to the monthly back rent amount being greater than 80% of the household's monthly income.
7. Generate a list of Pending and Active HP cases for Los Angeles County.

1.4 Assumptions

1. The primary HA benefits are authorized through EDBC.
2. Per the CalWORKs and CalFresh Committee meeting on 9/25/2019, the Money Management functionality will address the following requirements:
    a. Add the ability to issue single party checks to vendors without the Payee/Case name (e.g., landlord, hotel, utility company).
    b. Add the ability to split Utility Payments.
    c. Add the ability to issue the remainder amount of an HT payment to the Customer when hotel cost is less than the amount issued.
3. Per the CalWORKs and CalFresh Committee meeting on 11/19/2019, the existing HT functionality in CalSAWS will address the following requirement:
    a. Add the ability to issue multiple payments on different dates.
4. DDID 368 (Add Homeless Customer Need Types) and DDID 1387 (Make Voucher a Non-Mandatory Field on Service Arrangement) will allow Vouchers to be issued via Service Arrangement for HA. These DDIDs will address the following requirement:
    a. Add the ability to issue vouchers for HA Supportive Services
5. DDID 1327 will be adding the Voucher Valuable Category for the Migration Counties. Counties that do not opt for a Voucher Valuable Category will not be able to issue Vouchers for HA.
6. Voucher Valuable Type data will need to be scripted for Vouchers in order to test the HA Voucher functionality.
7. Legacy HP programs with Past Due Rent expenses will not convert into the new First Month and Second Month Past Due Rent data collection. Viewing historical HP EDBCs may display blank as the First Month Past Due and Second Month Past Due for the new EDBC Homeless Past Due Rent page.
8. The Los Angeles County General Assistance/General Relief (GR) Money Management functionality will not be impacted by this DDID.
9. There are no changes to Supervisor Authorization functionality with this SCR.

2 RECOMMENDATIONS

2.1 Money Management List

2.1.1 Overview

The Money Management List page will be updated to allow HP and HT as values under the Programs dropdown list.

2.1.2 Money Management List Mockup

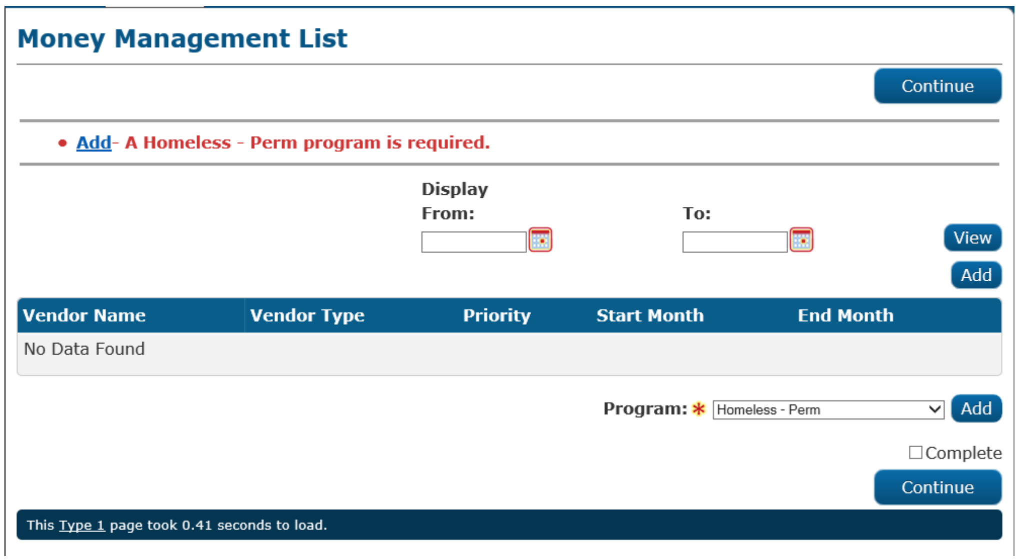

Figure 2.1.1 – Money Management List Validation 1

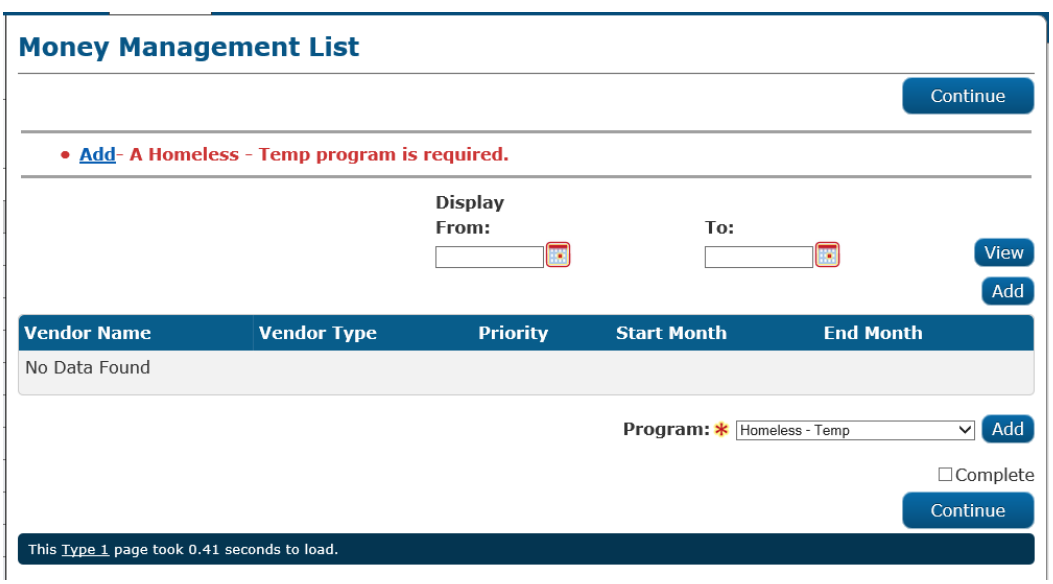

Figure 2.1.2 – Money Management List Validation 2

2.1.3 Description of Changes

1. Update the Money Management List page to display "Homeless – Perm" and "Homeless – Temp" as values under the Programs dropdown list.
2. The following page validations will display when adding a HP or HT Money Management record without a HP or HT program on the case (see Figure 2.1.1 and 2.1.2):
    a. Add – A Homeless – Perm program is required.
    b. Add – A Homeless – Temp program is required.

2.1.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Money Mngmt

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Money Management Detail

2.2.1 Overview

Update the Money Management Detail with a new non-mandatory field "Voucher" and a new column "Redeemed Amount". This fields will only appear when the Program is "Homeless – Perm" or "Homeless – Temp".

2.2.2 Money Management Detail Mockup

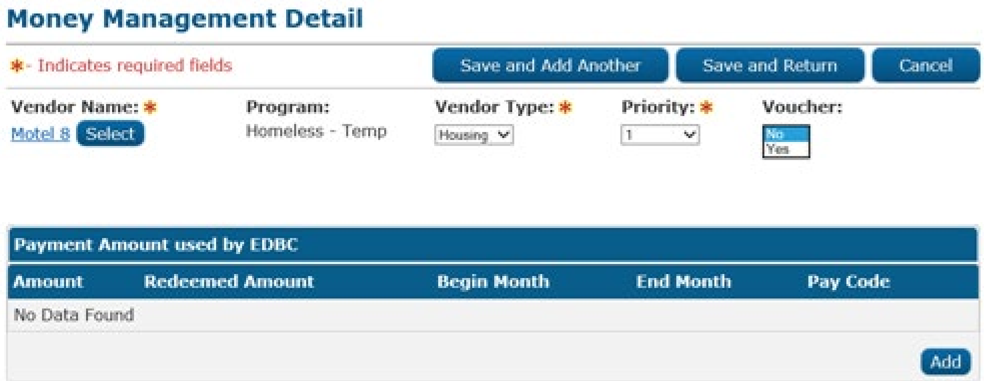

Figure 2.2.1 – Money Management Detail Create Mode

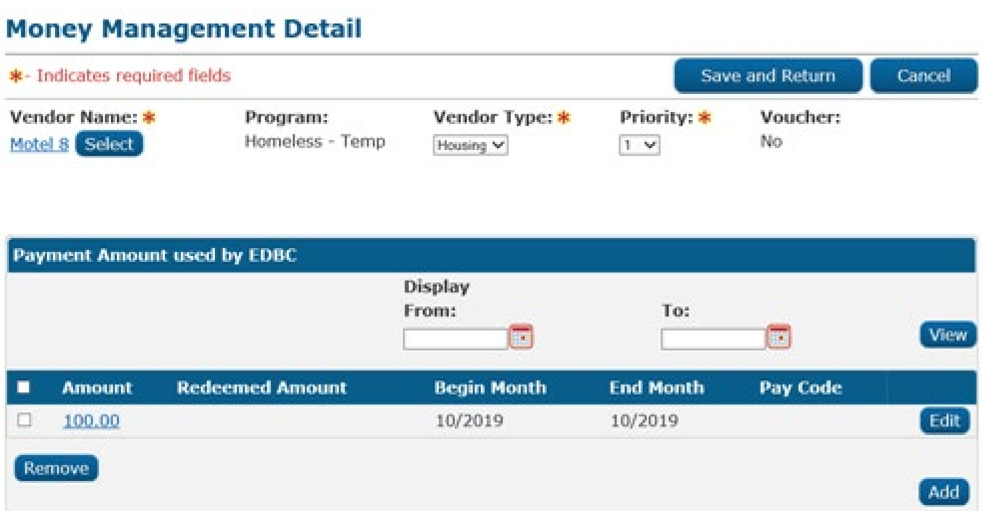

Figure 2.2.2 – Money Management Detail Edit Mode

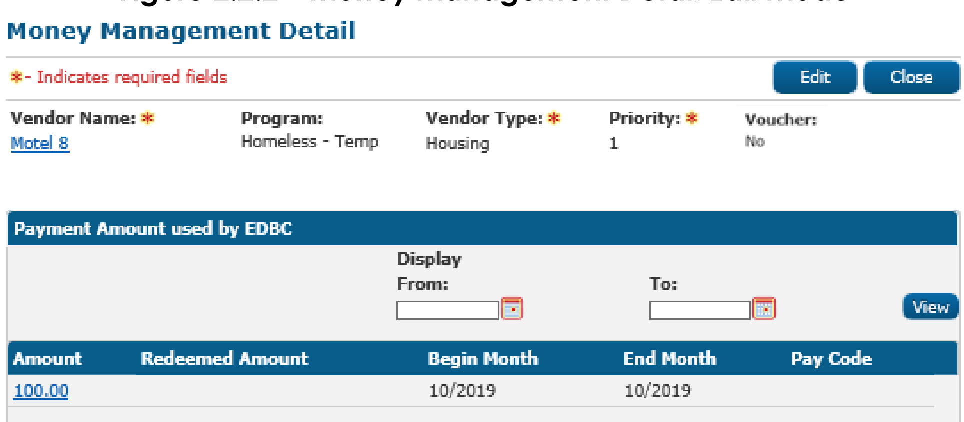

Figure 2.3.2 – Money Management Detail View Mode

2.2.3 Description of Changes

1. Update the Money Management Detail page with a new non-mandatory dropdown field "Voucher".
   a. The "Voucher" field will only appear when the Program is "Homeless – Perm" or "Homeless – Temp" and the county has Voucher as a Valuable Category and Valuable Type.
   b. In Create mode, the field will be editable, and the default value will be "No". The field will contain two possible values: "No" and "Yes" (See Figure 2.2.1).
   c. In edit mode (after "Save and Return" or "Save and Add Another" is clicked), the field will become read only (See Figure 2.2.2).

