

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-50293

ACL 11-80 - CalWORKs New & Revised
Overpayment Notice of Action Messages
Phase 1

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CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Jamie Ng
	Reviewed By	Lawrence Samy, Nithya Chereddy

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/04/2020	1.0	Original Draft	Jamie Ng
06/24/2020	1.1	Removed trigger updates after discussion with Fiscal	Jamie Ng

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1 OVERVIEW

This SCR is to update the following overpayment notices: ~~create M44-350I / M44-352H / M44-352A multiple NOAs~~ to the latest state version.

1.1 Current Design

Currently, ~~NOAs forms~~ that address the discovery of an overpayment needs to be updated to reflect state version.

1.2 Requests

CalWORKs Overpayment ~~NOAs~~-NOAs verbiage needs to be updated to reflect latest state version.

1.3 Overview of Recommendations

Revised text and templates for the ~~NOAs forms~~ below (1-3):

1. M44-~~350I~~ - Notice of Overpayment
2. M44-352H - Overpayment Adjustment
3. M44-352A - Notice of O/P and Demand

1.4 Assumptions

- ~~1.~~ There is no change to current triggers on M44-350-I , M44-352H and ~~M44-352A~~.
2. There is no change to C-IV as it will inherit updated notices at migration.
3. Threshold languages for M44-350I / M44-352H / M44-352A will be implemented with SCR CA-216862.

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2 RECOMMENDATIONS

Revise text and templates for the ~~forms~~NOAs below:

1. M44-0350-I - Notice Of Overpayment
2. M44-352H - Overpayment Adjustment
3. M44-352A - Notice of O/P and Demand

2.1 M44-350-I - Notice of Overpayment- Inform

2.1.1 Overview

M44-350I-Notice of Overpayment is an informational notice to notify clients about the discovery of an overpayment without an accompanying grant reduction.

M44-350I (11/11) is currently in the system and it is updated to reflect state version M44-350ISAR (9/13). Form name will remain as M44-350I.

State Form/NOA: M44-350I (9/13)

Programs: ~~Program(s): CalWorks~~CalWORKs

Action Type: Inform

Fragment Level: Person

Repeatable: ~~Yes, if overpayment happens again without an accompanying grant reduction~~

Forms Category: NOA

Attached Forms: NA 274G

Current Languages:

Current Language:

English

(Add Spanish)

Add new Language:

~~Spanish (Require translation)~~

2.1.2 Description of Change

~~Update~~Update ~~Notice of Action~~M44-350I-Notice Of Overpayment form (9/13) in English and Spanish.

Commented [HK1]: These Values are for NOA fragments, update/replace them for forms

Commented [NC2]: Design document follows the NOAs template, please update it to forms template.

2.1.2.1 Create 2.1.2.1 Update_CalWorks M44-350I NOA-Form Message Fragment-XDP

Update-Update_M44-350I -Notice Of Overpayment form (9/13) Fragment-Form with additional verbiage in English and Spanish.

Claim #: _____

Questions? Ask your Worker

3 **WARNING:** If you think this overpayment is wrong, ask for a hearing. The back of this page tells how. If you stay on aid, the County can collect an overpayment by lowering your monthly grant. If you go off aid before the overpayment is paid back, the County may take what you owe out of your state income tax refund or take other legal action to collect.

1 You got too much cash aid. You were overpaid \$ _____ from _____ to _____.

The over payment was

- the county's fault
- your mistake
- you intentionally caused the overpayment. We may charge you with a crime or bar you from aid for an intentional violation

Here's why:

The County cannot start collecting this overpayment yet because:

- It is mid-quarter. **2**
- We are already lowering your grant to collect a different overpayment.

Reg Cite : MPP 44-350.1 and MPP 44-352.4

M44-350 (11/11)

You will get a separate notice before we start collecting on this overpayment.

The next page(s) show how much cash aid you should have had for each month you were overpaid and the total amount you owe.

You do not have to use any Social Security or SSI benefits you get to repay this overpayment.

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 of Action does NOT change or stop Medi-Cal benefits. If there is a change in your Medi-Cal benefits, you will receive another notice. Keep using your plastic Benefits Identification Card(s).

CalFresh: This notice DOES NOT stop or change your CalFresh benefits. You will get a separate notice telling you about any changes to your food stamp benefits.

Receiving Medi-Cal and/or CalFresh only DOES NOT count against your cash aid time limits.

4 **INSTRUCTIONS:** Use to notify of an overpayment when grant adjustment may not yet begin. Specify the amount owed and the reason for the overpayment. Attach the appropriate Continuation page (NA 274 B, C, D, E or F) to show the overpayment computation.

Commented [MA3]: On the Mockup/Examples- where are you getting the version 11/11 that has the instructional paragraph under #4? This is the one I sent you the production Notice M44-350I, and it does not have the #4?

NOA-Form Mockups/Examples: See Supporting Documents #1

Questions? Ask your Worker

WARNING: If you think this overpayment is wrong, or if you think it was not your fault or a mistake (not on purpose), ask for a hearing. If you stay on aid, the County can collect an overpayment by lowering your monthly grant. If you go off aid before the overpayment is paid back, the County may take what you owe out of your state income tax refund or take other legal action to collect.

You got paid too much cash aid. **1** You were overpaid a total of \$ [redacted] . You will get a separate notice before we start collecting on this overpayment.

from [redacted] to [redacted].
We show how we figured the overpayment on the attached budget worksheet.

The over payment was

- the county's fault
- your mistake
- 2** you caused the overpayment because you either failed to report something, or reported something incorrectly on purpose to try to get more aid. You may be referred for criminal charges, or you may get a notice of proposed Intentional Program Violation penalty for this act.

3 Here's why you were overpaid: [redacted]

The County cannot start collecting this overpayment yet because:

- It is mid-period.
- We are already lowering your grant to collect a different overpayment.

Reg Cite : MPP 44-350.1 and MPP 44-352.4

M44-3501 (9/13)

Number	Existing Text	Updated Text
1	You were overpaid \$	You were overpaid a total of \$
2	you intentionally caused the overpayment. We may charge you with a crime or bar you from aid for an intentional violation	you caused the overpayment because you either failed to report something or reported something incorrectly on purpose to try to get more aid. You may be referred for criminal charges, or you may get a notice of proposed Intentional Program Violation penalty for this act.
2	The next page(s) shows how much will be taken out of each month's cash aid amount.	The next page show how much will be taken out of each month's cash-aid amount.

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3	N/A	INSTRUCTIONS: Use to notify of a grant adjustment on a previously noticed overpayment. Specify when the overpayment took place and the total amount owed. Attach the NA 275 to show the grant adjustment amount. Attach a copy of the Notice of Action that was sent when the overpayment was first discovered.
3	Here's why:	Here's why you were overpaid:
44	<p>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 away.</p> <p>Medi-Cal: This notice DOES NOT change or stop Medi-Cal benefits. If there is a change in your Medi-Cal Benefits, you will receive another notice. Keep using your Plastic Benefits Identification Card(s).</p> <p>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. Your Assistant Unit (AU) size is Your Income Reporting Threshold (IRT) is You must call your worker within 10 days when your income goes higher than your IRT level.</p>	(Delete Text)

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2.1.2.2 Update Form Variable Population

Questions? Ask your Worker

WARNING: If you think this overpayment is wrong, or if you think it was not your fault or a mistake (not on purpose), ask for a hearing. If you stay on aid, the County can collect an overpayment by lowering your monthly grant. If you go off aid before the overpayment is paid back, the County may take what you owe out of your state income tax refund or take other legal action to collect.

You got paid too much cash aid. You were overpaid a total of \$ 1

from 2 to 3.

We show how we figured the overpayment on the attached budget worksheet.

The over payment was

the county's fault

your mistake

4 you caused the overpayment because you either failed to report something, or reported something incorrectly on purpose to try to get more aid. You may be referred for criminal charges, or you may get a notice of proposed Intentional Program Violation penalty for this act.

Here's why you were overpaid:

5

The County cannot start collecting this overpayment yet because:

6 It is mid-period.

We are already lowering your grant to collect a different overpayment.

Reg Cite : MPP 44-350.1 and MPP 44-352.4

You will get a separate notice before we start collecting on this overpayment.

The next page(s) show how much cash aid you should have had for each month you were overpaid and the total amount you owe.

You do not have to use any Social Security or SSI benefits you get to repay this overpayment.

M44-350I (9/13)

<u>TEMPLATE REPOSITORY POPULATION VARIABLE ELEMENT</u>	<u>POPULATES WITH FORM GENERATION COMMENTS</u>	<u>EDITABLE POPULATION</u>	<u>TEMPLATE REPOSITORY POPULATION</u>	<u>POPULATES WITH FORM GENERATION</u>	<u>EDITABLE (TEMPLATE REPOSITORY - PRE-POPULATED)</u>
<u>1. Amount</u>	<u>Amount of Overpayment.</u>	<u>Editable when a blank form is generated. Pre-populated and static when form is generated in the context of a case.</u>	Y	<u>Y</u>	N
<u>2. Overpayment Start date</u>	<u>Start date of overpayment.</u>	<u>Editable when a blank form is generated. Pre-populated and static when form is generated in the context of a case.</u>	Y	<u>Y</u>	N
<u>3. Overpayment End Date</u>	<u>Last month of overpayment.</u>	<u>Editable when a blank form is generated. Pre-populated and static when form is generated in the context of a case.</u>	Y	<u>Y</u>	N

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<u>TEMPLATE REPOSITORY POPULATION VARIABLE ELEMENT</u>	<u>POPULATES WITH FORM GENERATION COMMENTS</u>	<u>EDITABLE POPULATION</u>	<u>TEMPLATE REPOSITORY POPULATION</u>	<u>POPULATES WITH FORM GENERATION</u>	<u>EDITABLE (TEMPLATE REPOSITORY - PRE-POPULATED)</u>
<u>4. Overpayment Error type Checkboxes</u>	<u>Checkboxes for Errors: Administrative Error, Client Error, Potential Intentional Program Violator (PIPV), or Intentional Program Violator (PV).</u>	<u>Editable when a blank form is generated. Pre-populated and static when form is generated in the context of a case.</u>	Y	<u>Y</u>	N
<u>NY5. Here's Why you were overpaid</u>	<u>Overpayment Discrepancy reason from BV discrepancy NOA table.</u>	<u>Editable when form is generated from the Template Repository. Pre-populated and static when form is generated in the context of a case.</u>	Y	<u>Y</u>	N
<u>65. The county cannot collect overpayment checkboxes</u>	<u>Checkboxes for Collection Delay Reason.</u>	<u>Editable when a blank form is generated. Pre-populated and static when form is generated in the context of a case.</u>	Y	<u>Y</u>	N

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Update the logic to trigger for CW cases when an overpayment is established via the Recovery account Detail page, due to Overpayment Error Type reasons: Administrative Error, Client Error, Potential Intentional Program Violator (PIPV), or Intentional Program Violator (PV). Batch Trigger thru the Fiscal recovery account activation batch job for CalWORKs recovery accounts that are pending.

2.2 M44-352H (11/11) - Overpayment Adjustment

2.2.1 Overview

M44-352H (11/11)- Overpayment Adjustment will be used to notify clients that grant adjustment will now begin on a previously noticed overpayment.

State Form/NOA: M44-352H- (11/11)

Program(s): CalWorks

Current Programs: CalWORKs

Current Forms Category: NOA

Existing Languages:

English and Spanish

Attached Forms: N/A

Action Type: Change

Fragment Level: Person

Repeatable: Yes

Current Languages:

English and Spanish

Commented [HK4]: Update to 'CalWORKs'

Commented [HK5]: These Values are for NOA fragments, update/replace them for forms

2.2.2 Description of Change

Update ~~Notice of Action~~ M44-352H form in English and Spanish to match state version (11/11).

**2.2.2.1 ~~Create-Update CalWorks~~ M44-352H Form XDP NOA Message
~~Fragment XDP~~**

Update M44-352H form ~~Fragment~~-XDP_ to reflect state version (11/11).

Updated Languages:

English and Spanish

Questions? Ask your Worker

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

As of _____, the County is changing
1 your cash aid from \$ _____ to \$ _____.

Here's why:

You were overpaid \$ _____ from _____
to _____.

The County sent you a notice about this overpayment on
_____ but at that time we did not start collecting
because:

- It is mid-quarter. 2
- We were already lowering your grant to collect a
different overpayment.

The next page shows how much will be taken out of each
month's cash aid amount.

Please see the notice we sent you on _____
(attached), which showed how much cash aid you should
have had for each month you were overpaid.
Your new cash aid amount is figured on this page.

You do not have to use any Social Security or SSI benefits
you get to repay this overpayment.

Rules: These rules apply; you may review them at your welfare office:
Reg Cite: 44-352.4, 44-350.1.

WARNING: If you think this overpayment is wrong, this is your last chance ask for a hearing. The back of this page tells how. If you stay on aid, the County can collect an overpayment by lowering your monthly grant. If you go off aid before the overpayment is paid back, the County may take what you owe out of your state income tax refund or take other legal action to collect.

Questions? Ask your Worker

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

As of _____, the County is changing
1 your cash aid benefits from \$ _____ to \$ _____.

Here's why:

You were overpaid \$ _____ from _____ to _____.

The County sent you a notice about this overpayment on _____, but at that time we did not start collecting because:

It is mid-quarter.

We are already lowering your grant to collect a different overpayment.

2 The next page show how much will be taken out of each month's cash aid amount.

Please see the notice we sent you on _____ (attached), which showed how much cash aid you should have had for each month you were overpaid. Your new cash aid amount is figured on this page.

You do not have to use any Social Security or SSI benefits you get to repay this overpayment.

Rules: These rules apply; you may review them at your welfare office:
 Reg Cite: 44-352.4, 44-350.

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 away.

Medi-Cal: This notice DOES NOT change or stop Medi-Cal benefits. If there is a change in your Medi-Cal Benefits, you will receive another notice. Keep using your Plastic Benefits Identification Card(s).

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.

WARNING: If you think this overpayment is wrong, this is your last chance ask for a hearing. The back of this page tells how. If you stay on aid, the County can collect an overpayment by lowering your monthly grant. If you go off aid before the overpayment is paid back, the County may take what you owe out of your state income tax refund or take other legal action to collect.

INSTRUCTIONS: Use to notify of a grant adjustment on a previously noticed overpayment. Specify when the overpayment took place and the total amount owed. Attach the NA 275 to show the grant adjustment amount. Attached a copy of the Notice of Action that was sent when the overpayment was first discovered. **3**

M44-352H Rev. (8/13) OVERPAYMENT ADJUSTMENT

NOA Mockups/Examples: See Supporting Documents #2

Number	Existing Text	Updated Text
1	MESSAGE: As of _____, the County is changing your monthly cash aid benefits from \$ _____ to \$ _____.	MESSAGE: As of _____, the County is changing your cash aid from \$ _____ to \$ _____.
2	The next page(s) shows how much will be taken out of each month's cash aid amount.	The next page show how much will be taken out of each month's cash aid amount.
3	N/A	INSTRUCTIONS: Use to notify of a grant adjustment on a previously noticed overpayment. Specify when the overpayment took place and the total amount

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		owed. Attach the NA 275 to show the grant adjustment amount. Attach a copy of the Notice of Action that was sent when the overpayment was first discovered.
<u>2</u>	<u>We are already lowering your grant to collect a different overpayment.</u>	<u>We were already lowering your grant to collect a different overpayment.</u>
<u>34</u>	<p><u>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 away.</u></p> <p><u>Medi-Cal: This notice DOES NOT change or stop Medi-Cal benefits. If there is a change in your Medi-Cal Benefits, you will receive another notice. Keep using your Plastic Benefits Identification Card(s).</u></p> <p><u>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. You Assistant Unit (AU) size is</u> <u>Your Income Reporting Threshold (IRT) is</u> <u>You must call your worker within 10 days when your income goes higher than your IRT level.</u></p>	(Delete Text)
4	<p>You Assistant Unit (AU) size is . Your Income Reporting Threshold (IRT) is</p> <p>You must call your worker within 10 days when your income goes higher than your IRT level.</p>	(Delete Text)

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~~2.2.2.2 Update CalWorks Approval Fragment Generation~~

~~Trigger for CalWORKs cases to notify the participant of an overpayment and subsequent grant adjustment. Overpayment is established due to Over Payment Error Type reasons: Administrative Error, Client Error, Potential Intentional Program Violator (PIPV), or Intentional Program Violator (PV)~~

Commented [NC6]: Remove the recommendation instead of striking it out if it is not needed. Applies to the rest of the document.

2.3 M44-352A (11/11) - Notice of O/P and Demand

2.3.1 Overview

M44-352A (11/11) - Notice of O/P and Demand is used for CalWORKs program at case termination when an Overpayment claim exists and collection has not been initiated, on a terminated case.

State Form/NOA: M44-352A (11/11)

Program(s): CalWorks

Current Programs: CalWORKs

Current Forms Category: NOA

Existing Languages:

Action Type: Demand

Fragment Level: Person

Repeatable: Yes

Current Languages:

English and Spanish

Attached Forms: NA 274G; NA Back 9

2.3.2 Description of Change

Update M44-352A - Notice of O/P and Demand in English and Spanish to match state version (11/11)

~~2.38.2.1 Create Update CalWorks M44-352A Form XDP NOA Message Fragment XDP~~

Update M44-352A- Notice of O/P and Demand Fragment to match state version (11/11).

Updated Languages:

English and Spanish

Claim #: _____

Questions? Ask your Worker.

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

While you were aided, you were overpaid. Though you stopped getting cash aid, you still owe us for your overpayment. You owe \$ _____

Here's why:

The amount you owe is now due. You must pay back the money or show the County your plan for paying it back before _____. If you do not, the County may take what you owe out of your state income tax refund or take other legal action to collect.

The next page(s) show the cash aid you were paid and what you should have been paid for each month you were overpaid.

If you pay by check or money order, send or bring it to:



If you pay with cash, pay in person and be sure to ask for a numbered receipt with the County's name on it.

You do not have to use any Social Security or SSI benefits you get to repay this overpayment.

WARNING: If you think this overpayment is wrong, this is your last chance to ask for a hearing. The back of this page tell how. If you do not repay this overpayment, the County may try to collect it from someone in your cash aid family group.

Rules: These rules apply. You may review them at your Welfare Office:
MPP:44-352.4 and MPP 44-350.1

M44-352A (11/11)

NOA Mockups/Examples: See Supporting Documents #3

Claim #: _____
 Questions? Ask your Worker.

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

While you were aided, you were overpaid. Though you stopped getting cash aid, you still owe us for your overpayment. You owe \$ _____.

Here's why:
 The amount you owe is now due. You must pay back the money or show the County your plan for paying it back before _____. If you do not, the County may take what you owe out of your state income tax refund or take other legal action to collect.

The next page(s) show the cash aid you were paid and what you should have been paid for each month you were overpaid. If you pay by check or money order, send or bring it to:



If you pay with cash, pay in person and be sure to ask for a numbered receipt with the County's name on it.

You do not have to use any Social Security or SSI benefits you get to repay this overpayment.

WARNING: If you think this overpayment is wrong, this is your last chance to ask for a hearing. The back of this page tell how. If you do not repay this overpayment, the County may try to collect it from someone in your cash aid family group.

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 of Action does NOT change or stop Medi-Cal benefits. If there is a change in your Medi-Cal benefits, you will receive another notice. Keep using your plastic Benefits Identification Card(s).

CalFresh: This notice DOES NOT stop or change your food stamp 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.

INSTRUCTIONS: Use to notify and demand repayment of former recipients of an overpayment. Specify the amount owed and the reason for the overpayment. Fill in the deadline date for paying or submitting a plan for repayment, and the county address. Attach Continuation Page (NA 274 B, C, D, E or F) to show the overpayment computation. This message replaces M44-352A dated 01-01-98.

Rules: These rules apply. You may review them at your Welfare Office: MPP 44-352.4 and MPP 44-350.1

M44-352A

Description	Existing Text	Updated Text
+		<p>INSTRUCTIONS: Use to notify and demand repayment of former recipients of an overpayment. Specify the amount owed and the reason for the overpayment. Fill in the deadline date for paying or submitting a plan for repayment, and the county address. Attach Continuation Page (NA 274 B, C, D, E or F) to show the overpayment computation.</p> <p>This message replaces M44-352A dated 01-01-98.</p>

1	<p><u>EBT:</u> Keep your plastic Golden State Advantage card if you use Electronic Benefit Transfer (EBT), even if your aid is terminated. <u>Please do not throw it away.</u></p> <p><u>Medi-Cal:</u> This Notice of Action does NOT change or stop Medi-Cal benefits. If there is a change in your Medi-Cal benefits, you will receive another notice. <u>Keep using your plastic Benefits Identification Card(s).</u></p> <p><u>CalFresh:</u> This notice DOES NOT stop or change your food stamp benefits. You will get a separate notice telling you about any changes to your CalFresh benefits.</p> <p><u>Receiving Medi-Cal and/or CalFresh only DOES NOT count against your cash aid time limits.</u></p>	(Delete Text)
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3 SUPPORTING DOCUMENTS

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

Commented [HK7]: Remove the Instructions for Creating the Design document

Number	Functional Area	Description	Attachment
1	Form	M44-350I mockup	M44-350I_EN 9.2013 M44-350I_EN.pdf .pdf M44-350I_SP 9.2013.pdf
2	Form	M44-352H mockup	M44-352H_EN 11.2011.pdf M44-352H_EN.pdf M44-352H_SP 11.2011.pdf

3	Form	M44-352A mockup	M44-352A_EN_11.2011 M44-352A_EN.pdf .pdf M44-352A_SP_11.2011 -.pdf
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4 REQUIREMENTS

[Document what requirements are being addressed with this design and how they are being met]

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.6 CAR-1242	The LRS shall produce notices, NOAs, forms, letters, stuffers, and flyers, either generated by the LRS or initiated by COUNTY-specified Users, that may be sent to an applicant, participant, caregiver, sponsor, authorized representative, Vendor, landlord, and/or any other public or private individual or agency.	Update verbaige on M44-350! M44-352H M44-352A overpayment forms in English and Spanish

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

5 MIGRATION IMPACTS

[Document any migration impacts such as data model or potential business process changes]

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

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-57974 | CIV-2522

Update EBT Card Detail and EBT Account Detail Pages

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
05/05/2020	1.0	Initial Version	Jimmy Tu

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1 OVERVIEW

This SCR is a request to close the gap in between C-IV (2522) and LRS/CalSAWS. C-IV already has this functionality and LRS/CalSAWS is being updated to be the same.

1.1 Current Design

1. EBT Account Detail Page:
 - a. The Status on the EBT Account Detail Page is decoded information from data provided by the EBT Vendor via a host-to-host message.
 - b. The Status Date (in Current Cards Table) is the latest status date in LRS/CalSAWS for an EBT card and is not extracted from the host-to-host message.
2. EBT Card Detail Page:
 - a. The CARDHIST Host-to-Host command is not being used in the LRS System.

1.2 Requests

The recommendation is to eliminate the difference between C-IV and LRS/CalSAWS. This will bring LRS/CalSAWS up to the same functionality as C-IV.

1.3 Overview of Recommendations

1. Remove the Status Date column in the Current Cards section of the EBT Account Detail Page.
2. Add an EBT Card Action History section to the EBT Card Detail page.
3. Update Page Mapping to reflect the added and deleted fields

1.4 Assumptions

1. This change is only for the LRS/CalSAWS, this function is already implemented in the C-IV system. This will bring LRS/CalSAWS to the same functionality as C-IV.

2 RECOMMENDATIONS

2.1 EBT Account Detail Page

2.1.1 Overview

The EBT Account Detail Page shows basic information about an EBT Account. It details the programs an account is enrolled in, the current cards issued, and their statuses.

Currently, EBT Account Detail Page, displays a new status date every time the EBT Card Detail Page is edited/updated. Displaying the latest of these

dates in the Current Cards section (in EBT Account Detail Page) next to the latest card status retrieved from the EBT Vendor could be confusing since the two data points are not always related

2.1.2 Account Detail Page Mockup

Figure 2.1.1 – Account Detail Page Mockup – Status Date Removal

EBT Account Detail

Add Card Close

Account Number: 1901B208U30	Begin Date: 05/29/2015	End Date:
Card Holder: * [REDACTED]	Card Access Type: * Cash & CalFresh	Card Status: Issued

Cash

Status: Active	Balance: \$20.01
--------------------------	----------------------------

CalFresh

Status: Dormant/Expunged	Balance: \$6,776.00	Reactivate
------------------------------------	-------------------------------	-------------------------

▶ [EBT Account History](#)

Current Cards

Name	Recipient Type	Card Number	Access Type	Status
[REDACTED]	Primary	0766209833184438	Cash & CalFresh	Issued
[REDACTED]	Primary	0766200984150775	Cash & CalFresh	Cancelled

2.1.3 Description of Changes

1. Remove the Status Date column in the Current Cards section of the EBT Account Detail page.

2.1.4 Page Location

- **Global: Fiscal**
- **Local: EBT**
- **Task: EBT Account List**

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

2.1.6 Page Mapping

1. On the Page Mapping for the EBT Account Detail page, remove the following fields:
 - a. Status Date - EBT_CARD_DETL - STAT_DATE

2.1.7 Page Usage/Data Volume Impacts

None.

2.2 EBT Card Detail Page

2.2.1 Overview

The EBT Card Detail Page shows basic information for EBT Cards. It shows card information, demographic information, status history, and demographic history.

This page is being updated to include an EBT Card Action History section to track all changes made to an EBT Card. This will keep track of dates and changes so we can remove the Status Date field from the Current Cards section on the EBT Account Detail Page.

2.2.2 EBT Card Detail Page Mockup

Figure 2.1.2 – EBT Card Detail Page – Adding EBT Card Action History Table

EBT Card Detail

*- Indicates required fields

Select Printer Reissue Edit Close

Card Number: 0766201233857365 Account Number: [19B073X50000010](#)

Card Information

Name: * [Redacted] Recipient Type: * Primary Access Type: * Cash & CalFresh Status Date: 01/22/2020

Delivery Method: * Pickup Status: * Ready to Print Status Reason: PIN Locked: Yes [Unlock PIN](#) Restaurant Meals: No

Demographic Information

LRS Address: [Redacted] EBT Address: [Redacted]

Date of Birth: [Redacted] SSN: [Redacted] Date of Birth: [Redacted] SSN: [Redacted]

Status History

Status	Status Reason	Access Type	Worker ID	Status Date
Ready to Print		Cash & CalFresh	527087	01/22/2020
New		Cash & CalFresh	527087	01/22/2020

EBT Card Action History

Action Date	Action Taken	Card Status
-------------	--------------	-------------

EBT Demographics History

Status Date	Status	Status Reason
-------------	--------	---------------

2.2.3 Description of Changes

1. Add an EBT Card Action History section to the EBT Card Detail page.
 - a. This section will contain a list of the EBT Card actions performed on the EBT card.
 - b. This information will be retrieved from the EBT Vendor via Host-to-Host messages.
 - c. The list will be in chronological order from newest to oldest.
 - d. The table will contain the following fields:
 - i. Action Date - The date when the action occurred, as provided by the EBT Vendor.
 - ii. Action Taken - Description of the specific action taken.

1. This description is defined by the EBT Vendor
- iii. Card Status - Card Status at the time of the action.
 1. The status is a decoded value of the status provided by the EBT Vendor.

2.2.4 Page Location

- **Global: Fiscal**
- **Local: EBT**
- **Task: EBT Account List**

2.2.5 Security Updates

3. Security Rights

Security Right	Right Description	Right to Group Mapping

4. Security Groups

Security Group	Group Description	Group to Role Mapping

2.2.6 Page Mapping

1. For EBT Card Detail page, add the following fields:
 - a. Action Date - The date when the action occurred.
 - i. This date is provided by the EBT Vendor
 - b. Action Taken - Description of the specific action taken.
 - i. This description is defined by the EBT Vendor
 - c. Card Status - Card Status at the time of the action.
 - i. The status is a decoded value of the status provided by the EBT Vendor.

- d. Card Status - 2062 - This field displays the card status at the time of the action, as provided by the EBT Vendor.

2.2.7 Page Usage/Data Volume Impacts

None.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.14.3.4	The LRS shall track and keep a historical record of all benefit issuances, to be displayed to COUNTY-specified Users upon inquiry, including original issuance LRS data, current issuance LRS Data, and all changes made to the issuance.	This requirement is met by updating the EBT Card Detail Page to include an EBT Card Action History section to track all the changes made to the EBT Card.
2.15.1.1	The LRS shall display EBT LRS Data online from EBT Vendor to COUNTY-specified Users, upon inquiry.	This requirement is met by making sure information on the EBT Card Detail Page is retrieved by Host-to-Host messages from the EBT Vendor.

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
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5 MIGRATION IMPACTS

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

6 OUTREACH

None.

7 APPENDIX

None.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200685

DDCR 3016: Updates to Child Care Need Detail
Page

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Gillian Noelle Bendicio
	Reviewed By	Long Nguyen, Michael Wu, Shilpa Suddavanda, Christine Altavilla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
05/07/2020	.1	Initial Revision	Gillian Noelle Bendicio

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1 OVERVIEW

1.1 Current Design

Currently, the Child Care Need Detail page is used to capture the need for Child Care Supportive Services for the system case.

1.2 Requests

The C-IV System has made updates to the Child Care Need Detail page which is not included in LRS/CalSAWS. A request is made to apply these updates to LRS/CalSAWS to help record the Child Care Need accurately.

1.3 Overview of Recommendations

1. Rename fields to state if they are referring to the parent or the child in the program.
2. Add new need reasons.
3. Add new special need options.
4. Add a new dynamic field that is dependent to the 'Non-Traditional' special need option.

1.4 Assumptions

1. Existing fields and dropdowns not mentioned in this design document will retain their current functionality.
2. The C-IV functionality did not fully support the multi-selection of program persons on the Child Care Need Detail page. As such, this design will not cover that requirement.

2 RECOMMENDATIONS

The Child Care Need Detail page will be updated to include the enhancement implemented and documented by C-IV SCR 42391.

2.1 Child Care Need Detail

2.1.1 Overview

This page is used to document the need for Child Care Supportive Services for the system case. It will be updated to allow the worker to report more accurate information regarding the need.

2.1.2 Child Care Need Detail Mockup

Child Care Need Detail

*- Indicates required fields

Edit

Close

Name: *

Person, Parent 34M

Parent's Need Reason(s):

Homeless - Seeking Permanent Housing

Child's Special Need: *

Non-Traditional Hours

Non-Traditional Hours: *

Yes

Begin Date: *

05/01/2020

End Date:

Edit

Close

Figure 2.1.1 – Child Care Need Detail in View Mode

Child Care Need Detail

*- Indicates required fields

Save and Return

Cancel

Name: *

Person, Parent 34F

Parent's Need Reason(s):

Diversion
Education or Training
Homeless - Seeking Permanent Housing
Incapacitated

Child's Special Need: *

Non-Traditional Hours

Non-Traditional Hours: *

Yes

Begin Date: *

05/01/2020

End Date:

Save and Return

Cancel

Figure 2.1.2 – Child Care Need Detail in Create/Edit Mode

2.1.3 Description of Changes

1. Rename the 'Need Reasons' list to 'Parent's Need Reason(s)' as shown in Figures 2.1.1 and 2.1.2.
2. Update the 'Parent's Need Reason(s)' list option 'Seeking Permanent Housing' to 'Homeless – Seeking Permanent Housing'.
3. Rename the 'Special Need' dropdown to 'Child's Special Need' as shown in Figures 2.1.1 and 2.1.2.
4. Add the following options to the 'Child's Special Need' dropdown:
 - a. Homeless
 - b. Non-Traditional Hours
 - i. Add a new dynamic, required field titled 'Non-Traditional Hours' with the following dropdown options:
 1. Yes
 2. No
 - ii. The 'Non-Traditional Hours' will only display when 'Non-Traditional Hours' is selected for the 'Child's Special Need' dropdown as shown in Figure 2.1.2.