      Note 1: In the event that a user needs to change the Voucher indicator after the Money Management record has already been saved, the Money Management record will need to be deleted and a new Money Management record will need to be created.

      Note 2: Users will not be able to delete a Money Management record if EDBC is ran and benefits are issued. This is existing functionality.

2. Update the Payment Amount Used by EDBC section to include a new column "Redeemed Amount".
   a. The column will only appear when the Program is "Homeless – Perm" or "Homeless – Temp" and the county has Voucher as a Valuable Category and Valuable Type.
   b. The column will contain the amount redeemed from a Voucher or null (blank) if the voucher redemption amount has not been entered.

   Note: All existing validation for CalWORKs Money Management such as multiple Money Management records with the same Priority or overlapping Payment Amount Used by EDBC records will apply for HP and HT Money Management records.

2.2.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Money Mngmt

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

Update the page mappings on the Money Management Detail to account for the new Voucher field and Redeemed Amount column.

2.2.7 Page Usage/Data Volume Impacts

N/A

2.3 Payment Amount Used by EDBC

2.3.1 Overview

The Payment Amount Used by EDBC page will be updated with a new non-mandatory field called “Redeemed Amount”.

2.3.2 Payment Amount Used by EDBC Mockup

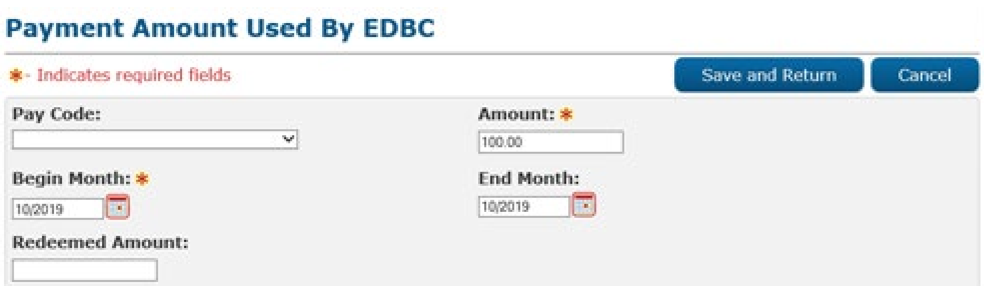

Figure 2.3.1 – Payment Amount Used by EDBC Create and Edit Mode

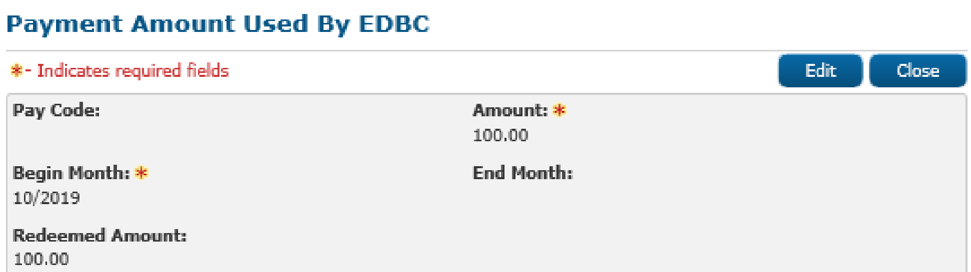

Figure 2.3.2 – Payment Amount Used by EDBC View Mode

Figure 2.3.3 – Payment Amount Used by EDBC Validation 1

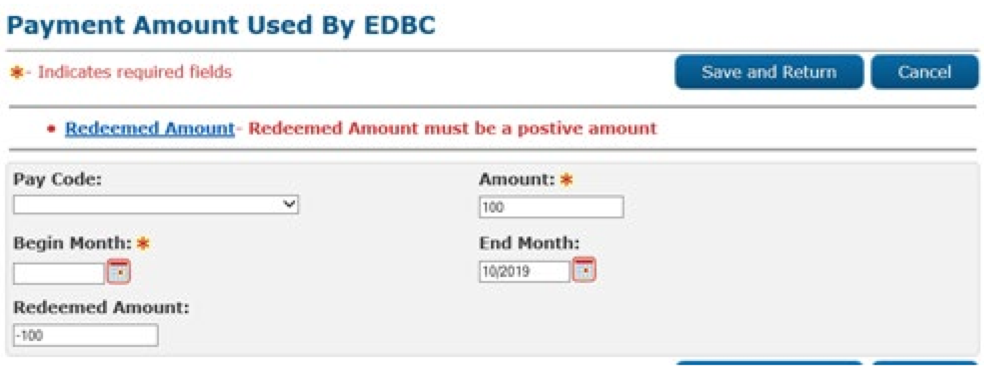

Figure 2.3.4 – Payment Amount Used by EDBC Validation 2

2.3.3 Description of Changes

1. Update the Payment Amount Used by EDBC page with a new non-mandatory money field “Redeemed Amount”.
   a. The “Redeemed Amount” field will only appear when the Program is “Homeless – Perm” or “Homeless – Temp” and the “Voucher” field is set to “Yes” from the Money Management Detail page.
   b. In create and edit mode, the field will be editable, and the default value will be blank (see Figure 2.3.1).
   c. The field will display in the following format ‘XX,XXX,XXX.XX’ and will use the standard validation that money fields use in the System.
   d. Custom Page Validations on the Save and Return button:
      i. The following page validation will display if the Redeemed Amount field exceeds the Amount field (see Figure 2.3.3): “Redeemed Amount cannot exceed Amount”.
      ii. The following page validation will display if the Redeemed Amount field is a negative amount (see Figure 2.3.4): “Redeemed Amount must be a positive amount”.
2. Update the Pay Code dropdown list to include all the County HP or HT Pay Codes (CT 623) based on the Program selected (see Appendix 1 and 2).

2.3.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Money Mngmt

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

Update page mapping for the Payment Amount Used by EDBC page to account for the new Redeemed Amount field.

2.3.7 Page Usage/Data Volume Impacts

N/A

2.4 Expense Detail and Expense Amount Detail

2.4.1 Overview

The Expense Detail and Expense Amount Detail pages will be updated to display the month by month rent breakout for two months separately (First Month Back Rent and Second Month Back Rent) under the Expense Category "Shelter" and Expense Type "Homeless-Past Due Rent".

2.4.2 Expense Detail and Expense Amount Detail Mockup

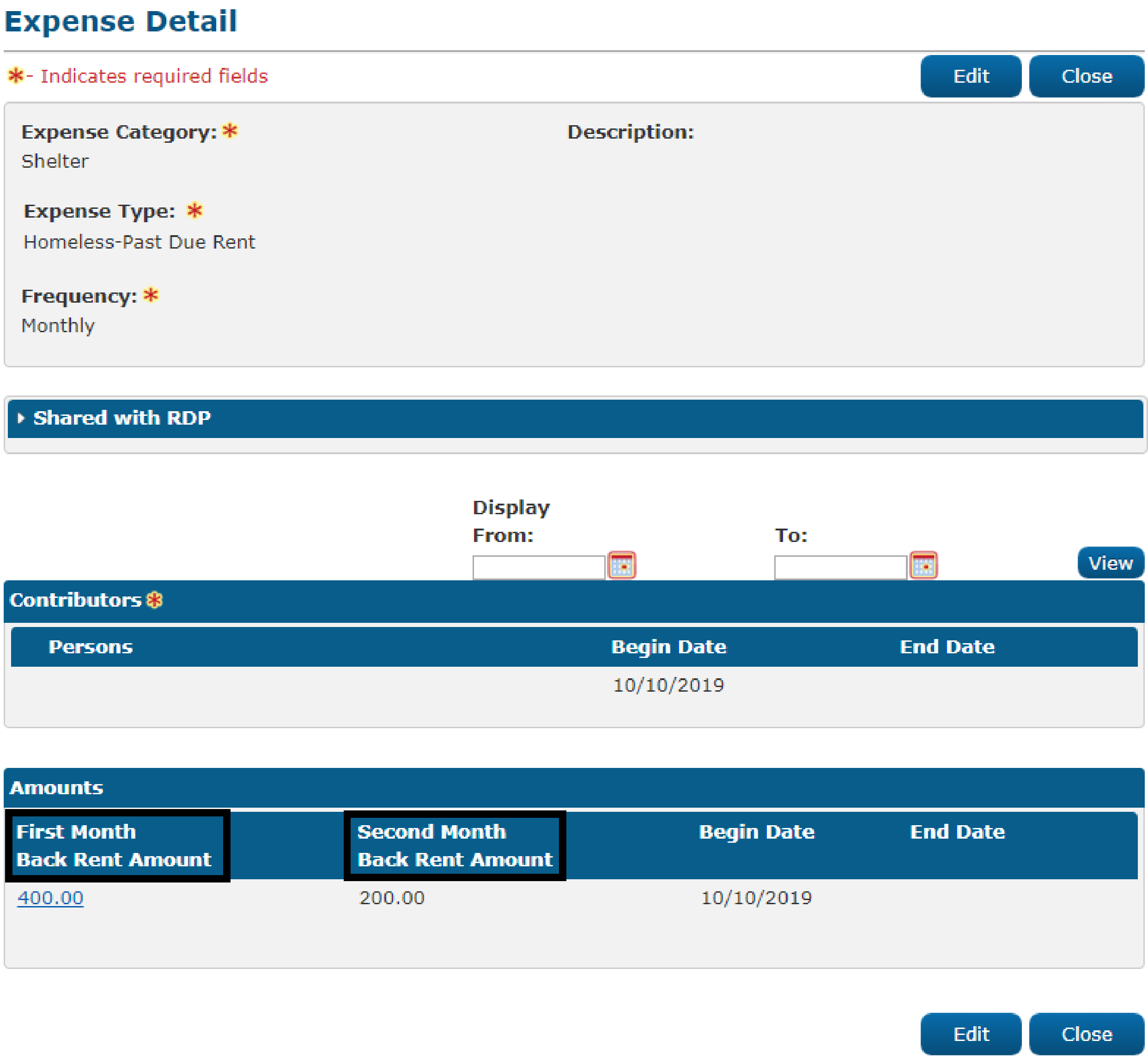

Figure 2.4.2a – Expense Detail View Mode Mockup

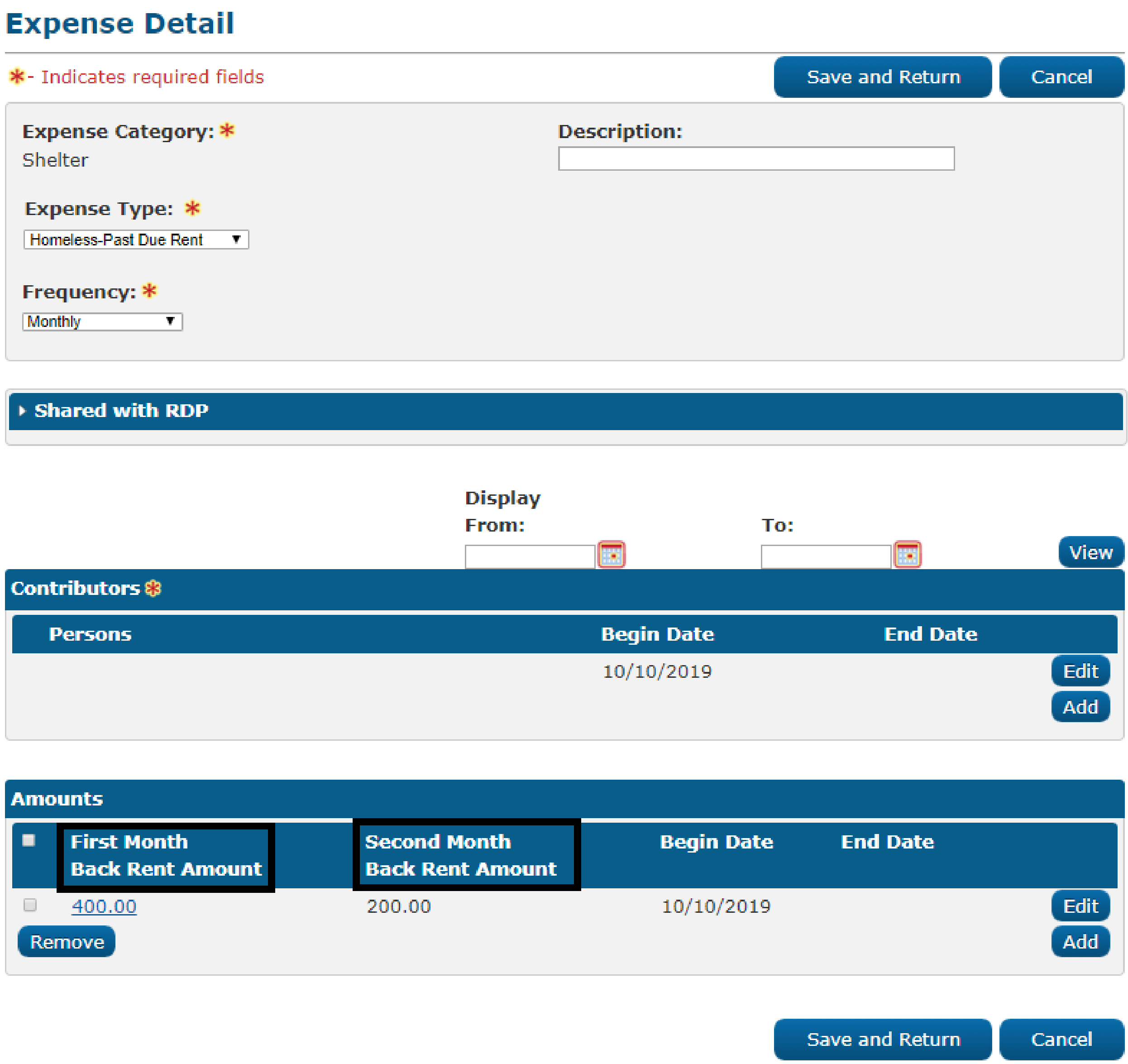

Figure 2.4.2b – Expense Detail Edit Mode Mockup

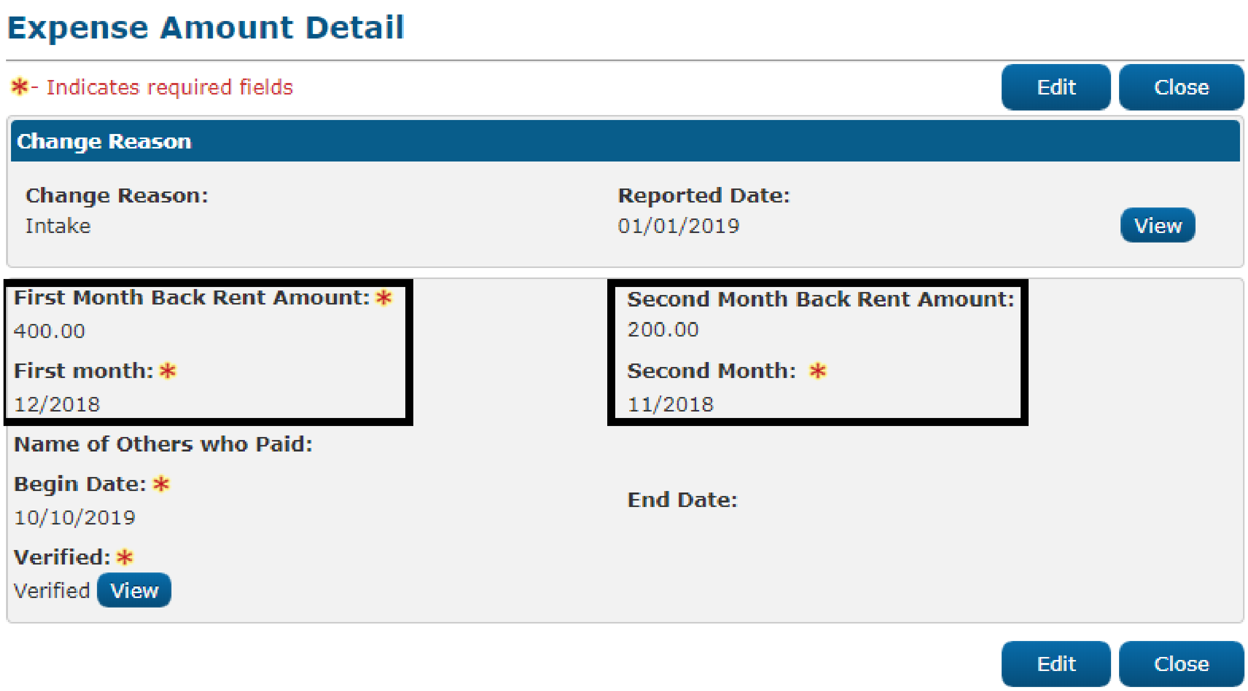

Figure 2.4.2c – Expense Amount Detail View Mode Mockup

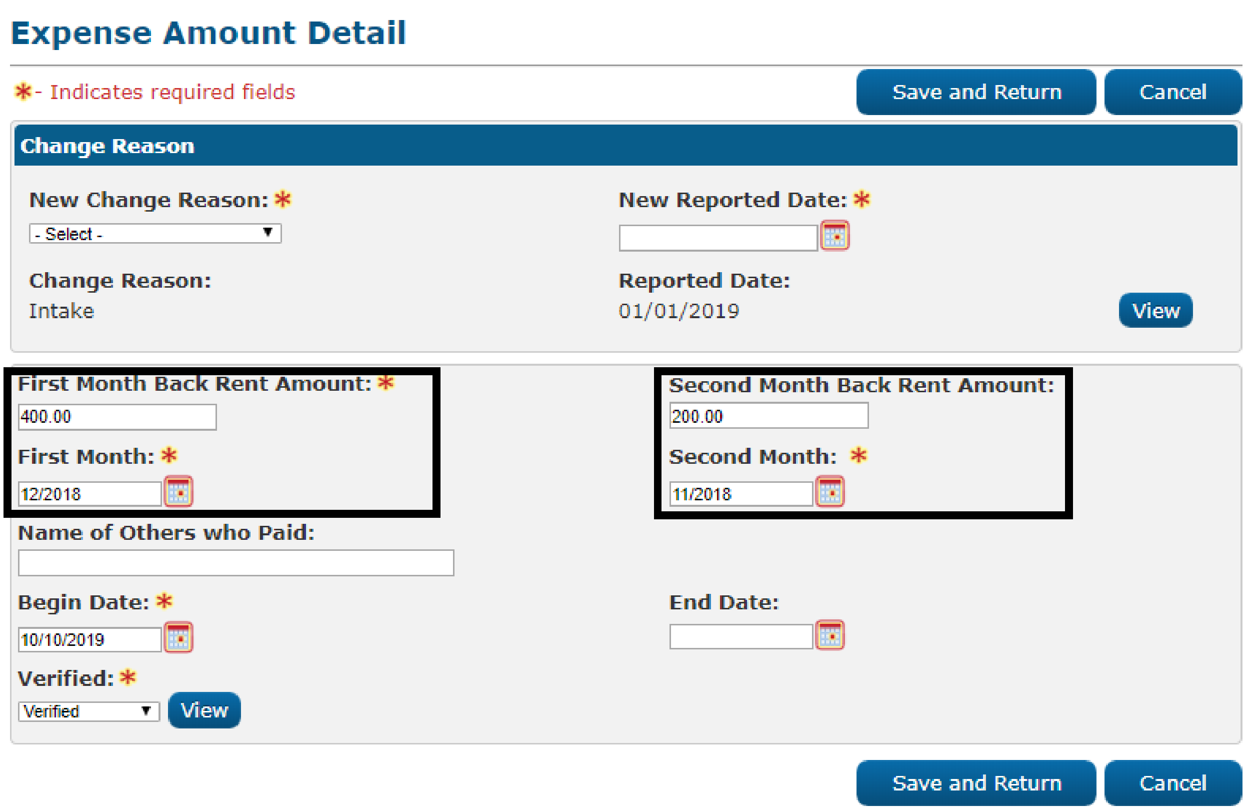

Figure 2.4.2d – Expense Amount Detail Edit Mode Mockup

2.4.3 Description of Changes

1. Update the labels "Amount:" and "Amount of Last Month's Rent:" in the "Expense Detail" and "Expense Amount Detail" pages to "First Month Back Rent Amount" and "Second Month Back Rent Amount" respectively for Expense Category "Shelter" and Expense Type "Homeless-Past Due Rent". These labels will change dynamically when the Expense Type "Homeless-Past Due Rent" is selected.

   Note: Currently "Amount:" is not dynamic but "Amount of Last Month's Rent:" label is dynamic based on the Expense Type "Homeless-Past Due Rent" selected.
2. Add two new date fields, "First month:" and "Second month:", in the Expense Amount Detail page to capture the month in the date format "MM/YYYY" using the calendar icon feature.
3. Display the two new date fields dynamically when Expense Category "Shelter" and Expense Type "Homeless-Past Due Rent" are selected.
4. Add required field validations for the two new date fields:
   a. The "First month:" field is set mandatory as the value in the "First Month Back Rent Amount:" field is set mandatory when the Expense Type "Homeless-Past Due Rent" is selected.
   b. The "Second month:" field will be conditionally mandatory when there is a value in "Second Month Back Rent Amount:" field.

2.4.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Expenses

2.4.5 Security Updates

N/A

2.4.6 Page Mapping

Update page mapping for the new fields.

2.4.7 Page Usage/Data Volume Impacts

N/A

2.5 Homeless – Temp EDBC Money Management

2.5.1 Overview

The Homeless – Temp EDBC page will be updated to capture additional budgeting and aid payment information from Money Management. A new Money Management section will also be added. When issuing a Voucher through the Money Management functionality, a Need and Service Arrangement will need to be created separately after the EDBC is Accepted and Saved.

2.5.2 Homeless – Temp EDBC Mockup

Aid Payment		Regular
Amount per day	$	85.00
Number of days	x	4
Aid Payment	$	340.00
Overridden Aid Payment	$	
		Override Payment
Penalties	-	0.00
Money Management	-	100.00
Potential Benefit	=	240.00
Previous Potential Benefit	-	0.00
Overpayment Adjustment Amount	-	0.00
Authorized Amount	=	240.00
Pay Code:		

Money Management				Regular
Vendor	Pay Code	Voucher		
Motel 8		No		
Vendor Potential Amount			$	100.00
Vendor Requested Amount			$	100.00
Vendor Previous Potential Benefit			-	0.00
Vendor Authorized Amount			=	100.00
Total Vendor Potential Amount			$	100.00
Total Vendor Requested Amount			$	100.00
Total Vendor Previous Potential Benefit			-	0.00
Total Vendor Authorized Amount			=	100.00

Figure 2.5.1 – Money Management on the Homeless – Temp EDBC

2.5.3 Description of Changes

1. Add a line item in the Aid Payment section to display 'Money Management' and the corresponding value.
    a. The value will be a hyperlinked dollar amount that navigates to the new Money Management EDBC Detail page.
2. Add a Money Management section after the Aid Payment section. The following information will be displayed:
    a. Vendor – displays the name of the Vendor.
    b. Pay Code – displays the pay code determined by EDBC.
    c. Voucher – displays Yes or No based on if a voucher was used.

       Note: When issuing a Voucher for a HA Money Management, the Worker must still create a Need and Service Arrangement separately from the EDBC. When the Voucher is redeemed by the Vendor, the Worker must enter the redeemed amount into the Payment Amount Used by EDBC page and rerun EDBC to issue the payments to the Vendor.