2.1.4 Page Location

- **Global: Child Care**
- **Local: Case Summary**
- **Task: Child Care Needs**

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

Security Group	Group Description	Group to Role Mapping

2.1.6 Page Mapping

Update the renamed dropdown and list.

Add the Non-Traditional Hours field.

2.1.7 Page Usage/Data Volume Impacts

No impact to this section.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.28.2.18.1	<p>The LRS shall include functionality to support child care services, for the following:</p> <ul style="list-style-type: none"> a. Child care provider information; b. Referrals; c. Alert notices and NOA s; d. Tracking of activity and authorizations by child and case; e. Tracking of payments issued; f. Alternative Payment Program (APP) information; and g. Tracking and control of child care provider payment requests. 	Updated the Child Care Need Detail page which is required to activate a Child Care program

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

5 MIGRATION IMPACTS

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

6 OUTREACH

7 APPENDIX

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200686

DDCR 3084: MB 14-03 - Update Family Fee from
Daily Rate to Monthly

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Gillian Noelle Bendicio
	Reviewed By	Long Nguyen, Getnet Beyene, Michael Wu, Robert Untalan, Christine Altavilla, Shilpa Suddavanda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/08/2020	.1	Initial Revision	Gillian Noelle Bendicio

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1 OVERVIEW

Effective July 1, 2014, a new family fee schedule takes into effect and applies to both existing and new families in the Child Care (CC) program. Families will be assessed either a flat full-time monthly fee or part-time fee based on hours of care certified for the month, income, and family size.

1.1 Current Design

The LRS/CalSAWS has been updated to include the provisions in Management Bulletin 14-03 through CA-210493. As per MB 14-03, the Daily Family Fee is valid until one of the following factors have occurred: Intake, Data Change or Redetermination. The system will not allow the worker to use the Daily Family Fee rate beginning July 1, 2014.

1.2 Requests

The LRS/CalSAWS will need to be updated to allow the worker to use the Daily Family Fee rate when calculating the CC benefits that the system case is entitled to.

1.3 Overview of Recommendations

1. Update the Child Care Payment Calculation List page to allow a worker to choose a benefit month and prevent them from adding a payment calculation record when there is no eligibility record applicable on the benefit month.
2. Update the Child Care Payment Calculation Detail to allow the worker to choose the type of family fee to apply and use the fee in the calculation.
3. Update the Child Care Reporting Detail to make sure the request month falls between an eligibility period.

1.4 Assumptions

1. Page components that were not mentioned in this SCR will retain their current functionality.
2. The CCRR 100 has been migrated over to the LRS/CalSAWS prior to this SCR.

2 RECOMMENDATIONS

2.1 Child Care Payment Calculation List

2.1.1 Overview

The Child Care Payment Calculation List is accessed by navigating to a child certificate record by going to the Child Certificate Detail page and clicking the 'View Payment Calculation List' button on View mode. This page allows the worker to view all CC payment calculation records linked to the Child Care Certificate. It will also allow the worker to add new CC payment calculation records as well as edit them.

2.1.2 Child Care Payment Calculation List Mockup

Child Care Payment Calculation List

[Images](#) [Close](#)

- **Benefit Period** - Benefit Period must be a valid period on the Eligibility section.

Search Results Summary Results 1 - 7 of 7

[Add](#)

<input type="checkbox"/>	Child's Name	Provider	Benefit Month	Amount Issued	Creation Date
<input type="checkbox"/>	Name, Child	899288802 Org Name	04/2020		06/30/2020
	Name, Child	899288802 Org Name	11/2019	300.35	12/13/2019

[Remove](#)

Benefit Period: * [Add](#)

[Images](#) [Close](#)

Figure 2.1.1 – Child Care Payment Calculation List

2.1.3 Description of Changes

1. Add the mandatory date field 'Benefit Period' on the left of the 'Add' button as shown on Figure 2.1.1. The date format will be 'mm/dd/yyyy'.
 - a. The date entered in this field will be used to prepopulate the 'Benefit Month' field on the Child Care Payment Calculation Detail page.
2. Add a new targeted validation to ensure that the new CC payment calculation detail record falls within the date range of the Child Care eligibility record.

- a. Validation Message: 'Benefit Period – Benefit Period must be a valid period on the Eligibility section.'
- b. The Child Care eligibility record is found on the Child Care Program Detail page.

2.1.4 Page Location

- **Global: Child Care**
- **Local: Case Summary**
- **Task: Child Care Certificates → Child Care Certificates List → Child Care Certificate Detail → Child Care Payment Calculation List**

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

2.1.6 Page Mapping

Add the Benefit Period field to the page mapping for this page.

2.1.7 Page Usage/Data Volume Impacts

No impact to this section.

2.2 Child Care Customer Reporting Detail

2.2.1 Overview

The Child Care Customer Reporting Detail page is accessible when a CCRR 100 form has been generated and sent through the Child Care Certificate page. This page will allow the worker to add a payment calculation record when the accessed customer reporting record is marked completed by answering 'Yes' on the County Completeness Determination and Reimbursement Eligibility Determination sections.

2.2.2 Child Care Customer Reporting Detail Mockup

Child Care Customer Reporting Detail

*- Indicates required fields

Add Payment Calculation

Edit

Close

- **Request Month** - Request Month must be a valid period on the Eligibility section.

Request Month:

04/01/2020

Certificate Id:

[808703367](#)

County Completeness Determination	This Report
Does the information on the CCRR alone or combined with the information from previously submitted CCRR for the same service month, equal a complete and correct CCRR? *	Yes

Reimbursement Eligibility Determination	This Report
1. Were the Child Care Services needed? *	Yes
2. Was the customer participating in a county-approved activity during the hours of care? *	Yes
3. Are all other eligibility requirements satisfied? *	Yes

Report Status History		
Status	Date	Updated by
Reviewed	06/30/2020	284593
Received	05/14/2020	258735
Sent	03/25/2020	186481
Generated	03/22/2020	203459

Add Payment Calculation

Edit

Close

Figure 2.2.1 – Child Care Customer Reporting View Mode

Child Care Customer Reporting Detail

*- Indicates required fields

Save and Add Payment Calculation

Save and Return

Cancel

- **Request Month** - Request Month must be a valid period on the Eligibility section.

Request Month:

04/01/2020

Certificate Id:

[808703367](#)

County Completeness Determination	This Report
Does the information on the CCRR alone or combined with the information from previously submitted CCRR for the same service month, equal a complete and correct CCRR? *	Yes ▾

Reimbursement Eligibility Determination	This Report
1. Were the Child Care Services needed? *	Yes ▾
2. Was the customer participating in a county-approved activity during the hours of care? *	Yes ▾
3. Are all other eligibility requirements satisfied? *	Yes ▾

Report Status History		
Status	Date	Updated by
Reviewed	06/30/2020	284593
Received	05/14/2020	258735
Sent	03/25/2020	186481
Generated	03/22/2020	203459

Save and Add Payment Calculation

Save and Return

Cancel

Figure 2.2.2 – Child Care Customer Reporting Edit Mode

2.2.3 Description of Changes

1. Add a new targeted validation to the Child Care Customer Reporting Detail page to ensure that the new CC payment calculation detail record falls within the date range of the Child Care eligibility record.
 - a. Validation Message: 'Request Month – Request Month must be a valid period on the Eligibility section.'

- b. **View Mode:** This will be triggered by clicking the 'Add Payment Calculation' button.
- c. **Edit Mode:** This will be triggered by clicking the 'Save and Add Payment Calculation' button.
- d. The Child Care eligibility record is found on the Child Care Program Detail page.

2.2.4 Page Location

- **Global: Child Care**
- **Local: Reporting**
- **Task: Child Care Customer Reporting**

2.2.5 Security Updates

3. Security Rights

Security Right	Right Description	Right to Group Mapping

4. Security Groups

Security Group	Group Description	Group to Role Mapping

2.2.6 Page Mapping

No impact to this section.

2.2.7 Page Usage/Data Volume Impacts

No impact to this section.

2.3 Child Care Payment Calculation Detail

2.3.1 Overview

The Child Care Payment Calculation Detail page is accessible through the Child Payment Calculation List and the Child Care Customer Reporting (for create mode only) pages. This page allows the worker to calculate the CC benefit that the child is entitled to using the certified hours of care, household size, and income. This page will be updated to apply the Family Fee stated in MB 14-03.

2.3.2 Child Care Payment Calculation Detail Mockup

Child Care Payment Calculation Detail

*- Indicates required fields

Images Accept Edit Close

Funding Source: Stage 1	Benefit Month: * 06/2020	Creation Date: 06/12/2020	Family Fee Monthly Rate: Full Time
Child Name: Child Name	Provider: 899188589 Org Name	Calculate using: * Least Rate	Employed: * Yes

Certified Care

Care Type	Rate Type	Provider Rate	RMR	Month Units	Total
Full Time	Monthly	\$584.00	\$800.70	1.0	\$584.00
Part Time	Monthly	\$541.50	\$567.03	0.0	\$0.00

Monthly Amount

Rate Sub-Total:	\$	584.00
Actual Amount Charged by the Provider:	\$	584.00
Part Time Family Fee:	\$0.00 / Month	- 0.00
Full Time Family Fee:	\$392.00 / Month	- 392.00
Materials/Registration Fee:	+	0.00
Disallowed Provider Vacation/Holiday Amount:	-	0.00
Sub-Total:	=	192.00
Total Amount Previously Authorized:	-	<u>0.00</u>
Overpayment Adjustment:	-	<u>0.00</u>
Authorized Amount:	=	192.00
Overpayment:	\$	0.00

Images Accept Edit Close

Figure 2.3.1 – Child Care Payment Calculation Detail View Mode (prior to accepting the benefit amount)

Child Care Payment Calculation Detail

*- Indicates required fields

Funding Source: Stage 1	Benefit Month: * 04/2020	Creation Date: 06/30/2020	Family Fee Monthly Rate: Full Time ▾
Child Name: Child Name	Provider: 899288802 Org Name	Calculate using: * Least Rate ▾	Employed: * Yes ▾

Certified Care						
Care Type	Rate Type	Provider Rate	RMR	Month Units	Total	
Part Time	Hourly	\$5.00	\$2.51	<input type="text" value="0.0"/>	\$0.00	
Full Time	Weekly	\$200.00	\$112.73	<input type="text" value="0.0"/>	\$0.00	

Additional Care						
Care Type	Rate Type	Provider Rate	RMR	Month Units	Total	
						<input type="button" value="Add Rate"/>

Monthly Amount			
Rate Sub-Total:		\$	0.00
Actual Amount Charged by the Provider:		\$	<input type="text" value="0.00"/>
Part Time Family Fee:	\$251.00 / Month	-	0.00
Full Time Family Fee:	\$502.00 / Month	-	502.00
Materials/Registration Fee:		+	<input type="text" value="0.00"/>
Disallowed Provider Vacation/Holiday Amount:		-	<input type="text" value="0.00"/>
Sub-Total:		=	(502.00)
Total Amount Previously Authorized:		-	<u>0.00</u>
Overpayment Adjustment:		-	0.00
Authorized Amount:		=	0.00
Overpayment:		\$	0.00

Figure 2.3.2 – Child Care Payment Calculation Detail Edit Mode

2.3.3 Description of Changes

1. Update the 'Benefit Month' field to be uneditable as shown in Figure 2.3.2. The data will be populated by either the Benefit Month selected on the Child Care Payment List page or the Request Month of the Child Care Reporting Detail record for the CCRR 100. The population is dependent on where the Child Care Payment Calculation Detail page is accessed.

2. Add the 'Family Fee Monthly Rate' dropdown field as shown on Figures 2.3.1 and 2.3.2.
 - a. The dropdown options are:
 - i. Part Time
 - ii. Full Time
 - b. This field will only display when the Family Fee is associated to the Benefit Month. This can be checked with the Child Care Eligibility record applicable for the benefit month and the Child Care Certificate associated to the CC payment calculation. The CC eligibility record will need to show a Family Fee for full time and part time and the 'Waive Family Fee' field is set to 'No'. The CC Certificate needs to display 'Yes' on the 'Apply Family Fee to this Certificate' field.
3. Update the multiplier for the 'Part Time Family Fee' and 'Full Time Family Fee' line items under the Monthly Section per family fee type as shown in Figure 2.3.2. The type of family fee applied is dependent on the type selected by the worker under the 'Family Fee Monthly Rate' dropdown.

2.3.4 Page Location

- **Global: Child Care**
- **Local: Reporting**
- **Task: Child Care Reporting Detail → Child Care Reporting List → Child Care Reporting Detail → Child Care Payment Calculation Detail**

2.3.5 Security Updates

5. Security Rights

Security Right	Right Description	Right to Group Mapping

6. Security Groups

Security Group	Group Description	Group to Role Mapping

Security Group	Group Description	Group to Role Mapping

2.3.6 Page Mapping

Add the Family Fee Monthly Rate field to the page mapping.

2.3.7 Page Usage/Data Volume Impacts

No impact to this section.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.28.2.18.1	<p>The LRS shall include functionality to support child care services, for the following:</p> <ul style="list-style-type: none"> a. Child care provider information; b. Referrals; c. Alert notices and NOA s; d. Tracking of activity and authorizations by child and case; e. Tracking of payments issued; f. Alternative Payment Program (APP) information; and g. Tracking and control of child care provider payment requests. 	<p>The Payment Calculation pages have been updated to allow the application of a Monthly Family Fee.</p>

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

5 MIGRATION IMPACTS

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

6 OUTREACH

7 APPENDIX

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200710

DDCR 3017: Child Care Approval Linked
Inconsistently on Program and Person Levels

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Gillian Noelle Bendicio
	Reviewed By	Long Nguyen, Getnet Beyene, Michael Wu, Robert Untalan, Christine Altavilla, Shilpa Suddavanda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
05/14/2020	.1	Initial Revision	Gillian Noelle Bendicio

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1 OVERVIEW

The C-IV System allows the Child Care Supportive Services (CC) program to have multiple applications linked through reapplication. The reapplication process creates events displayed on the Program Application History page. Additionally, the workers are able to set the program status of the CC program without needing to run EDBC. This System Change Request (SCR) will add the updates made to these processes onto the CalSAWS system.

1.1 Current Design

The CalSAWS currently does not allow the CC program to reopen through the reapplication process. The CC program is reopened through processing a new Child Care Request for the system case. The C-IV system allows the reopening of the program through rescission or reapplication. Additionally, the CalSAWS uses the effective dating framework when a worker is setting the program and program person statuses. This does not exist in the C-IV system.

1.2 Requests

The CalSAWS will need to be updated to allow the C-IV counties to process a system case's CC program. As documented in DDCR 3017, the CalSAWS system will need to be updated to allow the CC program to be linked to multiple program applications and have the program and person events properly aligned. This will allow for accurate data to be captured by the Pending Application List report.

1.3 Overview of Recommendations

1. Update the Child Care Detail page to display the 'Rescind' and 'Reapply' buttons.
2. Update the logic for inserting events when a CC program is reopened.
3. Add validation to the Child Care Person Detail page to prevent a worker from adding an end date to a Discontinued status.
4. Add validation to the Child Care Program Detail page to prevent a worker from adding a program status that is not aligned with the program person status/es.

1.4 Assumptions

1. Updates made in this SCR is limited to the Child Care program only. Any page components and logic not mentioned in this SCR will retain their current functionality.

2 RECOMMENDATIONS

2.1 Child Care Detail

2.1.1 Overview

The Child Care Detail page displays information regarding the CC program of the system case. Currently, it does not allow rescission and reapplication of the program when it is discontinued or denied.