    d. Vendor Potential Amount – displays the Amount from the Vendor's Payment Amount Used by EDBC page.
    e. Vendor Requested Amount – displays the Redeemed Amount from the Vendor's Payment Amount Used by EDBC page if the Money Management is a Voucher. If the Money Management is not a Voucher, the Amount from the Vendor's Payment Amount Used by EDBC page will be displayed.
    f. Vendor Previous Potential Benefit (hyperlink) – displays the sum of all benefits already issued to the Vendor plus any Recovery Account or Recovery Account Transactions for the same program and benefit month. If the hyperlink is clicked, the page will navigate to the Vendor Previous Potential Benefit List page.
    g. Vendor Authorized Amount – displays the amount authorized to be issued to the Vendor.
    h. Total Vendor Potential Amount – displays the sum of all Vendor Potential Amounts.
    i. Total Vendor Requested Amount – displays the sum of all Vendor Requested Amounts.
    j. Total Vendor Previous Potential Benefit (hyperlink) – displays the sum of all Vendor Previous Potential Benefit Amounts. If the hyperlink is clicked, the page will navigate to the Total Vendor Previous Potential Benefit List page.
    k. Total Vendor Authorized Amount – displays the sum of all Vendor Authorized Amounts.

2.5.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.5.5 Security Updates

N/A

2.5.6 Page Mapping

N/A – page mapping does not currently exist for this page.

2.5.7 Page Usage/Data Volume Impacts

N/A

2.6 Money Management EDBC Detail

2.6.1 Overview

The Money Management hyperlink on the HT/HP EDBC will display the amounts of the vendor(s) on a child page.

2.6.2 Money Management EDBC Detail Mockup

Figure 2.6.1 – Money Management EDBC Detail

2.6.3 Description of Changes

1. Create a new child page Money Management EDBC Detail from the Money Management hyperlink on the HT/HP EDBC pages.
    a. Display the vendor(s) and the corresponding amount.

b. Display the total vendor amounts which reflect the amount displayed on the HT/HP EDBC.

2.6.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.6.5 Security Updates

N/A – this page will have the same security as the EDBC. If the user is able to view the EDBC, the user will be able to view this page.

2.6.6 Page Mapping

Create PMCR for the new page.

2.6.7 Page Usage/Data Volume Impacts

N/A

2.7 Vendor Previous Potential Benefit List

2.7.1 Overview

The Vendor Previous Potential Benefit hyperlink on the HT/HP EDBC will display the vendor's previous potential benefit on a child page.

2.7.2 Vendor Previous Potential Benefit List Mockup

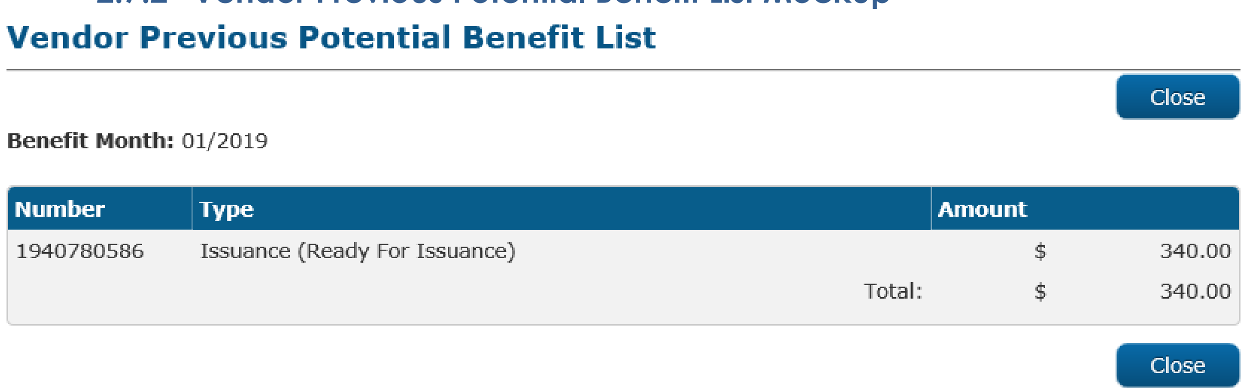

Figure 2.7.1 – Vendor Previous Potential Benefit List

2.7.3 Description of Changes

1. Create a new child page Vendor Previous Potential Benefit List from the Vendor Previous Potential Benefit hyperlink on the HT/HP EDBC pages.
   a. Display the number, type and amount of the vendor previous potential benefit. The Type and Number will be as follows:
      i. If the Type is Issuance, the Number will be the Issuance ID
      ii. If the Type is Overpayment, the Number will be the Overpayment ID
      iii. If the Type is Overpayment Adjustment, the Number will be the Recovery Account Transaction ID.
   b. Display the total vendor previous potential benefit which reflects the amount displayed on the HT/HP EDBC.

2.7.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.7.5 Security Updates

N/A – this page will have the same security as the EDBC. If the user is able to view the EDBC, the user will be able to view this page.

2.7.6 Page Mapping

Create PMCR for the new page.

2.7.7 Page Usage/Data Volume Impacts

N/A

2.8 Total Vendor Previous Potential Benefit List

2.8.1 Overview

The Total Vendor Previous Potential Benefit hyperlink on the HT/HP EDBC will display the total vendor previous potential benefit on a child page.

2.8.2 Total Vendor Previous Potential Benefit List Mockup

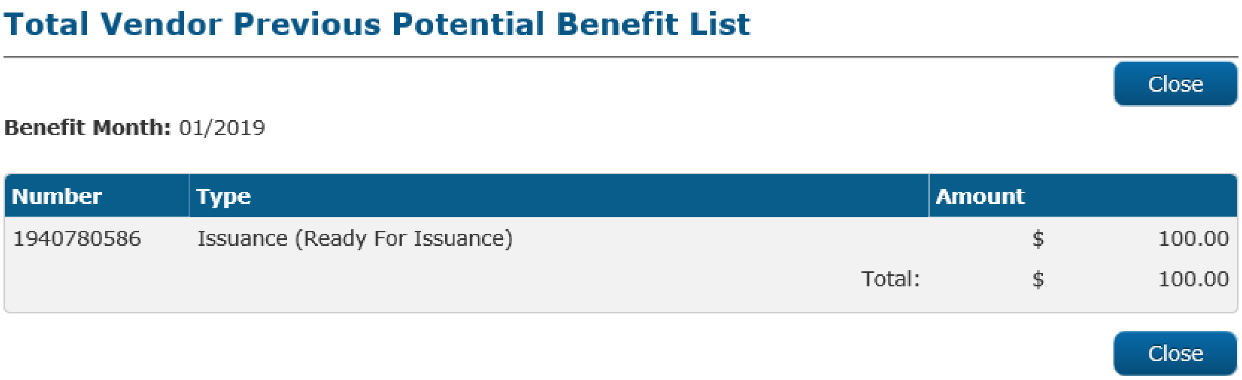

Figure 2.8.1 – Total Vendor Previous Potential Benefit List

2.8.3 Description of Changes

1. Create a new child page Total Vendor Previous Potential Benefit List from the Total Vendor Previous Potential Benefit hyperlink on the HT/HP EDBC pages.
   a. Display the number type and amount of the vendor previous potential benefit. The Type and Number will be as follows:
      i. If the Type is Issuance, the Number will be the Issuance ID
      ii. If the Type is Overpayment, the Number will be the Overpayment ID
      iii. If the Type is Overpayment Adjustment, the Number will be the Recovery Account Transaction ID.
   b. Display the total vendor previous potential benefit which reflects the amount displayed on the HT/HP EDBC.

2.8.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.8.5 Security Updates

N/A – this page will have the same security as the EDBC. If the user is able to view the EDBC, the user will be able to view this page.

2.8.6 Page Mapping

Create PMCR for the new page.

2.8.7 Page Usage/Data Volume Impacts

N/A

2.9 Homeless – Perm EDBC Money Management

2.9.1 Overview

The Homeless – Perm EDBC page will be updated to capture additional budgeting and aid payment information from Money Management. A new Money Management section will also be added. When issuing a Voucher through the Money Management functionality, a Need and Service Arrangement will need to be created separately after the EDBC is Accepted and Saved.

2.9.2 Homeless – Perm EDBC Mockup

Aid Payment	Regular	
Monthly Rent Amount	$	400.00
Past Due Rent	$	340.00
Rent Result		Pass
80% TMHI	$	461.60
TMHI Result		Pass
Security Deposit and Last Month Rent	$	0.00
Utility Installation Costs	$	0.00
Security Deposit / Last Month Rent Result		Pass
Aid Payment	$	340.00
Overridden Aid Payment	$	
		Override Payment
Penalties	-	0.00
Money Management	-	100.00
Potential Benefit	=	240.00
Previous Potential Benefit	-	0.00
Overpayment Adjustment Amount	-	0.00
Authorized Amount	=	240.00
Pay Code:		

Money Management			Regular	
Vendor	Pay Code	Voucher		
Property Management		No		
Vendor Potential Amount			$	100.00
Vendor Requested Amount			$	100.00
Vendor Previous Potential Benefit			-	0.00
Vendor Authorized Amount			=	100.00
Total Vendor Potential Amount			$	100.00
Total Vendor Requested Amount			$	100.00
Total Vendor Previous Potential Benefit			-	0.00
Total Vendor Authorized Amount			=	100.00

Figure 2.9.1 – Money Management on the Homeless – Perm EDBC

2.9.3 Description of Changes

1. Add a line item in the Aid Payment section to display Money Management and the corresponding value.
    a. The value will be a hyperlinked dollar amount that navigates to the new Money Management EDBC Detail page.
2. Add a Money Management section after the Aid Payment section. The following information will be displayed:
    a. Vendor – displays the name of the Vendor.
    b. Pay Code – displays the pay code determined by EDBC.
    c. Voucher – displays Yes or No based on if a voucher was used.

       Note: When issuing a Voucher for a HA Money Management, the Worker must still create a Need and Service Arrangement separately from the EDBC. When the Voucher is redeemed by the Vendor, the Worker must enter the redeemed amount into the Payment Amount Used by EDBC page and rerun EDBC to issue the payments to the Vendor.
    d. Vendor Potential Amount – displays the Amount from the Vendor's Payment Amount Used by EDBC page.
    e. Vendor Requested Amount – displays the Redeemed Amount from the Vendor's Payment Amount Used by EDBC page if the Money Management is a Voucher. If the Money Management is not a Voucher, the Amount from the Vendor's Payment Amount Used by EDBC page will be displayed.
    f. Vendor Previous Potential Benefit (hyperlink) – displays the sum of all benefits already issued to the Vendor plus any Recovery

Account or Recovery Account Transactions for the same program and benefit month. If the hyperlink is clicked, the page will navigate to the Vendor Previous Potential Benefit List page.

g. Vendor Authorized Amount – displays the amount authorized to be issued to the Vendor.
h. Total Vendor Potential Amount – displays the sum of all Vendor Potential Amounts.
i. Total Vendor Requested Amount – displays the sum of all Vendor Requested Amounts.
j. Total Vendor Previous Potential Benefit (hyperlink) – displays the sum of all Vendor Previous Potential Benefit Amounts. If the hyperlink is clicked, the page will navigate to the Total Vendor Previous Potential Benefit List page.
k. Total Vendor Authorized Amount – displays the sum of all Vendor Authorized Amounts.

2.9.4 Page Location

- **Global:** Eligibility
- **Local:** Customer Information
- **Task:** Run EDBC

2.9.5 Security Updates

N/A

2.9.6 Page Mapping

N/A – page mapping does not currently exist for this page.

2.9.7 Page Usage/Data Volume Impacts

N/A

2.10 Homeless Assistance – Perm Eligibility Rules

2.10.1 Overview

The Homeless-Perm rules will be updated to account for Monthly Rent Arrearage payments.

2.10.2 Description of Changes

1. Update HP rules to determine the Monthly Rent Arrearage result of the eligibility determination and display it against the existing TMHI Result.

   a. Update HP EDBC rules to FAIL the program if the First Month Back Rent or Second Month Back Rent exceeds 80% TMHI
   b. Update HP EDBC rules to PASS the program when each Month Rent Arrearage amount does not exceed 80% of the TMHI.
2. Update the Past Due Rent to display the sum of First Month Back Rent and Second Month Back Rent.
3. Update the Past Due Rent Amount with a hyperlink to show the First Month Back Rent and Second Month Back Rent Expense Amounts.

Aid Payment	Regular	
Monthly Rent Amount	$	400.00
Past Due Rent	$	600.00
Rent Result		Pass
80% TMHI	$	440.00
TMHI Result		Pass
Security Deposit and Last Month Rent	$	0.00
Utility Installation Costs	$	0.00
Security Deposit / Last Month Rent Result		Pass
Aid Payment	$	600.00

Figure 2.10.2a – Homeless – Perm EDBC Summary Page

4. Add new child screen "EDBC Homeless Past Due Rent" for the Past Due Rent Amount hyperlink to display the First Month Back Rent and Second Month Back Rent Expense Amounts. Amount can be displayed blanks for historic data or if no amount entered in the Expense Amount Detail.
5. Create Page Mappings to the new child screen "EDBC Homeless Past Due Rent".

EDBC Homeless Past Due Rent

Close

Description		Amount
First Month Back Rent	$	400.00
Second Month Back Rent	$	200.00
Total	**$**	**600.00**

Close

Figure 2.10.2b – Homeless – Perm EDBC Summary Page

6. Add new status reason "Rent Arrearages exceeds TMHI Limit" if the program is FAIL due to monthly rent arrearages.

7. Technical Notes:
    a. Add the new status reason in CT_73 Table, "Rent Arrearages exceeds TMHI Limit". This status reason should be applied if the HP program is FAIL due to monthly arrearages. The table below lists the Status Reason and the related details.

Status Reason	Code Num Identif	HP Priority	HP Close Program
Rent Arrearages exceeds TMHI Limit	New	1360	Y

2.10.3 Programs Impacted

Homeless – Perm

2.10.4 Performance Impacts

N/A

2.11 New Homeless Assistance Denial NOA

2.11.1 Overview

This section will cover the necessary updates to generate a new Homeless Permanent (HP) Denial Notice of Action (NOA) when the HP program is denied due to the monthly back rent amount being greater than 80% of the household's monthly income. It will add a HP new reason fragment and the generation logic for the fragment. Since the CW denial action and message fragments are also used for HP, the generation logic will be updated for these existing fragments to generate on the HP Denial NOA when the program is denied due to monthly back rent amount being greater than 80% of the household's monthly income. Lastly, the population of the HP back rent denial budget will be updated to populate the first and second month of past due rent.

2.11.2 Description of Change

1. Add the new reason fragment that will generate on the HP Denial NOA when the monthly back rent amount being greater than 80% of the household's monthly income.

    a. Add the new HP denial fragment.
    State Form/NOA: M44-211D
    Current Program: Homeless Permanent
    Current Action Type: Denial
    Current Fragment Level: Program
    Existing Language: English, Spanish

Ordering on the NOA: The fragment will generate right after the Here's why section of the action fragment defined in **Section 2.13.2.2.**

NOA Mockups/Examples:

- For an example of the NOA in English, please refer to **Section 3 – Supporting Documents #1**
- For an example of the NOA in Spanish, please refer to **Section 3 – Supporting Documents #2**

Description	Text	Formatting
Static English	Your monthly back rent amount is higher than 80% of your total monthly household income. (Your total monthly household income is calculated below)	Arial Font Size 10
Static Spanish	La cantidad mensual de renta atrasada que debe es más que el 80% del total mensual de los ingresos de su hogar. (El total de los ingresos de su hogar se calcula a continuación)	Arial Font Size 10

b. Add generation logic for the new HP denial reason fragment. The fragment will generate on the HP Denial NOA when all the following is true:

   i. The program is Homeless Permanent.

   ii. The program status is 'Denied'.

   iii. The program status reason is 'Rent Arrearages exceeds TMHI Limit'.

c. Add the following regulation for the new reason fragment: MPP:EAS: 44-211.5

2. Update the generation logic for the CW denial action fragment to generate on the HP Denial NOA when the EDBC denies the HP program because the monthly back rent amount being greater than 80% of the household's monthly income.