2.1.2 Child Care Detail Mockup

Child Care Detail

*- Indicates required fields

View History

Save and Return

Cancel

Date: *

05/01/2020

View Date

Program Information

Status: *

Discontinued

Status Reason:

Transferred to Stage 2

Source: *

Other

Application Date: *

01/06/2020

Edit

Automatically Reassign When Activated:

Yes

Documents Provided Date: *

05/01/2020

Administrative Roles

Name	Administrative Role	Begin Date	End Date
NAME, PARENT 20F	Primary Applicant/Recipient	01/01/2020	

Edit

Add

Program Persons

Name	Role	Role Reason	Status	Status Reason
NAME, PARENT 20F	MEM	Parent	Discontinued	Transferred to Stage 2
NAME, BOY 1M	MEM	Child	Discontinued	Transferred to Stage 2

Edit

Edit

Rescind

Reapply

Secondary Assignment

Worker

Select

View History

Save and Return

Cancel

Figure 2.1.1 – Child Care Detail on Edit Mode

2.1.3 Description of Changes

1. Update the Child Care Detail page on Edit mode to display the 'Rescind' and 'Reapply' buttons when the program and/or program person(s) are 'Discontinued' or 'Denied' for the current view date.

2.1.4 Page Location

- **Global: Case Info**
- **Local: Case Summary**
- **Task: Case Summary**

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

2.1.6 Page Mapping

No impact to this section.

2.1.7 Page Usage/Data Volume Impacts

No impact to this section.

2.2 Child Care Program Detail

2.2.1 Overview

The Child Care Program Detail displays information regarding the Child Care Program status, members, and eligibility. Workers use this page to set the program and program person status and document eligibility.

2.2.2 Child Care Program Detail Mockup

Child Care Program Detail

* - Indicates required fields

Edit

Name: *

NAME, PARENT 20F

Display

From:

To:

View

Program Status: *

Status	Status Reason	Funding Source	Begin Date	End Date
Discontinued	Transferred to Stage 2	Stage 1	01/13/2020	

Members: *

Name	Role	Role Reason	Status	Status Reason	Begin Date	End Date
NAME, PARENT 20F	MEM	Parent	Discontinued	Transferred to Stage 2	01/13/2020	
NAME, CHILD 1M	MEM	Child	Discontinued	Transferred to Stage 2	01/13/2020	

Eligibility: *

Average Monthly Income	Household Members	Income Ceiling	Eligible	Begin Date	End Date
\$891.00	2	70% Median (\$0.00)	Yes	01/01/2020	

Time Limit:

SSN Consent Refused: *

No

Edit

Figure 2.2.1 – Child Care Program Detail on View Mode

Child Care Program Detail

* - Indicates required fields

Save Cancel

- **Add Status** - Program status is not aligned correctly with Person Status. Please adjust the Program Status.

Name: *

NAME, PARENT 20F

Display

From:

To:

View

Program Status: *

Status	Status Reason	Funding Source	Begin Date	End Date	
Active		Stage 1	01/13/2020		Edit Add Status

Members: *

Name	Role	Role Reason	Status	Status Reason	Begin Date	End Date	
NAME, PARENT 20F	MEM	Parent	Discontinued	Transferred to Stage 2	01/13/2020		Edit
NAME, BOY 1M	MEM	Child	Discontinued	Transferred to Stage 2	01/13/2020		Edit

[Add Status](#)

Eligibility: *

Average Monthly Income	Household Members	Income Ceiling	Eligible	Begin Date	End Date	
No Data Found						

[Add](#)

Time Limit:

SSN Consent Refused: *

- Select -

Save Cancel

Figure 2.2.2 – Child Care Program Detail on Edit Mode

2.2.3 Description of Changes

1. Update the Child Care Program Detail page to display the text ' * - Indicates required fields' under the page header as shown on Figures 2.2.1 and 2.2.2.
2. Add a new targeted validation message, 'Add Status – Program status is not aligned correctly with Person Status. Please adjust the Program Status.', whenever the worker attempts to save the page while the program and program person statuses are not aligned. Below are the

following scenarios in which the above validation message will be triggered:

- a. All program person statuses are discontinued, denied or pending but the program status is active.
- b. All program person statuses are discontinued, denied or active but the program status is pending.
- c. At least one program person status is active but the program status is either discontinued, denied, or pending.
- d. There exists a program person who is active or pending but the program status is either discontinued or denied.

2.2.4 Page Location

- **Global: Child Care**
- **Local: Case Summary**
- **Task: Child Care Program**

2.2.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

2.2.6 Page Mapping

No impact to this section.

2.2.7 Page Usage/Data Volume Impacts

No impact to this section.

2.3 Child Care Person Detail

2.3.1 Overview

The Child Care Person Detail is accessed through the Child Care Program Detail page by clicking the 'Edit' button next to the program person's name or the 'Add Status' button by the 'Members' section during Edit Mode. This page allows a worker to add a program person status for each participant.

2.3.2 Child Care Person Detail Mockup

Child Care Person Detail

*- Indicates required fields

Save and Return

Cancel

- **Status** - Cannot add an Approved status for a person who is currently Denied/Discontinued without re-application.

Name: *

NAME, BOY 1M

Role: *

MEM

Role Reason: *

Child

Status: *

Active

Begin Date: *

05/01/2020

End Date:

Save and Return

Cancel

Figure 2.3.1 – Validation when Program Person is set to 'Active' from 'Discontinued' or 'Denied' status

Child Care Person Detail

*- Indicates required fields

Save and Return

Cancel

- **End Date** - End Date cannot be entered when Denied/Discontinued person status.

Name: *

NAME, BOY 1M

Role: *

MEM

Status: *

Denied

Begin Date: *

05/01/2020

Role Reason: *

Child

Status Reason: *

Child exceeded age

End Date:

06/01/2020

Save and Return

Cancel

Figure 2.3.2 – Validation when adding an end date to a 'Discontinued' or 'Denied' status

2.3.3 Description of Changes

1. Add a new targeted validation message, "Status – Cannot add an Approved status for a person who is currently Denied/Discontinued without re-application.", to prevent a worker from adding an active status on a discontinued or denied CC program person as shown on Figure 2.3.1.
2. Update the page logic to have the 'Approved' event logged for the person application which is aligned with the approved program application and the person statuses linked to the approved person applications. The other program and person applications will have a 'Denied' event. This information will be displayed on the Program History Detail and Person History Detail pages.
3. Add a new targeted validation message, "End Date – End Date cannot be entered when Denied/Discontinued person status.", to prevent a worker from adding an end date with a 'Discontinued' or 'Denied' as shown on Figure 2.3.2.

2.3.4 Page Location

- **Global: Child Care**
- **Local: Case Summary**
- **Task: Child Care Program Detail**

2.3.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

2.3.6 Page Mapping

No impact to this section.

2.3.7 Page Usage/Data Volume Impacts

No impact to this section.

2.4 Program Status Detail

2.4.1 Overview

The Program Status Detail is accessed through the Child Care Program Detail page by clicking the 'Add Status' button on the Program Status section. This page allows the worker to change the status of the CC program.

2.4.2 Program Status Mockup

Program Status Detail

* - Indicates required fields

Save and Return Cancel

• **End Date** - End Date cannot be entered for Denied/Discontinued program status.

Primary:
PARENT NAME

Application Date: *
05/01/2020

Funding Source: *
Stage 1

Status: *
Discontinued

Status Reason: *
Didn't Meet CW Req

Begin Date: *
05/01/2020

End Date:
06/01/2020

Save and Return Cancel

Figure 2.4.1 – Program Status Detail with Validation for an End-Dated Denied/Discontinued Status

Program Status Detail

* - Indicates required fields

Save and Return Cancel

• **Program Status** - Cannot add an Approved status for a program which is currently Denied/Discontinued without re-application.

Primary:
PARENT NAME

Application Date: *
05/01/2020 [Edit](#)

Funding Source: *
Stage 1

Documents Provided Date: *
07/15/2019

Status: *
Active

Retro Benefits? *
No

Begin Date: *
05/01/2020

End Date:

Applicants to Activate *

	Name	DOB	Status	Begin Date	Role Reason
<input checked="" type="checkbox"/>	NAME, PARENT	01/01/2000	Discontinued	05/01/2020	Legal Guardian
<input checked="" type="checkbox"/>	NAME, BOY	01/02/2019	Discontinued	05/01/2020	Child

Save and Return Cancel

Figure 2.4.2 – Program Status Detail when Adding an Active Status After a Discontinued Status

Program Status Detail

*- Indicates required fields

Save and Return

Cancel

- **Program Status** - Cannot add a Denied status for a program which is currently Active.

Primary: PARENT NAME	Application Date: * 05/01/2020 <input type="button" value="Edit"/>
Funding Source: * Stage 1	Status Reason: * Child exceeded age
Status: * Denied	End Date:
Begin Date: * 05/01/2020 <input type="button" value="Calendar"/>	<input type="text"/> <input type="button" value="Calendar"/>

Save and Return Cancel

Figure 2.4.3 – Program Status Detail when Adding a Denied Status After an Active Status

2.4.3 Description of Changes

1. Update the Program Status Detail page to log a 'Denial' event when a worker is adding a new high-dated program status and changes the default application by selecting a different application from the application dropdown and the default application is still pending. This information will be displayed on the Program History Detail and Person History Detail pages.
2. Add a new targeted validation message, "End Date – End Date cannot be entered when Denied/Discontinued program status.", to prevent a worker from adding an end date with a 'Discontinued' or 'Denied' as shown on Figure 2.4.1.
3. Update the Program Status Detail page to log a 'Denial Rescinded' event when a worker is adding a pending program status on a denied program status. This information will be displayed on the Program History Detail and Person History Detail pages.
4. Update the Program Status Detail page to log a 'Discontinuance Rescinded' event when a worker is adding a pending program status on a discontinued program status. This information will be displayed on the Program History Detail and Person History Detail pages.
5. Add a new targeted validation message, "Program Status – Cannot add an Approved status for a program which is currently Denied/Discontinued without re-application.", to prevent a worker from adding an active status on a discontinued or denied CC program as shown on Figure 2.4.2.
6. Add a new targeted validation message, "Program Status – Cannot add a Denied status for a program which is currently Active.", to prevent a worker from adding a denied status on an active CC program as shown on Figure 2.4.3.

2.4.4 Page Location

- **Global: Child Care**
- **Local: Case Summary**
- **Task: Child Care Program Detail**

2.4.5 Security Updates

3. Security Rights

Security Right	Right Description	Right to Group Mapping

4. Security Groups

Security Group	Group Description	Group to Role Mapping

2.4.6 Page Mapping

No impact to this section.

2.4.7 Page Usage/Data Volume Impacts

No impact to this section.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.28.2.18.1	<p>The LRS shall include functionality to support child care services, for the following:</p> <ul style="list-style-type: none"> a. Child care provider information; b. Referrals; c. Alert notices and NOA s; d. Tracking of activity and authorizations by child and case; e. Tracking of payments issued; f. Alternative Payment Program (APP) information; and g. Tracking and control of child care provider payment requests. 	The Child Care status change process is updated to correct misaligned events logged on the program and person applications.

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

5 MIGRATION IMPACTS

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

6 OUTREACH

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-201274

DDCR 3524 and 5032: Update Reception Log to
Allow the Entry of Confidential Cases

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Erika Kusnadi-Cerezo
	Reviewed By	Michael Wu and Christine Altavilla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
02/04/2020	1.0	Initial	Erika Kusnadi-Cerezo

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1 OVERVIEW

The Reception Log Detail page is used by county workers in order to manage/track participants who are visiting the county offices. Through the Reception Log workers are able to send email message or send electronic messages to the Message Center.

1.1 Current Design

Currently in the LRS/CalSAWS system, all confidentiality flagged cases are able to be added to the reception log and information is not suppressed regardless of what security rights the worker is assigned.

In the C-IV system, only cases with the confidentiality type of Employee/Employee Relative are able to be added to the reception log and information is suppressed for all users, unless users have the proper confidentiality security rights.

1.2 Requests

The LRS/CalSAWS system will still allow for confidential cases to be added to the reception log, however information being displayed should be suppressed for workers that are not assigned to the proper security right.

1.3 Overview of Recommendations

1. The reception log needs to be updated so that the information being displayed for workers without proper security rights will be suppressed and remove their ability to make Edits to confidential Reception Log entries.
2. Message center will be updated so that workers without the proper security right will not have the ability to edit the confidential Reception Log entries.

1.4 Assumptions

1. Participants will continue to be able to check in via the self service portal/mobile application as current existing functionality.
2. A separate SCR will be created in order to update the C-IV self service KIOSK that will allow participants to check-in for confidential cases on their own.
3. The ability for workers to access the Case Summary page for cases that have a confidentiality type attach to them through message center will be dictated by a separate security group.
4. Any fields that are not mentioned as part of this design will continue to behave the same way as its currently existing.
5. Upddating existing Security Group: Confidentiality Reception Log View' to Confidentiality ER Reception Log View' in the CIV system will be done during conversion.

2 RECOMMENDATIONS

2.1 Reception Log List

2.1.1 Overview

Update the Reception Log List to display suppressed information when a confidential case is added to the Reception Log. Only users assigned the proper security rights are able to view unsuppressed information on the Reception Log List and make edits to the record.

2.1.2 Reception Log List Mockup

Reception Log List

* - Indicates required fields.
▶ Refine Your Search

Search Results Summary Results 1 - 1 of 1 [Add](#)

View Date(s): 01/01/2020 to 01/06/2020
Last Refreshed at 10:08 AM

Date	Initial Time	Waiting Person	Language	Indiv. Case Type	Purpose	Detail	Appt. Time	Visit Status	Number Assigned	Worker ID
01/06/2020 10:07 AM	00:00	(Suppl...		B0KIN20	Customer Service Representative	General Information	5:30 PM	Worker Notified		19LS009P00 Add

Figure 2.1.1 – Reception Log List Mockup

2.1.3 Description of Changes

1. Update the Reception Log List page as shown in Figure 2.1.1 to display suppressed information if the case that was added is marked as confidential and the worker viewing does not have the proper security rights assigned to them.
 - a. 'Person' field will display 'Suppressed' instead of the person name if the case is flagged as confidential.
 - b. 'Initial Time' field will display the time of the status however, this will no longer be a hyperlink that will take the worker to the Reception Log Detail page.
 - c. 'Edit' button will be hidden on the Reception Log List, so that workers that do not have the proper security rights are not able to make edits to the Reception Log entry by clicking the 'Edit' button.

Note: Please reference the Appendix section (Section 4) for further details on which security rights dictate what information is being displayed and access to the Reception Log Detail page.

2.1.4 Page Location

- **Reception Log Link on the LRS Home Page**

2.1.5 Security Updates

1. Rename existing Security Group: 'Confidentiality Reception Log View' to 'Confidentiality ER Reception Log View'.

Note: Change is to only rename existing Security Group in order to have the naming convention match with new one that are being created below. Associated Security Right will remain unchanged.

2. Security Rights

Security Right	Right Description	Right to Group Mapping.
ConfidentialityAAReceptionLogView	Reception Log Detail	Confidentiality AA Reception Log View Confidentiality ALL Reception Log View
ConfidentialityFCReceptionLogView	Reception Log Detail	Confidentiality FC ReceptionLogView Confidentiality ALL Reception Log View
ConfidentialityMCreceptionLogView	Reception Log Detail	Confidentiality MC ReceptionLogView Confidentiality ALL Reception Log View
ConfidentialityDVReceptionLogView	Reception Log Detail	Confidentiality DV Reception Log View Confidentiality ALL Reception Log View
ConfidentialityHPReceptionLogView	Reception Log Detail	Confidentiality HP Reception Log View Confidentiality ALL Reception Log View

Security Right	Right Description	Right to Group Mapping.
ConfidentialityHTReceptionLogView	Reception Log Detail	Confidentiality HT Reception Log View Confidentiality ALL Reception Log View
ConfidentialityERReceptionLogView	Reception Log Detail	Confidentiality ALL Reception Log View

3. Security Groups

Security Group	Group Description	Group to Role Mapping
Confidentiality AA Reception Log View	View Reception log information for Adoptions Assistance confidential cases.	See Security Matrix for mapping.
Confidentiality FC Reception Log View	View Reception log information for Foster Care confidential cases.	See Security Matrix for mapping.
Confidentiality MC Reception Log View	View Reception log information for Minor Consent confidential cases.	See Security Matrix for mapping.
Confidentiality DV Reception Log View	View Reception log information for Domestic Violence confidential cases.	See Security Matrix for mapping.
Confidentiality HP Reception Log View	View Reception log information for High Profile confidential cases.	See Security Matrix for mapping.
Confidentiality HT Reception Log View	View Reception log information for Human	See Security Matrix for mapping.

Security Group	Group Description	Group to Role Mapping
	Trafficking confidential cases.	
Confidentiality ALL Reception Log View	View Reception log information for all confidential cases.	See Security Matrix for mapping.

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Message Center

2.2.1 Overview

Message Center will be updated so that the Time field will no longer be a hyperlink and icons will be hidden for workers that do not have the proper security right to update or modify a reception log entry for confidential cases.

2.2.2 Message Center Mockup



Message Center (2)	
Time	Message
04:45 PM	Appointment for BOKIN20 (JANE DOE) is waiting.  
05:15 PM	Appointment for BOWIN20 (SUPPRESSED) is waiting.

Figure 2.2.1 – Message Center Mockup

2.2.3 Description of Changes

1. Message Center will be updated as shown on Figure 2.2.1 for workers who do not have proper security rights to access and modify that specific reception log entry that's attach to a case that have a confidentiality record.
 - a. 'Time' will continue to display but will no longer be a hyperlink that can navigate the worker to the Reception Log Detail page.

- b. Hide all icons from displaying in Message Center so that workers without proper security rights are not able to update status of the reception log entry for confidential cases.
- c. Case name will be suppressed if the reception log entry is for a confidential case.

Note: Message Center will continue to display unmodified for reception log entry that's attach to a non-confidential cases and for workers that have appropriate security rights to view unsuppressed information and access to modify the reception log entry attached to a confidential cases.

Please reference the Appendix section (Section 4) for further details on which security rights dictate what information is being displayed in Message Center and access to the Reception Log Detail page.

2.2.4 Page Location

- **Message Center**

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

N/A

2.2.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.2.2.1	The LRS shall provide a method of tracking the following contacts via the traffic log: <ul style="list-style-type: none"> a. Face-to-face contacts; d. Inter-County transfer contacts; e. Traffic in the traditional office setting; f. Outreach User contacts in both fixed and non-fixed locations; 	Allows tracking of traffic in the traditional office setting.

g. Non-DPSS COUNTY Users; h. Non-COUNTY agencies; i. General public contacts, including e-Government; and j. Other contacts.	
---	--

4 APPENDIX

Security Rights	Reception Log List	Message Center
ConfidentialityAReceptionLogView	Workers will see unsuppressed information and have access to the Reception Log Detail page for that specific reception log entry attached to a case that has 'Adoption Assistance' confidentiality flag.	Workers will see unsuppressed information, access to the Reception Log Detail page and icons to update the reception log entry for that specific reception log entry attached to a case that has 'Adoption Assistance' confidentiality flag.
ConfidentialityFCReceptionLogView	Workers will see unsuppressed information and have access to the Reception Log Detail page for that specific reception log entry attached to a case that has 'Foster Care' confidentiality flag.	Workers will see unsuppressed information, access to the Reception Log Detail page and icons to update the reception log entry for that specific reception log entry attached to a case that has 'Foster Care' confidentiality flag.
ConfidentialityMCReceptionLogView	Workers will see unsuppressed information and have access to the Reception Log Detail page for that specific reception log entry attached to a case that has 'Minor	Workers will see unsuppressed information, access to the Reception Log Detail page and icons to update the reception log entry for that specific reception log entry attached to a case

	Consent' confidentiality flag.	that has 'Minor Consent' confidentiality flag.
ConfidentialityDVReceptionLogView	Workers will see unsuppressed information and have access to the Reception Log Detail page for that specific reception log entry attached to a case that has 'Domestic Violence' confidentiality flag.	Workers will see unsuppressed information, access to the Reception Log Detail page and icons to update the reception log entry for that specific reception log entry attached to a case that has 'Domestic Violence' confidentiality flag.
ConfidentialityHPReceptionLogView	Workers will see unsuppressed information and have access to the Reception Log Detail page for that specific reception log entry attached to a case that has 'High Profile' confidentiality flag.	Workers will see unsuppressed information, access to the Reception Log Detail page and icons to update the reception log entry for that specific reception log entry attached to a case that has 'High Profile' confidentiality flag.
ConfidentialityHTReceptionLogView	Workers will see unsuppressed information and have access to the Reception Log Detail page for that specific reception log entry attached to a case that has 'Human Trafficking' confidentiality flag.	Workers will see unsuppressed information, access to the Reception Log Detail page and icons to update the reception log entry for that specific reception log entry attached to a case that has 'Human Trafficking' confidentiality flag.
ConfidentialityERReceptionLogView	Workers will see unsuppressed information and have access to the	Workers will see unsuppressed information, access to the Reception Log

	Reception Log Detail page for that specific reception log entry attached to a case that has 'Employee/Employee Relative confidentiality flag.	Detail page and icons to update the reception log entry for that specific reception log entry attached to a case that has 'Employee/Employee Relative' confidentiality flag.
--	---	--

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-201449

DDCR 4067: Validate Payment Calculation is
Within the Child Care Eligibility Period

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Gillian Noelle Bendicio
	Reviewed By	Long Nguyen, Getnet Beyene, Alex Rodriguez, Michael Wu, Shilpa Suddavanda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/15/2020	.1	Initial Revision	Gillian Noelle Bendicio

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1 OVERVIEW

1.1 Current Design

The Child Care Supportive Services (CC) program in LRS/CalSAWS does not make use of the Eligibility Determination Benefit Calculation (EDBC) functionality. Instead, it utilizes the Child Care Payment Calculation page to calculate the CC benefit that a household is entitled to. This page takes information from the Child Care Program Detail, Child Care Certificate Detail, and Child Customer Reporting pages. It can be accessed through the Child Care Certificate Detail and Child Care Customer Reporting pages.

1.2 Requests

Update the Child Care Customer Reporting page to validate if a CC eligibility record exists before navigating the worker to the Child Care Payment Calculation page.

1.3 Overview of Recommendations

1. Update the Child Care Customer Reporting Detail page to prevent the worker from adding a new payment calculation if the Child Care Certificate period is not within a Child Care Eligibility period.

1.4 Assumptions

1. Any logic and/or page components not mentioned in this SCR will retain its current functionality.
2. The CCRR 100 has been migrated over to the LRS/CalSAWS prior to this SCR.

2 RECOMMENDATIONS

2.1 Child Care Customer Reporting Detail

2.1.1 Overview

The Child Care Customer Reporting Detail page allows the worker to process the CCRR 100 form that a participant has returned. This is part of the Child Care Certificate approval process. Once the CCRR 100 has been marked as 'Reviewed', the page will allow a worker to create a payment calculation for the request month to issue CC benefits. This page will be updated to check the time period of the Child Care Certificate is within the CC eligibility record.

2.1.2 Child Care Customer Reporting Detail Mockup

Child Care Customer Reporting Detail

*- Indicates required fields

Add Payment Calculation

Edit

Close

- Eligibility is not defined for the Certificate Begin Date. Please enter Eligibility information for the date when the Certificate becomes effective.

Request Month:

04/01/2020

Certificate Id:

[808703367](#)

County Completeness Determination	This Report
Does the information on the CCRR alone or combined with the information from previously submitted CCRR for the same service month, equal a complete and correct CCRR? *	Yes

Reimbursement Eligibility Determination	This Report
1. Were the Child Care Services needed? *	Yes
2. Was the customer participating in a county-approved activity during the hours of care? *	Yes
3. Are all other eligibility requirements satisfied? *	Yes

Report Status History		
Status	Date	Updated by
Reviewed	06/30/2020	284593
Received	05/14/2020	258735
Sent	03/25/2020	186481
Generated	03/22/2020	203459

Add Payment Calculation

Edit

Close

Figure 2.1.1 – Child Care Customer Reporting Detail in View Mode

Child Care Customer Reporting Detail

*- Indicates required fields

Save and Add Payment Calculation

Save and Return

Cancel

- Eligibility is not defined for the Certificate Begin Date. Please enter Eligibility information for the date when the Certificate becomes effective.

Request Month:

04/01/2020

Certificate Id:

[808703367](#)

County Completeness Determination	This Report
Does the information on the CCRR alone or combined with the information from previously submitted CCRR for the same service month, equal a complete and correct CCRR? *	Yes ▾

Reimbursement Eligibility Determination	This Report
1. Were the Child Care Services needed? *	Yes ▾
2. Was the customer participating in a county-approved activity during the hours of care? *	Yes ▾
3. Are all other eligibility requirements satisfied? *	Yes ▾

Report Status History		
Status	Date	Updated by
Reviewed	06/11/2020	284593
Received	05/14/2020	258735
Sent	03/25/2020	186481
Generated	03/22/2020	203459

Save and Add Payment Calculation

Save and Return

Cancel

Figure 2.1.2 – Child Care Customer Reporting Detail in Edit Mode

2.1.3 Description of Changes

1. Add a validation to the Child Care Customer Reporting Detail when attempting to add a Payment Calculation either in View Mode (Figure 2.1.1) or Edit Mode (Figure 2.1.2). If the Child Care Eligibility time period does not fully contain the time period of the associated Child Care Certificate, display a validation stating "Eligibility is not defined for the Certificate Begin Date. Please enter Eligibility information for the date when the Certificate becomes effective."

- a. The Child Care Eligibility period is found on the Child Care Program Detail page.
- b. The Child Care Certificate period is found on the Child Care Certificate Detail page.

2.1.4 Page Location

- **Global: Child Care**
- **Local: Reporting**
- **Task: Child Care Customer Reporting**

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping

2. Security Groups

Security Group	Group Description	Group to Role Mapping

2.1.6 Page Mapping

No impact to this section.

2.1.7 Page Usage/Data Volume Impacts

No impact to this section.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.28.2.18.1	<p>The LRS shall include functionality to support child care services, for the following:</p> <ul style="list-style-type: none"> a. Child care provider information; b. Referrals; c. Alert notices and NOA s; d. Tracking of activity and authorizations by child and case; e. Tracking of payments issued; f. Alternative Payment Program (APP) information; and g. Tracking and control of child care provider payment requests. 	<p>The Child Care Customer Reporting Detail page is updated to validate that the Child Care Certificate date range is within a Child Care Eligibility period.</p>

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

5 MIGRATION IMPACTS

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

6 OUTREACH

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-211750

Update MC 371 – Additional Family Members
Requesting Medi-Cal Form

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Raj Devidi
	Reviewed By	Pramukh Karla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/22/2020	1.0	Original	Raj Devidi

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3	Supporting Documents	5

1 OVERVIEW

The purpose of this change is to update the MC 371 (07/09) form.

1.1 Current Design

MC 371 form already exists in LRS/CalSAWS in 09/15 version.

1.2 Requests

Update MC 371 (07/09) form with,

- 1) Update Applicant/Caretaker's Name (First,etc) to Spouse/Other Parent's Name (First, Middle, Last)
- 2) Update the formatting on the second page of the form where the numbers to do cover the text on the page.

1.3 Overview of Recommendations

1. Update first question and/or second question on page 1 and format text on page 2.

1.4 Assumptions

1. MC 371 (07/09) form will not have LRS/CalSAWS Standard Header.
2. All the prepopulated fields will be editable on MC 371 (07/09) form.

2 RECOMMENDATIONS

2.1 Update MC 371 – Additional Family Members Requesting Medi-Cal

2.1.1 Overview

This section will cover the updates needed to update MC 371 (07/09).

State Form: MC 371

Programs: Medi-Cal

Attached Forms: N/A

Forms Category: Form

Languages: Add Arabic and Lao

2.1.2 Description of Change

Update MC 371 in English (Question 2, second page formatting), Spanish (Question 2 and 3), Cambodian (Question 1 and 2), Farsi (Question 2 and 3) and add MC 371 in Arabic and Lao languages.

Form Mockup/Example: See Supporting Document #1

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	MC 371	MC371.1_EN.pdf MC371.1_SP.pdf MC371.1_CA.pdf MC371.1_FA.pdf MC371.1_AR.pdf MC371.1_LA.pdf

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-211755 | DDID 11

Retain LRS NA 960Y

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sureshnaidu Mullaguri
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/19/2020	1.0	Initial Revision	Sureshnaidu Mullaguri

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1 OVERVIEW

1.1 Current Design

The state form NA 960Y SAR is available in English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese languages in LRS/CalSAWS system. Form is not available in Arabic, Hmong and Lao languages.

1.2 Requests

Update English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese language NA 960Y SAR forms to match with State version and Add Arabic, Hmong and Lao language LRS NA 960Y forms to the system.

1.3 Overview of Recommendations

1. Update English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese language forms to match with State version
2. Add NA 960Y SAR form in Arabic, Hmong and Lao language languages to the system.

1.4 Assumptions

1. NA 960Y SAR forms will have the CalSAWS Standard Header like the current existing forms in other languages
2. Print options remain same for NA 960Y SAR current forms and the same will be applicable to the forms that are being added in Threshold.
3. All the Requirements for the NA 960Y SAR Threshold forms will be the same as the existing forms.
4. The Header and NA Back 9 will populate with the current CalSAWS standard population for the new languages like existing versions
5. Threshold NA 960Y SAR form generation logic and form parameters page remain same and same as English and Spanish form.
6. Standard threshold language NA Back 9 added to threshold version of NA 960Y SAR form.

Commented [MA1]: Can you delete #7 Assumption as it is blank.

2 RECOMMENDATIONS

2.1 Update the NA 960Y SAR - SAR 7 Incomplete Form

2.1.1 Overview

This section will cover the updates needed for NA 960Y SAR - SAR 7 Incomplete Form to match with state version in existing languages English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese and the requirements to Add NA 960Y SAR form in Arabic, Hmong and Lao languages to the LRS/CalSAWS template repository.

2.1.2 Description of Change

1. Update NA 960Y SAR - SAR 7 Incomplete Form in English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese languages to match State version.

Form Mockups: Please refer to Supporting Documents #1

Languages: English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian, Vietnamese

2. Add NA 960Y SAR - SAR 7 Incomplete Form in all threshold languages to the LRS/CalSAWS repository.

Form Number: NA 960Y SAR

Form Name: SAR 7 Incomplete

Include NA Back 9: Yes

Languages: Arabic, Hmong and Lao

Form Mockups: Please refer to Supporting Documents #2

Barcode Options: Remains same as English version of NA 960Y SAR

3. The first Page will have NA 960Y SAR and the second page will have NA BACK 9 in the respective language.

Additional Requirements:

Post to YBN/C4Y: Yes

Commented [MA2]: Form Name is incorrect- this is not a Denial Notice.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	NA 960Y SAR in English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese	NA960YSAR_EN.xdp NA960YSAR_SP.xdp NA960YSAR_CH.xdp NA960YSAR_KO.xdp NA960YSAR_RU.xdp NA960YSAR_TG.xdp NA960YSAR_VI.xdp NA960YSAR_FA.xdp NA960YSAR_CA.xdp NA960YSAR_AE.xdp
2	Client Correspondence	NA 960Y SAR in Arabic, Hmong and Lao.	NA960YSAR_AR.xdp NA960YSAR_HM.xdp NA960YSAR_LA.xdp

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2599	<p>Original:</p> <p>1. Estimate is for updating the form in English and all threshold languages. 2. Spanish translations will be provided by the Consortium. 3. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being modified/migrated/created. Consortium staff will be modifying or creating FDDs."</p>	<p>1. Estimate is for updating the form in English and all threshold languages. 2. Spanish translations will be provided by the Consortium. 3. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being modified/migrated/created. Consortium staff will be modifying or creating FDDs."</p>	<p>With SCR CA-English, Spanish, Armenian, Cambodian, Chinese, Farsi, Korean, Tagalog, Russian and Vietnamese language version NA 960Y SAR forms updated to match with State version and Added Arabic, Hmong and Lao language LRS NA 960Y forms to the system.</p>

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-211762 | DDID 11

Update the DFA377.1A-CalFresh Notice of
Denial

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sureshnaidu Mullaguri
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/18/2020	1.0	Initial Revision	Sureshnaidu Mullaguri

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1 OVERVIEW

The purpose of this change is to update DFA 377.1A- Notice of Denial or Pending Status form to match state version DFA 377.1A (03/02) in English and Spanish and add Latest version of DFA 377.1A form in threshold languages to LRS/CalSAWS system.