   Action Fragment Name: CW_DN_ACTION6
   Fragment Id: 4020
   State Form/NOA: M44-211D
   Current Program: CalWORKs, Immediate Need, Homeless Permanent, Homeless Temporary
   Current Action Type: Denial
   Current Fragment Level: Program
   Existing Language: English, Spanish, Armenian, Arabic, Cambodian, Chinese, Farsi, Tagalog, Korean, Russian, Vietnamese
   Ordering on the NOA: The fragment will be the first fragment on the NOA.

a. The fragment has the existing verbiage below and will continue to use the existing verbiage when generating on the new denial NOA.

Description	Text	Formatting
Static	The County has denied your request dated <EffectiveDenialDate> for Homeless assistance for: Permanent Housing Here's why:	Arial Font Size 10

b. Update the generation logic so that the CW denial action fragment also generates on a HP Denial NOA when all the following is true:
   i. The program is Homeless Permanent.
   ii. The program status is ‘Denied’.
   iii. The program status reason is ‘Rent Arrearages exceeds TMHI Limit’.

c. It will use the existing population logic below:

Variable	Description	Population
EffectiveDenialDate	The effective date.	This variable will be populated with the date when the program was denied.

3. Update the generation logic for the CW denial message fragment to generate on the HP Denial NOA when the EDBC denies the HP program because the monthly back rent amount being greater than 80% of the household’s monthly income.

   Message Fragment Name: CW_DN_MESSAGE2
   Fragment Id: 6397
   State Form/NOA: M44-211D
   Current Program: CalWORKs, Immediate Need, Homeless Permanent, Homeless Temporary
   Current Action Type: Denial
   Current Fragment Level: Program
   Existing Language: English, Spanish, Armenian, Arabic, Cambodian, Chinese, Farsi, Tagalog, Korean, Russian, Vietnamese
   Ordering on the NOA: The message fragment will generate on the NOA after the new reason fragment added in **Section 2.13.2.1**.

   a. The fragment has the existing verbiage below and will continue to use the existing verbiage when generating on the new denial NOA.

Description	Text	Formatting
Static	EBT: Keep your plastic Golden State Advantage card if you use Electronic Benefit Transfer (EBT), even if your aid is terminated. Please do not throw it away. Medi-Cal: This notice DOES NOT change or stop Medi-Cal benefits. CalFresh: This notice DOES NOT stop or change your CalFresh benefits. You will get a separate notice telling you about any changes to your CalFresh benefits. Receiving Medi-Cal and/or CalFresh only DOES NOT count against your cash aid time limits.	Arial Font Size 10

b. Update the generation logic so that the CW denial message fragment also generates on a HP Denial NOA when all the following is true:
    i. The program is Homeless Permanent.
    ii. The program status is 'Denied'.
    iii. The program status reason is 'Rent Arrearages exceeds TMHI Limit'.

4. Update the population logic for the Homeless Assistance budget fragment that generates on the HP Denial NOA.
   Budget Fragment Name: BUDGT_HA_DN_BACK_RENT
   Fragment Id: 908
   State Form/NOA: M44-211D
   Current Program: Homeless Permanent
   Current Action Type: Denial
   Current Fragment Level: Program
   Existing Language: English, Spanish, Armenian, Arabic, Cambodian, Chinese, Farsi, Tagalog, Korean, Russian, Vietnamese
   Ordering on the NOA: The budget will generate on the right side of the first page.

   a. The budget fragment has the existing verbiage below:

Back Rent Payment

Amount of Back Rent for the month of	<Month1>
	<Month1BackRentAmount>
80% of Total Monthly Household Income	<80PercentTMHI>
Amount of Back Rent for the month of	<Month2>
	<Month2BackRentAmount>
80% of Total Monthly Household Income	<80PercentTMHI>
Your Total Back Rent Payment	= <TotalBackRentAmount>

Your total housing costs are more than the homeless assistance you can get.

b. The budget fragment generates on the NOA when the HP is denied, and the past due rent is greater than zero dollars. The new reason added in **Section 2.10.2.3** will deny the HP program because the monthly back rent amount being greater than 80% of the household's monthly income. In this scenario, the program will be denied, and the past due rent is greater than zero, therefore the budget will generate on the NOA with the existing logic. No changes will be needed to the generation logic.

c. Update the population logic for the budget fragment. New fields were added on Expense Amount Detail page to capture two separate months of back rent. Therefore, the logic will need to be updated to populate the variables on the budget. The fragment will be populated as follows:

Variable	Description	Population
Month1	The first month of back rent.	This variable will be populated with the first month of back rent. It will in MM/DD/YYYY format.
Month1BackRentAmount	The first month back rent amount.	This variable will be populated with the back-rent amount from the first month.

Month2	The second month of back rent.	This variable will be populated with the second month of back rent. It will be in MM/DD/YYYY format.
Month2BackRentAmount	The second month back rent amount	This variable will be populated with the second month of back rent.
80PercentTMHI	The percentage of the total monthly household income.	This variable will be populated with 80% of the household's total monthly income.
TotalBackRentAmount	The total amount of back rent.	This variable will be populated with the total amount of back rent for the two months.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	HP Denial NOA English Mockup	HP Denial NOA English Example.pdf
2	Client Correspondence	HP Denial NOA Spanish Mockup	HP Denial NOA Spanish Example.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
374	**Original:** The Contractor shall update the Homeless Assistance functionality as follows: 1) Add the ability to evaluate that the total monthly household income (TMHI) is below the approved State Standard percentage (currently 80%) and the rent amount should be broken out month by month for 2 months separately for each month on the expense detail page for the expense category of shelter and expense type homeless-past due rent, homeless security deposit, utility installation costs under expense category of utility 2) Add the ability to issue single party checks to vendors without the Payee/Case name (e.g., landlord, hotel, utility company) for the C-IV Migration Counties homeless assistance functionality 3) Add the ability to issue multiple payments on different dates 4) Add the ability to issue vouchers for the service arrangement types in C-IV that allow voucher payments 5) Add the ability to split Utility Payments 6) Add the ability to issue the remainder amount of the Temporary Homeless payment to the customer when hotel cost is less than the amount issued **Revised:**	The Past Due Rent eligibility rules that evaluate whether the total monthly household income (TMHI) is below the approved State Standard percentage (currently 80%) and that break out the rent amount for each month for a maximum of 2 months will be developed in accordance to regulation 44-211.531B.	1. The Money Management pages were updated to allow HP and HT programs to issue Money Management payments and Vouchers. 2. The Expense pages were updated to display the month by month rent breakout for two months separately. 3. The EDBC Summary pages for HP and HT were updated to incorporate Money Management in the budget and previous potential benefit calculations. 4. The HP Rules were updated to account for monthly rent arrearage payments. 5. A new HA Denial was added to the system.

	The Contractor shall update the Homeless Assistance functionality as follows: 1) Add the ability to evaluate for the Homeless Permanent program that the total monthly household income (TMHI) is at or below the approved State Standard percentage (currently 80%) and the rent amount should be broken out month by month for 2 months separately for each month on the Expense Amount Detail page for the expense category of shelter and expense type homeless-past due rent. Generate a Denial Notice of Action if the back rent amount exceeds TMHI. 2) Add Money Management functionality for Homeless Permanent and Homeless Temporary in order to: a) Issue single party checks to vendors without the Payee/Case name (e.g., landlord, hotel, utility company). b) Split Utility Payments. c) Issue the remainder amount of the Temporary Homeless payment to the customer when hotel cost is less than the amount issued. 3) Add the ability to issue Homeless Assistance vouchers for the service arrangement types in C-IV that allow voucher payments.		6. A list of Pending and Active HP programs was generated for LA County to update the Homeless-Past Due Rent expense information.

5 OUTREACH

5.1 Pending and Active Homeless – Permanent List

Provide a list of all Active and Pending Homeless-Perm program cases in Los Angeles County. Workers may need to reenter the Homeless-Past Due Rent expense information for these cases before running EDBC due to the changes on the Expense Detail and Expense Amount Detail pages.

List Name: CA-207463 Active and Pending HP Past Due Rent Cases
List Criteria: Active and Pending HP Program Cases for Los Angeles County having expense type Homeless-Past Due Rent
Standard Columns:
- Case Name
- Case Number
- County
- Unit
- Unit Name
- Office Name
- Worker ID
- Benefit Month

Additional Column(s): None
Frequency: One-time after the implementation of the SCR

The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CA-207463
C-IV	None

6 APPENDIX

1. **Homeless – Permanent Pay Codes**:
    - 01 - Homeless - Initial Applicant
    - 06 - Homeless - Applicant
    - 07 - Homeless - Recipient
    - 88 - Recurring Special Need
    - 89 - Homeless - Recipient
    - 90 - Homeless - Applicant
    - BD - SNNR-Bed
    - BE - SNNR-Bedding/Dishes
    - C7 - Homeless - Recipient
    - C8 - Homeless - Applicant
    - C9 - Homeless - Initial Applicant
    - CS - CC-Registr Fee
    - CV - Permanent Shelter
    - CY - Permanent HA (Violence)
    - DL - Homeless - Recipient
    - DM - Homeless - Applicant
    - DN - Homeless - Initial Applicant
    - EA - EAPE
    - EF - SNNR-Ess Furniture
    - EO - Electronic Theft Replacement Cash Benefits
    - HEA - SNNR-Heater
    - HH - Housing Relocation
    - HP - Homeless Client
    - HPA - HA Perm-Arrearages
    - HPP - HA Perm-Appr
    - HTA - HA Temp-Appr
    - INE - Immed Need
    - ISH - SNNR-Interim Shelter
    - LE - Permanent HA (Illness)
    - LH - Permanent HA (Uninhabitability)
    - LJ - Permanent HA (Natural Disaster)
    - MA - MA
    - ME - MA - Exception Other
    - MS - Moving Costs
    - MV - MA - Exception DV
    - NH - HA Temp-Disaster
    - NN - HA Temp-Pend
    - NO - HA Temp-P/M Illness
    - NU - HA Temp-Uninhabit
    - NW - HA Temp-Violence
    - OU - County use only 1
    - OV - County use only 2
    - OW - County use only 3
    - OX - County use only 4