1.1 Current Design

The state form DFA 377.1A- Notice of Denial or Pending Status form is available in English and Spanish languages in LRS/CalSAWS.

1.2 Requests

1. Update DFA 377.1A form to state version DFA 377.1A (03/02) in English and Spanish and Update text from 'Food Stamps' to 'CalFresh'.
2. Add Threshold language DFA 377.1A forms to the LRS/CalSAWS system.

1.3 Overview of Recommendations

Update DFA 377.1A form in English and Spanish and Add form in Armenian, Arabic, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Tagalog, Russian, Vietnamese languages to the system.

Commented [MA1]: What is 'Other Chinese Language'?

1.4 Assumptions

1. DFA 377.1A form threshold version will include the LRS/CalSAWS Standard Header and Footer.
2. The Population logic of DFA 377.1A form remains the same and the new forms will include the existing population logic.
3. Print options remain same for DFA 377.1A current forms and the same will be applicable to the forms that are being added in Threshold.
4. All the Requirements for the DFA 377.1A Threshold forms will be the same as the existing forms.
5. The NA Back 9 will populate with the current LRS/CalSAWS standard population for the new languages.
6. Threshold DFA 377.1A form generation logic and form parameters page remains same.

Commented [MA2]: #4. What do you mean Header and NA BACK 9? Are you talking about the NA BACK 9 form, what header?

2 RECOMMENDATIONS

2.1 Update the DFA377.1A-CalFresh Notice of Denial in Threshold Languages

2.1.1 Overview

This section will cover the updates needed for DFA 377.1A - Notice of Denial or Pending Status to match with state version in existing languages English and Spanish and the requirements to Add DFA 377.1A form in all threshold languages to the LRS/CalSAWS template repository.

Commented [MA3]: Update Chinese language.

2.1.2 Description of Change

Update DFA 377.1A - Notice of Denial or Pending Status form to match state version DFA 377.1A-Notice of Denial or Pending Status (03/02) in English and Spanish and add Latest version of DFA 377.1A form in threshold languages to LRS/CalSAWS system.

1. Update DFA 377.1A- Notice of Denial or Pending Status form in English and Spanish languages to match State version. Existing form refers text 'Food Stamps' to refer CalFresh program. Update text from 'Food Stamps' to 'CalFresh' as per form mockups.
Form Mockups: Please refer to Supporting Documents #1
2. Add DFA 377.1A- Notice of Denial or Pending Status form in all threshold languages to the LRS/CalSAWS repository.
Form Number: DFA 377.1A
Form Name: Notice of Denial or Pending Status
Include NA Back 9: Yes
Languages: Armenian, Arabic, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Tagalog, Russian, Vietnamese
Form Mockups: Please refer to Supporting Documents #2
3. The first Page will have DFA 377.1A and the second page will have NA BACK 9 in the respective threshold language.
4. Add the following barcode options to the threshold DFA 377.1A Form like English version:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	N

Additional Requirements:

Post to YBN/C4Y: No

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	DFA 377.1A in English and Spanish	DFA377_1A_EN.pdf DFA377_1A_SP.pdf
2	Client Correspondence	DFA 377.1A in threshold	DFA377_1A_AE.pdf DFA377_1A_AR.pdf DFA377_1A_CA.pdf DFA377_1A_CH.pdf DFA377_1A_FA.pdf DFA377_1A_FL.pdf DFA377_1A_HM.pdf DFA377_1A_KO.pdf DFA377_1A_LA.pdf DFA377_1A_RU.pdf DFA377_1A_VI.pdf

Commented [MA4]: Rename Template to DFA 377.1A CH not CN

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
11	Original: The contractor shall update the LRS DFA377.1A-CalFresh Notice of Denial (03/02 in all threshold languages in the CalSAWS software.	The contractor shall update the LRS DFA377.1A-CalFresh Notice of Denial (03/02 in all threshold languages in the CalSAWS software.	With SCR CA-211762 DFA377.1A-CalFresh Notice added to LRS/CalSAWS application in threshold languages.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-211771 | DDID 11

Retain MC 210 A

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sureshnaidu Mullaguri
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/16/2020	1.0	Initial Revision	Sureshnaidu Mullaguri

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1 OVERVIEW

1.1 Current Design

Current MC 210 A form title is 'Supplement Statement of Facts for Retroactive Coverage/Restoration' and it displays previous California Governor Jerry Brown.

1.2 Requests

Update MC 210 A form title to 'Supplement to Statement of Facts for Retroactive Coverage/Restoration' and display current governor name.

1.3 Overview of Recommendations

Retain LRS MC 210A (09/07) version with the following updates:

1. Add word "to" on the title of the form between Supplement and Statement to read 'Supplement to Statement'.
2. Update the California Governor from Jerry Brown to current Governor Gavin Newsom.

1.4 Assumptions

1. Form will be updated only in English and Spanish. Other threshold languages are NOT included in this estimate.
2. Existing form print options, barcode details and form populations details remain unchanged.
3. Existing Spanish Form title matches with state version and it doesn't require any update.

2 RECOMMENDATIONS

2.1 Update MC 210 A Form

2.1.1 Overview

This effort updates the MC 210 A form in English and Spanish Languages.

2.1.2 Description of Change

Retain LRS MC 210 A (09/07) version with the following updates:

1. Add word "to" on the title of the form between Supplement and Statement to read 'Supplement to Statement'. Update form title on form and Form Name displayed on Template Repository Search page to match with new form title.

Existing Form Title:

Supplement Statement of Facts for Retroactive Coverage/Restoration

New title:

Supplement to Statement of Facts for Retroactive Coverage/Restoration

2. Update the California Governor from Jerry Brown to current Governor Gavin Newsom in both English and Spanish versions.

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
11	Original: Retain LRS MC 210 A (09/07) version with the following updates: The Contractor shall add the word " to " on the title of the form between Supplement and Statement to read 'Supplement to Statement'. 2. Remove the CA Governor Jerry Brown to current Governor.	Retain LRS MC 210 A (09/07) version with the following updates: The Contractor shall add the word " to " on the title of the	With SCR CA-211771 MC 210 A (09/07) Form title and governor name updated.

		form between Supplement and Statement to read 'Supplement to Statement'. 2. Remove the CA Governor Jerry Brown to current Governor.	
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CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214031

Case Coversheet Generation

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sarah Steimle
	Reviewed By	Michael Wu, Gabriel Trejo, Dana Petersen, Priya Sridharan, Sreekanth Kalvoju, Long Nguyen, Sumeet Patil, Jonathan Goldsmith, Lawrence Samy, Matthew Lower, Jennifer Kim, Cory Wozniak, Christopher Vasquez, Rhiannon Chin, Eric Arreola

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
4/22/2020	1	New design document	Sarah Steimle
6/1/2020	2	Updated online approach	Sarah Steimle

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1 OVERVIEW

This SCR will be implementing the capability to generate coversheets for multi-case scan mode and implement the capability to create a coversheet from the Case Summary Page. This SCR will also be adding a Generic Separator Sheet and No Case Identified Separator Sheet to the template repository.

1.1 Current Design

Currently there is no functionality in the system to generate multiple barcoded coversheets at a time that are associated to a case in LRS. Currently, there is no centralized access point to the Generic Separator Sheet and there is no No Case Identified Separator Sheet.

1.2 Requests

The request is to add functionality in the system to generate barcoded coversheets to the LRS system and add the Generic Separator Sheet and No Case Identified Separator Sheet to the Template Repository.

1.3 Overview of Recommendations

1. Create a Generate Coversheet page in CalSAWs that will validate and create barcoded coversheets for each case that is validated.
2. Add a Generate Coversheet button to the Case Summary page to create a barcoded coversheet for the case the worker is on.
3. Add the Generic Separator Sheet and the No Case Identified Coversheet to the Template Repository.

1.4 Assumptions

1. Fields not mentioned in the Description of Changes sections, will not be updated.
2. Multi-case scan mode will be functionality in the Imaging System.
3. The Imaging solution will be able to read and direct documents to the correct case based on the information provided in the barcoded coversheets.
4. Only counties that have this functionality turned on will be able to utilize this functionality.
5. The Generic Separator Sheet is provided by the imaging software.
6. The Generic Separator Sheet is the same for all counties.
7. The No Case Identified Separator Sheet is created by the Imaging Team.
8. The No Case Identified Separator Sheet is the same for all counties.
9. Users are responsible for printing PDF coversheets single side only.

2 RECOMMENDATIONS

2.1 Coversheet Generation

2.1.1 Overview

Add the Coversheet Generation page to the LRS System. The Coversheet Generation page provides the client functionality to generate barcoded coversheets in order to scan multiple cases into the system at a time. This feature will only be available when the county is set to use this solution.

2.1.2 Coversheet Generation Mockup

Coversheet Generation

*- Indicates required fields

A screenshot of a web form titled "Coversheet Generation". At the top left, there is a red asterisk icon followed by the text "*- Indicates required fields". Below this, the label "Case Number(s): *" is positioned to the left of a text input field. The input field is empty and has a vertical scrollbar on its right side. To the right of the input field is a blue button with the text "Submit".

Figure 2.1.1 – Coversheet Generation

Coversheet Generation

*- Indicates required fields

A screenshot of a web form titled "Coversheet Generation". At the top left, there is a red asterisk icon followed by the text "*- Indicates required fields". Below this, the label "Case Number(s): *" is positioned to the left of a text input field. The input field is empty and has a vertical scrollbar on its right side. To the right of the input field is a blue button with the text "Submit".

Generate Coversheet(s)

Case Number	Case Name
No matching Case Number found for given Case(s)	
SAD1234	
MOG5678	
Successfully validated Case Numbers for given Case(s)	
JOH9876	John Doe
PLA2345	Sarah Garza
MAF7654	Confidential

Generate Coversheet(s)

Figure 2.2.2 – Coversheet Generation (Searched Cases with no matching cases)

Coversheet Generation

*- Indicates required fields

Case Number(s): *

Generate Coversheet(s)

Case Number	Case Name
Successfully validated Case Numbers for given Case(s)	
JOH9876	John Smith
PLA2345	Sarah Doe
MAF7654	Confidential

Generate Coversheet(s)

Figure 2.2.3 – Coversheet Generation (Searched Cases without Error)

Coversheet Generation

*- Indicates required fields

Case Number(s): *

Message from webpage


 You cannot have more than 10 Case Numbers. Please remove the extra parameter.

Figure 2.2.3 – Coversheet Generation (More than 10 Case Numbers Entered)

Coversheet Generation

*- Indicates required fields

- **Case Number(s)- Field cannot have more than 10 Case Numbers.**

Case Number(s): *

Figure 2.2.4 Coversheet Generation Validation (More than 10 Case Numbers)

2.1.3 Description of Changes

1. Case Number(s) – The Case Number(s) that the worker is creating barcoded coversheets for. Each case number must be separated by a semi colon. If the worker inputs more than 10 cases, then a pop up will appear with an error message stating: “You cannot enter more than

10 cases at a time". The elements behind the pop up will be disabled until the worker clicks "Ok".

2. Submit – Clicking the Submit button validates that the case(s) typed in by the worker are valid and in the county the worker is in. The results are displayed in the Case table. All white space between the semi-colon and the characters will be trimmed prior to searching for cases. The trimmed value(s) will be used to search for cases in the worker's county. These trimmed value(s) will display in the Case Number field aligned with the other resulting information. After the results are displayed the values in the Case Number(s) field will no longer be present.
3. If a user types in more than 10 Case Numbers in the Case Number(s) text box and clicks the Submit button, then create the following custom validation for the Coversheet Generation page:
 - a. "Case Number(s) - Field cannot have more than 10 Case Numbers."
4. Case(s) table – This section displays when one or more case(s) were submitted by the worker. If the worker submits a case that is unable to be validated, then the Case Number(s) will be listed under the following in line statement:
 - a. "Unable to validate given Case Number(s)"If the worker submits Case Number(s) that are valid, then the case information will be listed under the following in line statement:
 - b. "Successfully validated Case Numbers for given Case(s)"The variables displayed under this in line statement are <Case Number> and <Case Name>. The user will not be able to see confidential case names unless the user has the security rights to view the case. If the case is confidential and the user does not the security rights to see the case then the Case Name will be displayed as "Confidential". If the user has the security rights to view the confidential case then the user will be able to see the Case Name in the Case(s) Table.

The cases will be ordered the way the client entered them into the Case Number(s) text box in each respective section.
5. Generate Coversheet(s) Button – Clicking the Generate Coversheet(s) button will only generate barcoded pdf pages for the valid cases. The barcoded PDF pages will be stitched together into one adobe pop up window for the worker to print from (See supporting document #4, Imaging Multi Case Coversheet Mockup). Each page has a unique case. These barcodes will have the case's identification placed into the barcode. This button is dynamic to the completed submission of one or more cases that returned valid. This feature will only be available when the county is set to use this solution.

2.1.4 Page Location

- **Global: Client Corresp.**
- **Local: Barcodes**
- **Task: Coversheets** (This task nav item will display directly below the Barcodes task nav item. Only workers with the “ImagingCapture” security right will be able to see this task nav item.)

2.1.5 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
ImagingCapture	Allows the worker to scan in documents to the imaging system.	Imaging Capture

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Imaging Capture	Allows the worker to scan documents into the imaging system.	Child Care Staff Child Care Supervisor Clerical Staff Clerical Supervisor Collections Staff Eligibility Staff Eligibility Supervisor Employment Services Contracted Staff Employment Services Contracted Supervisor Employment Services Staff Employment Services Supervisor Executive Fiscal Staff Fiscal Supervisor

Security Group	Group Description	Group to Role Mapping
		Hearings Staff Hearings Supervisor Help Desk Staff Marketing Staff Marketing Supervisor Quality Assurance Staff Quality Assurance Supervisor Quality Control Staff Quality Control Supervisor RDB Staff RDB Supervisor Special Investigations Staff Special Investigations Supervisor System Administrator Supervisor

2.1.6 Page Mapping

Add page mapping for the Coversheet Generation page.

2.1.7 Page Usage/Data Volume Impacts

Expected volume usage is 450,000 clicks per month.

2.2 Case Summary

2.2.1 Overview

Update the Case Summary page in the LRS System. Add a Generate Coversheet button to the Case Summary page in order to create a coversheet for the case that the worker is on.

2.2.2 Case Summary Mockup

Case Summary

Capture Generate Coversheet Images

Case Name **County**
[Case Name](#) Los Angeles
🚩

▼ Companion Cases

Case Number	Case Name

Add

Display:
 View

▶ Case Flags

▶ Medi-Cal

All People Associated with the Case

Name	DOB	Age	Gender	SSN	CIN	Person #	Household Status
KIMI MCNAMARA	04/04/2002	17	F	843-95-4627	456520437	03	In the Home
KRISTINE MCNAMARA	11/01/2000	19	F	363-22-9412	345652714	04	In the Home
TOMAS MCNAMARA	06/20/1973	46	F	582-97-1705	608692776	02	In the Home
WINDY MCNAMARA	08/18/1968	51	M	969-60-8017	523893045	01	In the Home

Figure 2.1.1 – Case Summary

2.2.3 Description of Changes

1. Generate Coversheet Button – Clicking the Generate Coversheet button will generate a barcoded pdf page for the case that the worker is on. The barcoded PDF page will be shown in one adobe pop up window for the worker to print from. This barcode will have the case number's associated sequence placed into the barcode. This feature will only be available when the county is set to use this solution. This functionality is only available when the worker has the security right of "ImagingCapture".

Note: "Capture" and "Images" buttons will be added into the LRS/CalSAWS system through separate SCRs.