- PAL - Pregnancy Allowance
- PDI - HA Perm-Disaster
- PM - HA Perm-P/M Illness
- PU - HA Perm-Uninhabit
- PV - HA Perm-Violence
- QR - THAP+14 - Exception Other
- QT - THAP+14 - Exception DV
- R1 - Rent Subsidy-1/G
- R2 - Rent Subsidy-2/G
- R3 - Rent Subsidy-3/G
- R4 - Rent Subsidy-4/G
- RF - SNNR-Refrig
- SC - SCC
- SV - SNNR-Stove
- TA - THAP+14
- TG - SNNR-House Repairs
- TJ - Disregard
- ZQ - CC-General
- ZR - SNNR-Clothing
- ZS - CC-GAIN Sanc
- ZT - CC-Provdr In Hm

2. Homeless – Temporary Pay Codes:

- 01 - Homeless - Initial Applicant
- 06 - Homeless - Applicant
- 07 - Homeless - Recipient
- 88 - Recurring Special Need
- 89 - Homeless - Recipient
- 90 - Homeless - Applicant
- BD - SNNR-Bed
- BE - SNNR-Bedding/Dishes
- C7 - Homeless - Recipient
- C8 - Homeless - Applicant
- C9 - Homeless - Initial Applicant
- CS - CC-Registr Fee
- CU - Temporary Shelter
- CX - Temporary HA (Violence)
- CZ - Temporary HA (Illness)
- DL - Homeless - Recipient
- DM - Homeless - Applicant
- DN - Homeless - Initial Applicant
- EA - EAPE
- EF - SNNR-Ess Furniture
- EO - Electronic Theft Replacement Cash Benefits
- HEA - SNNR-Heater
- HH - Housing Relocation
- HP - Homeless Client
- HPA - HA Perm-Arrearages

- HPP - HA Perm-Appr
- HTA - HA Temp-Appr
- INE - Immed Need
- ISH - SNNR-Interim Shelter
- LF - Temporary HA (Uninhabitability)
- LI - Temporary HA (Natural Disaster)
- MA - MA
- ME - MA - Exception Other
- MS - Moving Costs
- MV - MA - Exception DV
- NH - HA Temp-Disaster
- NN - HA Temp-Pend
- NO - HA Temp-P/M Illness
- NU - HA Temp-Uninhabit
- NW - HA Temp-Violence
- OU - County use only 1
- OV - County use only 2
- OW - County use only 3
- OX - County use only 4
- PAL - Pregnancy Allowance
- PDI - HA Perm-Disaster
- PM - HA Perm-P/M Illness
- PU - HA Perm-Uninhabit
- PV - HA Perm-Violence
- QR - THAP+14 - Exception Other
- QT - THAP+14 - Exception DV
- R1 - Rent Subsidy-1/G
- R2 - Rent Subsidy-2/G
- R3 - Rent Subsidy-3/G
- R4 - Rent Subsidy-4/G
- RF - SNNR-Refrig
- SC - SCC
- SV - SNNR-Stove
- TA - THAP+14
- TG - SNNR-House Repairs
- TJ - Disregard
- ZQ - CC-General
- ZR - SNNR-Clothing
- ZS - CC-GAIN Sanc
- ZT - CC-Provdr In Hm

CalSAWS

California Statewide Automated Welfare System

Design Document

SCR CA-207643 - DDID 1784 - Text Messaging

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/11/19	0.1	Initial version	Sumeet Patil

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1 OVERVIEW

The Text messaging solution will be migrated from using LA county texting provider for sending text messages to a Text messaging service to send text messages instantly and allow two-way communication. This text messaging solution will be used by all 58 counties.

1.1 Current Design

The participant's information for whom a text message needs to be sent is populated using batch jobs and the files are sent to ITD which eventually sends the text message using the LA county vendor.

1.2 Requests

As part of DDID #1784 a text messaging service (Similar to the one in C-IV System) will be built to send text messages instantly and allow two-way communication.

1.3 Overview of Recommendations

The recommendations for building a Texting solution for CalSAWS application to send text messages and support two-way communication are as follows –

1. A new Texting service will be created for CalSAWS application to send and receive text messages. This service will comprise of a REST API and will communicate with the Texting Provider.
2. This Texting solution will be decoupled and independent of the Texting Provider.
3. The Texting service will support two-way communication.

1.4 Assumptions

- Amazon Pinpoint service will be used as the Texting provider.
- This SCR will only implement the Texting Service. The CalSAWS application will not be updated to use this service as part of this SCR.

2 RECOMMENDATIONS

The Texting Service will comprise of the following components:

2.1 Outbound text messaging

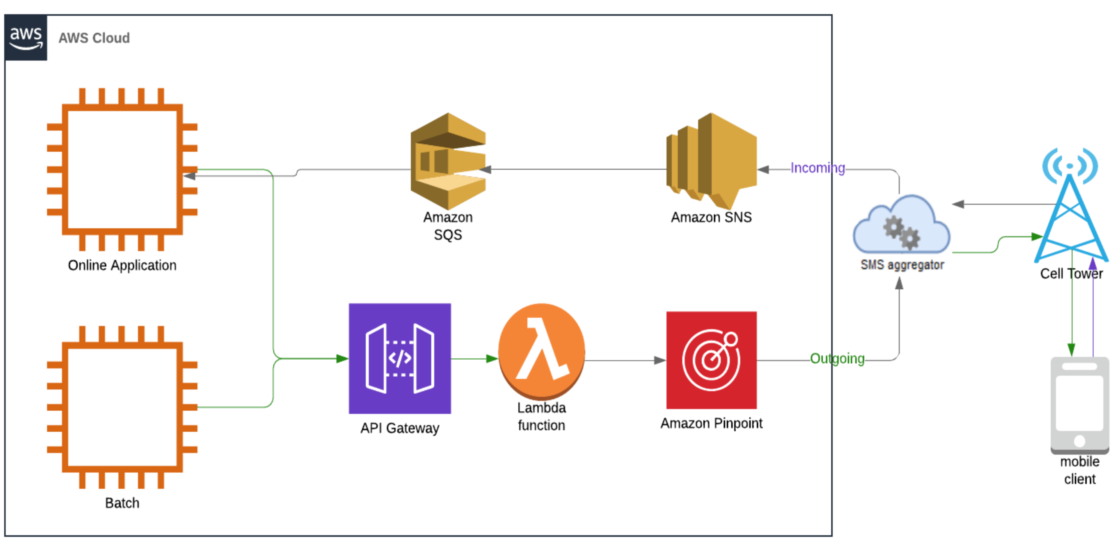
A REST API will be implemented for sending an outbound text message from CalSAWS application. This REST API will be responsible for communicating with the Texting provider. The CalSAWS application will make calls to the REST API to send text messages. The REST API will be implemented using the following services –

- Amazon API Gateway will be used for creating and maintaining the REST API. It will be the front door of the Texting service for sending text messages.
- The API will be backed by a serverless Lambda function. The Lambda function will implement the function to use Amazon Pinpoint service.
- Amazon Pinpoint service will be used for sending the Text message. It will also be responsible for provisioning, administration of Short codes and complying to Mobile and operator requirements.

2.2 Inbound text messaging

The inbound text messages will be queued for the CalSAWS application to consume those messages. Amazon Simple Queue Service (SQS) will be used as a queueing solution. The Pinpoint service will be configured to send the incoming text message to an Amazon SNS (Simple Notification Service) topic. The SQS queue will be subscribed to the SNS topic. Any incoming message to the topic will get queued into SQS for CalSAWS application to consume asynchronously.

Texting Service Architecture –



3 APPENDIX

Amazon Pinpoint - https://aws.amazon.com/pinpoint/features/engagement-channels/sms/

Two way messaging - https://docs.aws.amazon.com/pinpoint/latest/userguide/channels-sms-two-way.html

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-208250 DDID 713

Update Automated Regression Test (ART) scripts to account for CalSAWS Migration R4 system modifications

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	William Baretsky
	Reviewed By	Amy Gill, Sharon Teramura

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/11/2019	1.0	Original	William Baretsky
1/15/2020	1.1	Removed CA-207291 from the SCR list	William Baretsky

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1 OVERVIEW

1.1 Current Design

The suite of Automated Regression Test (ART) scripts are executed against the C-IV and LRS applications on a scheduled basis throughout each major release cycle. The ART scripts are updated as needed to account for system modifications implemented within each of the C-IV (M&O) and LRS (M&E) releases.

1.2 Requests

The ART scripts should also be updated to account for the system modifications being made as part of each CalSAWS Migration (DD&I) release.

1.3 Overview of Recommendations

Update the ART scripts to account for the system modifications being made as part of the fourth CalSAWS Migration release (R4). Update the underlying framework code modules used by the ART scripts as needed to support these changes.

1.4 Assumptions

1. No technical enhancements to the ART framework are required for CalSAWS R4.
2. The functional scope of the ART suite and each ART script will remain unchanged.
3. No more than 70% of the ART scripts will need to be updated.
4. No more than 30% of the ART framework code modules will need to be updated.