2.2.4 Page Location

- **Global: Case Info**
- **Local: Case Summary**
- **Task: Case Summary**

2.2.5 Security Updates

3. Security Rights

Security Right	Right Description	Right to Group Mapping
ImagingCapture	Imaging Scan	Imaging Capture

4. Security Groups

Security Group	Group Description	Group to Role Mapping
Imaging Capture	Scan documents for a case using the imaging application.	Child Care Staff Child Care Supervisor Clerical Staff Clerical Supervisor Collections Staff Eligibility Staff Eligibility Supervisor Employment Services Contracted Staff Employment Services Contracted Supervisor Employment Services Staff Employment Services Supervisor Executive Fiscal Staff

Security Group	Group Description	Group to Role Mapping
		Fiscal Supervisor Hearings Staff Hearings Supervisor Help Desk Staff Marketing Staff Marketing Supervisor Quality Assurance Staff Quality Assurance Supervisor Quality Control Staff Quality Control Supervisor RDB Staff RDB Supervisor Special Investigations Staff Special Investigations Supervisor System Administrator Supervisor

2.2.6 Page Mapping

Add page mapping for the Case Summary page.

2.2.7 Page Usage/Data Volume Impacts

The estimated projected clicks per month is 45,000.

2.3 Add Separator and Coversheets

2.3.1 Overview

There is currently no barcoded coversheet for a case and No Case Identified Coversheet available in the system. There is also no centralized access point to access the Generic Separator Sheet. To meet the requirements, a barcoded coversheet must be created. Additionally, a No Case Identified Coversheet and a Generic Separator Sheet must be added to the template repository.

2.3.2 Create Barcoded Coversheet Separator Form XDP

Form Header: NA

Form Title: Imaging Case Coversheet

Imaging Form Name: Imaging Case Coversheet

Form Number: IMG 100

Include NA Back 9: NA

Form Mockups/Examples: See Supporting Documents

Languages:

English

2.3.3 Description of Change

1. Add barcoded coversheet that is generated from the case numbers submitted by the worker.

Note: This document will not be viewable in the template repository.

2.3.4 Add Form Variable Population

Case Number and Case Name will be generated onto each coversheet that is generated.

Form Body Variables:

Variable Name	Population	Formatting	Template Repository Population	Populates with Form Generation
<Barcode>	Generate 2D barcode with the value of: AAAAAAA<County Code><Case Serial Number> EX: AAAAAAA02LOD1318	Barcode	No	Yes
<Case Number>	The Case Number	Arial, size 20, bold	No	Yes
<Case Name>	The Case Name associated to the case. If the Case is confidential then the Case Name will be displayed as "Confidential".	Arial, size 20, bold	No	Yes

2.4 Add Generic Separator Sheet to Template Repository

2.4.1 Overview

This recommendation will add the Generic Separator Sheet to the Template Repository.

State Form: N/A, this is an Imaging specific document

Programs: N/A

Attached Forms: N/A

Forms Category: Form

Languages:

English

2.4.2 Description of Change

2.4.2.1 Document Parameters Page Mockup

Document Parameters Help

* - Indicates required fields Generate Form Cancel

Language: *
English

Generate Form Cancel

Figure 2.4 – Document Parameter

1. Language – The Language drop down will only have English as an available option.

2.4.2.2 Create XDP Generic Separator Sheet

A new XDP will be created for the Separator Sheet. There will be no variable population.

Form Header: N/A

Form Title: Imaging Separator Coversheet

Imaging Form Name: Imaging Separator Coversheet

Form Number: IMG 101

Include NA Back 9: No

Form Mockups/Examples: See Supporting Documents #1

2.4.2.3 Add Form Control for Generic Separator Sheet

No Imaging barcode needs to be added for the Separator sheet.

Tracking Barcode	BRM Barcode	Imaging Barcode
No	No	No

2.4.2.4 Add Generic Separator Sheet to Template Repository

Add the Generic Separator Sheet to the Template Repository.

Required Document Parameters: Language

The following are the print requirements for the Generic Separator Sheet.

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
No	Yes	No	No	No	No

Mailing Requirements:

Mail-To (Recipient): N/A
 Mailed From (Return): N/A
 Mail-back-to Address: N/A
 Outgoing Envelope Type: N/A
 Return Envelope Type: None

Additional Requirements:

Special Paper Stock: N/A
 Enclosures: N/A
 Electronic Signature: No
 Post to YBN/C4Y: No

2.5 Add Imaging No Case Coversheet to Template Repository

2.5.1 Overview

This recommendation will add the Imaging No Case Coversheet to the Template Repository.

State Form: N/A, this is an Imaging specific document

Programs: N/A

Attached Forms: N/A

Forms Category: Form

Languages:

English

2.5.2 Description of Change

2.5.2.1 Document Parameters Page Mockup

Document Parameters Help

* - Indicates required fields

Language: *
English

Generate Form Cancel

Generate Form Cancel

Figure 2.5 – Document Parameter

1. Language – The Language drop down will only have English as an available option.

2.5.2.2 Create XDP Imaging No Case Coversheet

A new XDP will be created for the Imaging No Case Coversheet.

Form Header: N/A

Form Title: Imaging No Case Coversheet

Imaging Form Name: Imaging No Case Coversheet

Form Number: IMG 102

Include NA Back 9: No

Form Mockups/Examples: See Supporting Documents #1

2.5.2.3 Add Form Control for Imaging No Case Coversheet

Do not add an Imaging barcode for the Imaging No Case Coversheet.

Tracking Barcode	BRM Barcode	Imaging Barcode
No	No	No

2.5.1.4 Add Imaging No Case Identified to Template Repository

Add the Imaging No Case Identified Separator Sheet to the Template Repository.

Required Document Parameters: Language

The following are the print requirements for the Imaging No Case Identified Separator Sheet.

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
No	Yes	No	No	No	No

Mailing Requirements:

Mail-To (Recipient): N/A
 Mailed From (Return): N/A
 Mail-back-to Address: N/A
 Outgoing Envelope Type: N/A
 Return Envelope Type: None

Additional Requirements:

Special Paper Stock: N/A
 Enclosures: N/A
 Electronic Signature: No
 Post to YBN/C4Y: No

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	Mockup of a barcoded coversheet	Imaging Case Coversheet Mockup
2	Correspondence	Generic Separator Sheet	Imaging Separator Coversheet Mockup
3	Correspondence	No Case Coversheet Mockup	Imaging No Case Coversheet Mockup
4	Correspondence	Mockup of multiple barcoded coversheets.	Imaging Multi Case Coversheet Mockup
5	Security	Security Matrix.	Security Matrix

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
DDID 2503	<p>The CONTRACTOR shall configure the imaging solution to allow the following documents to act as separators for the capture and indexing multi-case scan mode and returned mail multi-case scan mode:</p> <ul style="list-style-type: none"> 1) Cover Sheets - Will contain a barcode with a case number or a no case identifier 2) System Generated Barcoded Documents <p>The CONTRACTOR shall configure the imaging solution to allow the optional use of generic separator sheets for all scan modes to assist in separating documents.</p> <p>The CONTRACTOR shall configure the imaging solution to allow the optional use of envelopes as separator sheets for the returned mail multi-case scan mode.</p>	None	This page creates the coversheets needed to separate during multi-case scan mode.

CalSAWS

California Statewide Automated Welfare System

Design Document

SCR CA-214060 – Imaging Inbound Web
Services

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
6/9/20	1.0	Initial Draft	Jennifer Kim

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1 OVERVIEW

This SCR addresses three inbound Web Services to serve CalSAWS Data to the CalSAWS Imaging System: Get Barcode Info, Get Case Info and Get Resource Data Bank (RDB) Info Calls. The CalSAWS Imaging System leverages all three calls to receive CalSAWS-generated form and Barcoded coversheet information; Case information; and RDB information respectively.

The Get Barcode Info Web Service makes a request for Case and Form data from CalSAWS by sending request parameters to CalSAWS that validate the request.

The Get Case Info Web Service makes a request for Case details from CalSAWS during Single Case, SIU, Hearings, Ignore Barcode and Re-Indexing capture modes by sending request parameters to CalSAWS that validate the request.

The Get RDB Info Web Service makes a request for RDB document information from CalSAWS by sending request parameters to CalSAWS that validate the request.

1.1 Current Design

There are no established Web Services between the CalSAWS Imaging System and CalSAWS to request Case, Form, and RDB information from CalSAWS.

1.2 Requests

1. Create new inbound Web Services for the CalSAWS Imaging System to request supporting Case, Form, and RDB Data from the CalSAWS System.

1.3 Overview of Recommendations

1. Create a Get Barcode Info Inbound Web Service to return CalSAWS Case, Form, and Document data to the Imaging System.
2. Create a Get Case Info Inbound Web Service to return CalSAWS Case data to the Imaging System.
3. Create a Get RDB Info Inbound Web Service to return CalSAWS RDB data to the Imaging System.

1.4 Assumptions

1. All authentication and error codes handled by API Gateway will be added and implemented after ApiGEE and ForgeRock integration is complete.
2. Database updates within the CalSAWS System will be made to store the Document Type and Imaging form name mappings as part of this SCR. However, this SCR will not incorporate ALL agreed-upon mappings for documents that are not yet captured in the CalSAWS System. A subsequent SCR will be required to fully implement new additions to the template repository in CalSAWS. This SCR will

account for the Imaging-formatted form names for System-Generated Forms that exist in LRS at the time of implementation.

3. DDID 2302 (SCR CA-207108) will add the standardized 2D barcode to retrieve all pertinent information necessary to identify the document, customer, and case will be added to applicable documents before printing.

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2 RECOMMENDATIONS

2.1 Get Barcode Info Inbound Web Service

2.1.1 Overview

Barcode indexing is the primary method by which documents will be categorized in the CalSAWS Imaging System. This indexing makes use of a unique value held within the QR code that is present on CalSAWS generated forms, and CalSAWS generated barcoded coversheets. Both single and multi-Case scan modes will leverage hardware barcode detection of the scanning user's device. This value is applied to the barcode metadata field of the scanned page. This barcode value is then passed to the CalSAWS application via the Get Barcode Info Web Service call.

The Get Barcode Info Inbound Web Service will be used in three different contexts:

- 1) for a barcode value associated to a specific CalSAWS-generated form OR
- 2) for a Case-specific barcoded coversheet Separator Form.
- 3) For a No Case Identified barcoded coversheet Separator Form.

Depending on the context of the barcoded document, the Web Service business logic will retrieve CalSAWS data differently.

2.1.2 Description of Change

1. Add a new "Imaging Program Override" Security Right to CalSAWS. This new security right will allow the scanning worker to select which worker is assigned to document tasks. Having this security right will inform inbound Web Services whether or not to return a program list to the CalSAWS Imaging System, which will be addressed with the document task functionality to be implemented in SCR CA-214034 (DDID 2504) at a future date.
2. Add a new Code Category Table for the CalSAWS Imaging Type Codes. Add the following Imaging Type Descriptions into a new code lookup table (Refer to the document "CalSAWS Document Types and Form Names 5.27.20.xlsx" - Column A (Document Types) for a distinct list of values):

Document Type	Document Type	Document Type
Address/Residency	E-Notification	Overpayment/Overissuance (OP/OI)
Adoption Assistance Program (AAP)	Family Stabilization	Person Verification
Application, Intake, or Screening	Fiscal	Sworn Statements
Appointment Letter	Foster Care (FC)	Personal Expenses
Authorized Rep and Release of Info	GA/GR Work and Activities	Property
CalFresh (CF)	Gen. Assistance/Gen. Relief (GA/GR)	Quality Assurance/Quality Control
Cal-Learn	Homeless Assistance (HA)	Referrals
CalWORKs (CW)	Housing Support Program (HSP)	Rights and Responsibilities
CAPI	IEVS	SIU

CFET	IHSS	Sponsor Related
Child Care	Income	Tax Documents
Child Support	Inter-County Transfer (ICT)	Time Limit Documents
County Medical Services Program (CMSP)	Interoffice Correspondence	TNB/SNB
Court/Hearings Document	Jail/Inmate	Transportation
Customer Reporting	Kin-GAP	Vendors and Providers
Customer Verification Forms	Language	Verification Requests
Customer/Worker Contact	Learning Disability Documents	Veterans
DDSD	Medi-Cal (MC)	Voter Registration
Domestic Violence	Medical Reports/Records	Welfare to Work (WTW)
Education	MEDS Related	
Electronic Benefit Transfer (EBT)	Notification/NOA	

3. Add a new Static Table for the CalSAWS Imaging System Document Types and Short Names. Refer to the document "CalSAWS Document Types and Form Names 5.27.20.xlsx" for entries that do not have a Form Number. The new table will store Imaging-exclusive (non-system generated) documents (such as Driver's License, Pay Stub, etc.) and will have columns representing the following elements:
 - a. "Imaging Form Name" - This new column will be limited to 40 characters to match the length limitations of the Imaging System.
 - b. "Imaging Document Type Code" – this new column will contain a new 2-character code that references the new CalSAWS Imaging Type Code mapping.
4. Update the DOC_TEMPL table with the following changes:
 - a. Add a new "Imaging Form Name" Column - This new column will be limited to 40 characters to match the length limitations of the Imaging System.
 - b. Repurpose the existing IMG_TYPE column to refer to the new CalSAWS Imaging Type Code Category table.
5. Create a DCR to populate the "Imaging Form Name" and IMG_TYPE columns in DOC_TEMPL based on the "CalSAWS Document Types and Form Names 5.27.20.xlsx" document. *Note – the referenced document contains Form Numbers currently not present in CalSAWS. These new records will be added to the CalSAWS System at a future date.
6. Create a 'Get Barcode Info' Web Service, in which the imaging system makes a request for CalSAWS data by sending the document's barcode number and Active Directory User Name. This Web Service will return Case and Form information associated to the barcoded document and/or requested Case. The Web Service will have three different responses based on the nature of the barcode value received in the request:
 - a. When the request includes a standard barcode value (the barcode number does NOT have 7 leading 'A's), then match the barcode to the 2D barcode value in the GENERATE_DOC table. Please refer to the table "Get Barcode Info – RESPONSE 1 – System Generated Document Barcode" below for additional details. If the Web Service is unable to retrieve Case data values due to no case linkage to the barcoded document, return the Form Name and Form Number with empty Case-related data fields.

- b. When the request includes a barcode from a system-generated barcoded coversheet, the barcode will begin with 7 leading 'A's (EX: AAAAAAA02LOD1318). Retrieve the Case information by parsing the Case number and county code from the barcode number.
 - i. Starting at the 8th character position, extract the 2-character length County Code. (EX: AAAAAAA02LOD1318, County = 02)
 - ii. Starting at the 10th character position, extract the 7-character Case Serial Number. (EX: AAAAAAA02LOD1318, Serial Number = LOD1318). Please refer to the table "Get Barcode Info – RESPONSE 2 – System Generated Coversheet Barcode" below for additional details.
 - c. When the request includes a No Case Identified barcode (EX: NOCASE0000000000) value, the response will only include the values specified in the "Get Barcode Info – RESPONSE 3 – "No Case" Coversheet Barcode" table below.
7. Perform Integration Testing with the interface partner.

If the Web Service is unable to retrieve indexing values either by no barcode number existing in the CalSAWS database or the barcode was not recognized, an empty response will be returned.