2 RECOMMENDATIONS

2.1 CalSAWS System Change Scope

2.1.1 Description of Changes

Update the ART scripts and underlying code modules to account for the system modifications being made under each of the following R4 SCRs:

SCR #	Summary
48397	DDID 1967: DDCR 4087: ACIN 1-08-03-Modify LRS to correctly identify "Client Request Withdrawals" as withdrawals rather than denials and auto generate the CW 10 with this action.
200450	DDID 1967: DDCR 4016: Apply New young child exemption to E2Lite
200958	DDID 1967: DDCR 3071: Add Validation to New / Reapplication Detail
201314	DDID 1967: DDCR 3018: Add Validation to Customer Appointment when Worker is not Valid
201444	DDID 1967: DDCR 4042: Allow Specific Households to be MCE Eligible
201451	DDID 1967: DDCR 4074: Increase Job Readiness hours to reflect California's Needy State
201525	DDID 1967: DDCR 5015, 5516: Update the manual EDBC process to allow run reasons to be used
203636	DDID 1967: Medi-Cal Renewal Periods for MPPP Households
207108	DDID 2302 - Updates to Standardized Bar Codes
207116	DDID 2276: Update the fraud tracking functionality
207121	DDID 2080, 2081: Update WTW functionality
207139	DDID 2194 - Add Positive Pay Interface Functionality to CalSAWS
207153	DDID 2132 - Create New Standardized Receipt Form for Receipt Detail and Transaction Detail Page
207157	DDID 2128 - Migrate the Tax Intercept Jobs into CalSAWS
207191	DDID 2086: Create a view history on any Employment Service Pages that have effective dating confirmation for records that are overwritten/deleted.
207208	DDID 2066 - Updates to Hunt v. Kizer functionality
207217	DDID 2057 - Update Display Name throughout the system
207218	DDID 2056: Add a Date Signed field to Document Detail page

SCR #	Summary
207226	DDID 2048 - Display all of the EDBC reasons that prevents the user from running EDBC
207250	DDID 1787 - Migrate the C-IV County Specific Batch Jobs (Phase 2)
207288	DDID 1556 - Update the logic on the Special Investigation Referral page
207332	DDID 1389 - Generate CSF 101 from Valuable Request Detail Page
207344	DDID 1360 - Add Direct Deposit Functionality to CalSAWS
207348	DDID 1327 - Migrate Valuable Categories from the 57 Migration Counties into CalSAWS
207357	DDID 1270 - Form Updates to Customer Activity Detail
207368	DDID 1198 - Update Generate Form button on Verification List page
207384	DDID 1062, 1063, 1066, 1172, 1240 - Add CMSP Notices of Action
207444	DDID 525, DDID 2277: Update the Special Investigation Detail page
207463	DDID 374 - Enhancements to Homeless Assistance Functionality in CalSAWS
207464	DDID 368 - Add New Homeless Customer Need Type Codes
211834	DDID 1346 - Updates to IEVS Review Dispositions page

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
713	The CONTRACTOR shall review and update the C-IV and LRS suite of Automated Regression Test (ART) scripts as required to account for the system modifications being made as part of the CalSAWS Migration. A complete set of regression scripts leveraging existing C-IV and LRS scripts is to be utilized and run automatically on an agreed upon frequency against the CalSAWS Software. The CONTRACTOR shall update the ART framework to support all browser versions supported by the CalSAWS Software.	N/A	Update the ART scripts to account for the system modifications being made under the CalSAWS Migration R4 SCRs. Update the ART framework code modules as needed to support the ART script changes mentioned above.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-211834 | DDID 1346

Updates to IEVS Review Dispositions page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Avi Bandaranayake
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/19/2019	1.0	Initial Draft	Avi Bandaranayake
12/6/2019	1.1	Removed old system release reference, corrected page name and expanded assumptions	Avi Bandaranayake
1/28/20	1.2	Updated Figure 2.1.1	Avi Bandaranayake

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1 OVERVIEW

This SCR is to migrate an additional value "In Review" for the Disposition Status on the IEVS Review Dispositions page. This SCR also covers making the following fields non-mandatory: Disposition Closure Code, Impact to AU and Discrepancy.

1.1 Current Design

In the current LRS release the option "In Review" is not available for the Disposition Status on the IEVS Review Dispositions page. The fields Disposition Closure Code, Impact to AU and Discrepancy become mandatory when adding or editing a disposition and changing the disposition status.

1.2 Requests

Update the IEVS Review Dispositions page as follows:

1) Migrate the dropdown value of "In Review" to the "Disposition Status" field.

2) Update the "Disposition Closure Code" field to be non-mandatory.

3) Update the "Impact to AU" field to be non-mandatory.

4) Update the "Discrepancy" field to be non-mandatory.

1.3 Overview of Recommendations

Add "In Review" to the dropdown options for Disposition Status on the IEVS Review Disposition page.

Remove mandatory field markers and validation for Disposition Closure Code, Impact to AU and Discrepancy.

1.4 Assumptions

1) There are no downstream impacts of adding the value "In Review" to the dropdown.
2) Changes for IEVS Assignment page are covered under CA-207330 DDID 1393.
3) Changes for IEVS Abstract Search page are covered under CA-207436 DDID 582.
4) Changes for IEVS Review Case Disposition page are covered under CA-207346 DDID 1346

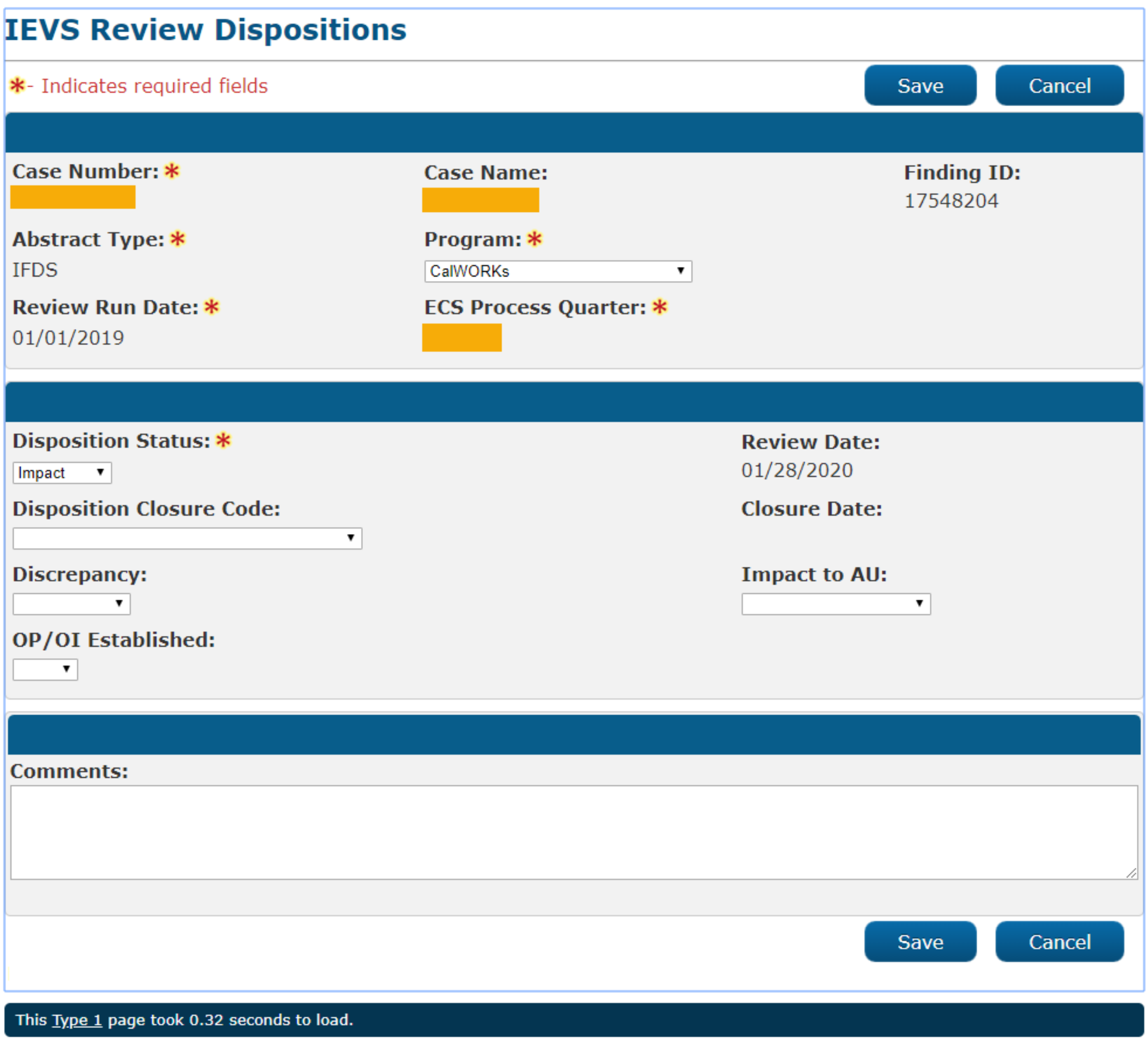
2 RECOMMENDATIONS

2.1 IEVS Review Dispositions

2.1.1 Overview

Adding a new value "In Review" to the Disposition Status dropdown. Remove mandatory field markers and validation for Disposition Closure Code, Impact to AU and Discrepancy.

2.1.2 IEVS Review Dispositions Mockup


IEVS Review Dispositions

*- Indicates required fields

Save | Cancel

Case Number: *

Case Name:

Finding ID:
17548204

Abstract Type: *
IFDS

Program: *
CalWORKs

Review Run Date: *
01/01/2019

ECS Process Quarter: *

Disposition Status: *
Impact

Review Date:
01/28/2020

Disposition Closure Code:

Closure Date:

Discrepancy:

Impact to AU:

OP/OI Established:

Comments:

Save | Cancel

This Type 1 page took 0.32 seconds to load.

Figure 2.1.1 – IEVS Review Dispositions Edit mode

2.1.3 Description of Changes

1. Add "In Review" to the dropdown options for Disposition Status on the IEVS Review Dispositions page.
2. Store the value in the database in the same table and column as the values currently in the dropdown.
3. Remove mandatory field markers for Disposition Closure Code, Impact to AU and Discrepancy.
4. Remove validation on save for Disposition Closure Code, Impact to AU and Discrepancy.

2.1.4 Page Location

Global: Special Units

Local: IEVS Abstract

Task: IEVS Dispositions Search

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1346	The CONTRACTOR shall update the IEVS Review Dispositions page and IEVS Review Case Disposition page as follows: 1) Migrate the dropdown value of "In Review" to the "Disposition Status" field 2) Update the "Disposition Closure Code" field to be non-mandatory 3) Update the "Impact to AU" field to be non-mandatory 4) Update the "Discrepancy" field to be non-mandatory And update the following for the IEVS Review Case Disposition page 1) Relabel "Disposition Date" to "Review Date" in the Associated Disposition section.	There are no other functional areas in the system that require these fields to be mandatory.	"In Review" will be added to the dropdown. Fields will be updated to be non-mandatory