Table 1 – Get Barcode Info Request Parameters

Get Barcode Info – REQUEST			
FIELD NAME	TYPE	COMMENTS	REQUIRED
barcodeNumber	String (16 char.)	Barcode number The barcode number will consist of one of the following values: 1) a 16-digit numeric value present on system generated forms and represents the 2D Barcode UID, or 2) a 16-character alpha numeric value present on system-generated barcoded coversheet Separator, or 3) a static 16-digit alpha numeric value that represents a No Case : NOCASE0000000000	Y

		present on No Case Identified barcoded coversheet.	
userName	String (40 char. limit)	Active Directory user name of user who has logged into the Imaging System. Table name is 'Staff' and column name is 'ACTIV_DIR_USER_NAME' in Active Directory.	Y

Table 2 – Get Barcode Info RESPONSE 1 Parameters

Get Barcode Info – RESPONSE 1 – System Generated Document Barcode			
FIELD NAME	TYPE	COMMENTS	REQUIRED
responseCode	HTTP Response Code: 200	Return HTTP response code 200 if the call was completed successfully.	Y
caseNumber	String (7 char)	The CASE Serial number associated with the 2D barcode number from the GENERATE_DOC table provided in the request.	N
caseUID	Long	The CASE Unique ID associated with the 2D barcode number from the GENERATE_DOC table provided in the request.	N
caseName	String (40 char. limit)	The CASE Name associated with the 2D barcode number from the GENERATE_DOC table provided in the request. Truncate the Case Name to 40 Characters.	N
countyCode	String (2 char)	The CASE County Code associated with the 2D barcode number from the GENERATE_DOC table provided in the request.	N
formName	String (40 char. limit)	<ol style="list-style-type: none"> 1) This element will be found in the new 'Imaging Form Name' column in DOC_TEMPL 2) For Dynamic NOAs with a Barcode that are not in DOC_TEMPL, use the following methodology to construct 	N

		<p>a dynamic Form Name. Append the following fields:</p> <ul style="list-style-type: none"> • Prefix the value with "NOA-" • Lookup the decode value for GENERATE_DOC.ACTN_CODE (CTY 221) • The PGM_CODE associated with the NOA • Example: NOA-Discontinuance-CW 	
formNumber	String (40 char. limit)	<ol style="list-style-type: none"> 1) The Form Number of the DOC_TEMPL record associated with the 2D barcode number from the GENERATE_DOC table provided in the request. 2) For Dynamic NOAs, this field will be blank 	N
programList	List of Program Objects	<p>A list of program objects consisting of:</p> <ul style="list-style-type: none"> • Decoded program name, • program status (as of the system date), • worker number assigned to the program (as of the system date) and • program ID <p>The list of Programs are associated to the CASE record. This field will only be populated if the User Name in the request has the appropriate Imaging Program Override Security Right. Blank if otherwise.</p>	N
confidentialFlag	Boolean	Confidentiality of the Case associated to the barcoded document being scanned into the Imaging System. Populated with a "True" value if one or more CONFID records are effective for the current system date. "False" if a currently effective CONFID record does not exist.	N

Table 3 – Get Barcode Info RESPONSE 2 Parameters

Get Barcode Info – RESPONSE 2 – System Generated Coversheet Barcode

FIELD NAME	TYPE	COMMENTS	REQUIRED
responseCode	HTTP Response Code: 200	Return HTTP response code 200 if the call was completed successfully.	Y
caseNumber	String (7 char)	The CASE Serial number matching the Case data present in the request's barcode (Based on SERIAL_NUM_IDENTIF and COUNTY_CODE match in CalSAWS)	N
caseUID	Long	The CASE Unique ID matching the Case data present in the request's barcode (Based on SERIAL_NUM_IDENTIF and COUNTY_CODE match in CalSAWS)	N
caseName	String (40 char. limit)	The CASE Name matching the Case data present in the request's barcode (Based on SERIAL_NUM_IDENTIF and COUNTY_CODE match in CalSAWS). Truncate the Case Name to 40 Characters.	N
countyCode	String (2 char)	The CASE County Code matching the Case data present in the request's barcode (Based on SERIAL_NUM_IDENTIF and COUNTY_CODE match in CalSAWS)	N
formName	String (40 char. limit)	Form Name "Imaging Case Coversheet" as expressed in CA-214031 Coversheet Generation.	N
formNumber	String (40 char. limit)	The Form Number of the DOC_TEMPL record associated with the Case Barcoded Coversheet.	N

programList	List of Program Objects	<p>A list of program objects consisting of:</p> <ul style="list-style-type: none"> • Decoded program name, • program status (as of the system date), • worker number assigned to the program (as of the system date) and • program ID <p>The list of Programs are associated to the CASE record. This field will only be populated if the User Name in the request has the appropriate Imaging Program Override Security Right. Blank if otherwise.</p>	N
confidentialFlag	Boolean	<p>Confidentiality of the Case associated to the barcoded document being scanned into the Imaging System. Populated with a "True" value if one or more CONFID records are effective for the current system date. "False" if a currently effective CONFID record does not exist.</p>	

Table 4 – Get Barcode Info RESPONSE 3 Parameters

Get Barcode Info – RESPONSE 3 – “No Case” Coversheet Barcode			
FIELD NAME	TYPE	COMMENTS	REQUIRED

responseCode	HTTP Response Code: 200	Return HTTP response code 200 if the call was completed successfully.	Y
caseNumber	String (7)	This field is left intentionally blank for No Case Identified barcoded coversheet	N
caseUID	Long	This field is left intentionally blank for No Case Identified barcoded coversheet	N
caseName	String (40 char. limit)	This field will always return with a value of "No Case Identified"	Y
countyCode	String (2 char. limit)	This field is left intentionally blank for No Case Identified barcoded coversheet	N
formName	String (40 char. limit)	Form Name is "Imaging No Case Coversheet" as expressed in SCR CA-214031 Coversheet Generation.	Y
formNumber	String (40 char. limit)	The Form Number of the DOC_TEMPL record associated with the No Case Identified barcoded coversheet	Y
programList	List of Program Objects	This field is left intentionally blank for No Case Identified barcoded coversheet	N
confidentialFlag	Boolean	This field is left intentionally blank for No Case Identified barcoded coversheet	N

Table 5 – Get Barcode Info - FAILED WEB SERVICE OPERATIONS

Field Name	HTTP Response Code	COMMENTS
responseCode	400	Return HTTP response code 400 if there is a problem with the request and the Integration Server is unable to process it.
responseCode	404	Return HTTP response code 404 if the ImageNow Server cannot find the

		barcode number in the CalSAWS system.
responseCode	500	Return HTTP response code 500 if there is an unknown internal server error that occurred while trying to process the request.

2.1.3 Execution Frequency

The Get Barcode Info Web Service is invoked real-time when the Imaging System requests a barcoded document's information.

2.1.4 Key Scheduling Dependencies

N/A

2.1.5 Counties Impacted

Counties utilizing the CalSAWS Imaging System will be impacted. C-IV, LRS and CalWIN counties will be impacted in phases in that order.

2.1.6 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
ImagingProgramOverride	Allows the imaging worker to select program(s) to which the task is assigned.	Imaging Program Override

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Imaging Program Override	Allows the imaging worker to select program(s) to which the task is assigned.	County Discretion

2.1.7 Data Volume/Performance

N/A

2.1.8 Interface Partner

CalSAWS Imaging System

2.1.9 Failure Procedure/Operational Instructions

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

2.2 Get Case Info Inbound Web Service

2.2.1 Overview

The Imaging System invokes the Get Case Info Web Service in various contexts, but the request can be made in one of two formats below:

1. Clicking on the 'Capture' button on the Case Summary Page of the CalSAWS application.
2. Clicking on the 'Search' button in the 'Case Number Lookup' prompt in the Imaging System during Re-Indexing; Scan Quality Assurance and Finalization of 'Special Investigations Unit' or 'Fraud' (SIU); Hearings; or Ignore Barcode capture mode.

The Get Case Info Web Service requests Case details from the CalSAWS System by sending parameters that validates the request.

2.2.2 Description of Change

1. Create a Get Case Info Web Service, in which the Imaging System requests the following Case details by sending the 'Case UID' and 'User Name (AD)' or 'Case Number', 'County Code' and 'User Name (AD)' to CalSAWS:
 - Case UID
 - Case Number
 - County Code
 - Confidential Flag
 - Program List
2. Perform Integration Testing with the interface partner.

Table 1 – Get Case Info Request Parameters

Get Case Info – REQUEST			
FIELD NAME	TYPE	COMMENTS	REQUIRED

<p>Either 'caseUID' + 'userName' or 'caseNumber' + 'countyCode' + 'username' must be sent to CalSAWS. The reason for providing an alternative set of request parameters is to fulfill a Web Service call during a re-index process where the Case UID is not available.</p>			
caseUID	Integer (\$int64)	Case unique ID of non-barcoded document being scanned into the Imaging System.	Y
userName	String (40 char. limit)	Active Directory user name of user who has logged into the Imaging System. Table name is 'Staff' and column name is 'ACTIV_DIR_USER_NAME' in Active Directory.	Y
----- OR -----			
caseNumber	String (7 char.)	Case number of non-barcoded document being scanned into the Imaging System. 7-char case SerialNumIdentif	Y
countyCode	String (2 char.)	2-digit county code of non-barcoded document being scanned into the Imaging System.	Y
userName	String (40 char. limit)	Active Directory user name of user who has logged into the Imaging System. Table name is 'Staff' and column name is 'ACTIV_DIR_USER_NAME' in Active Directory.	Y

Table 2 – Get Case Info Response Parameters

Get Case Info – RESPONSE

FIELD NAME	TYPE	COMMENTS	REQUIRED
responseCode	HTTP Response Code 200	Return HTTP response code 200 if the call was completed successfully.	Y
caseNumber	String (7 char.)	Case number associated to the requested Case ID OR Case Number and Case County Code in CalSAWS.	Y
caseUID	Integer (\$int64)	Case unique ID associated to the requested Case ID OR Case Number and Case County Code in CalSAWS.	Y
caseName	String (40 char. limit)	The Case name associated to the requested Case ID OR Case Number and Case County Code in CalSAWS. This will be truncated to fit the 40 character limit.	Y
countyCode	String (2 char.)	2-digit county code associated to the requested Case ID OR Case Number and Case County Code in CalSAWS. This will be truncated to fit the 40 character limit.	Y
programList	List of Program Objects	<p>A list of program objects consisting of:</p> <ul style="list-style-type: none"> Decoded program name, program status (as of the system date), worker number assigned to the program (as of the system date) and program ID <p>The list of Programs are associated to the CASE record. This field will only be populated</p>	N

		if the User Name in the request has the appropriate Imaging Program Override Security Right. Blank if otherwise.	
confidentialFlag	Boolean	Confidentiality of the Case. This will be Populated with a "True" value if one or more CONFID records are effective for the current system date. "False" if a currently effective CONFID record does not exist.	Y

Table 3 – Get Case Info - FAILED WEB SERVICE OPERATIONS

Field Name	HTTP Response Code	COMMENTS
responseCode	400	Return HTTP response code 400 if there is a problem with the request and the Integration Server is unable to process it.
responseCode	404	Return HTTP response code 404 if the ImageNow Server cannot find the case UID, user name or valid case number and county code combination in the CalSAWS system.
responseCode	500	Return HTTP response code 500 if there is an unknown internal server error that occurred while trying to process the request.

2.2.3 Execution Frequency

The Get Case Info Web Service is invoked real-time as soon as the Imaging User selects the appropriate button in the Imaging System.

2.2.4 Key Scheduling Dependencies

N/A – Real Time Interface

2.2.5 Counties Impacted

Counties utilizing the CalSAWS Imaging System will be impacted. C-IV, LRS and CalWIN counties will be impacted in phases in that order.

2.2.6 Security Updates

3. Security Rights

Security Right	Right Description	Right to Group Mapping
ImagingProgramOverride	Allows the imaging worker to select program(s) to which the task is assigned.	Imaging Program Override

4. Security Groups

Security Group	Group Description	Group to Role Mapping
Imaging Program Override	Allows the imaging worker to select program(s) to which the task is assigned.	County Discretion

2.2.7 Data Volume/Performance

N/A

2.2.8 Interface Partner

CalSAWS Imaging System

2.2.9 Failure Procedure/Operational Instructions

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

2.3 Get RDB Info Inbound Web Service

2.3.1 Overview

The Get Resource Data Bank (RDB) Info Web Service is invoked when the user clicks on the 'Search' button in the 'Resource Number Lookup' prompt in the Imaging System during Scan Quality Assurance and Finalization of RDB capture mode.

The Get RDB Info Web Service requests RDB document details from the Imaging System by sending parameters that validates the request.

2.3.2 Description of Change

1. Create a Get RDB Info Web Service, in which the Imaging System requests the following by sending the scanned RDB documents' corresponding 'Resource Number' to CalSAWS:
 - Resource Number
 - Resource Name
 - Resource Unique ID
2. Perform Interface Partner Testing with the interface partner.

Table 1 – Get RDB Info Request Parameters

Get RDB Info – REQUEST			
FIELD NAME	TYPE	COMMENTS	REQUIRED
resourceNumber	String	Resource number. The Unique identifier (ID column) of the ORG table.	Y

Table 2 – Get RDB Info Response Parameters

Get RDB Info – RESPONSE			
FIELD NAME	TYPE	COMMENTS	REQUIRED
responseCode	HTTP Response Code 200	Return HTTP response code 200 if the call was completed successfully.	Y

resourceNumber	Long	Resource number is the Unique identifier of the ORG table.	Y
resourceName	String (40 char. limit)	Resource name is the ORG_NAME of the ORG record that matches the Unique Identifier provided in the request. Truncated to 40 characters.	Y
resourceUID	Long	Resource UID is the Unique Identifier of the ORG table. It is the same value as the resource number.	Y

Table 3 – Get RDB Info - FAILED WEB SERVICE OPERATIONS

Field Name	HTTP Response Code	COMMENTS
responseCode	400	Return HTTP response code 400 if there is a problem with the request and the Integration Server is unable to process it.
responseCode	404	Return HTTP response code 404 if the ImageNow Server cannot find the resource number in the CalSAWS system.
responseCode	500	Return HTTP response code 500 if there is an unknown internal server error that occurred while trying to process the request.

2.3.3 Execution Frequency

The Get RDB Info Web Service is invoked real-time when the user clicks on the 'Search' button in the 'Resource Number Lookup' prompt in the Imaging System during Scan Quality Assurance and Finalization of Resource Data Bank (RDB) capture mode.

2.3.4 Key Scheduling Dependencies

N/A – Real Time Interface

2.3.5 Counties Impacted

Counties utilizing the CalSAWS Imaging System will be impacted. C-IV, LRS and CalWIN counties will be impacted in phases in that order.

2.3.6 Data Volume/Performance

N/A

2.3.7 Interface Partner

CalSAWS Imaging Solution

2.3.8 Failure Procedure/Operational Instructions

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

DRAFT

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Security	Security Matrix	
2	Imaging	CalSAWS Document Types and Form Names 5.27.20.xlsx	

DRAFT

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2198	<p>The CONTRACTOR shall configure the core capture and indexing scan modes (Single Case, Virtual Print, and Multi-case) to perform the following functions when a system generated barcode is recognized by the imaging solution: 1) Perform a CalSAWS Software lookup of Form Name, Form Number, Case Name, Case Number, and Document Type2) Check the barcode against the case information entered during the scan mode 2a) Not applicable to multi-case scan mode3) If the document is time sensitive (tracked), mark the document as received in the CalSAWS Software3a) If the barcode is not recognized, time sensitive (tracked) documents are reviewed by designated staff to confirm the barcode</p>	None	<p>1. This design creates a Get Barcode Info Web Service, in which the Imaging System makes a request for Case and Form information associated to the barcoded document and/or requested case from CalSAWS by sending the document's 'Barcode Number' and 'User Name (AD)' to CalSAWS.</p> <p>2. This design creates a Get Case Info Web Service, in which the Imaging System requests case details from CalSAWS by sending the 'Case UID' and 'User Name (AD)' or 'Case Number', 'County code' and 'User Name (AD)' to CalSAWS.</p>

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2523	<p>The CONTRACTOR shall provide configurable security rights that are maintained by county local security administrators within the CalSAWS Software with the following:1) CalSAWS Software security rights will update the imaging solution during a nightly batch process2) The No Change SAR7/QR7 override option will only be available to counties that have opted into this functionality3) Up to 120 individual security rights will be provided as a part of the imaging solution</p>		<p>This design adds the Imaging Program Override Security Right to CalSAWS.</p>
2521	<p>The CONTRACTOR shall create a security driven scan mode for Resource Data Bank (RDB) with the following metadata: 1) Resource ID2) Resource Name3) Document Type4) Applicable Date5) Received DateThe CONTRACTOR shall enable the following scan modes for RDB:1) Single Case - Used for capturing one or more documents for a single case2) Virtual Print - Used to print documents directly from any desktop application that allows printing into the imaging solution to a single case</p>	None	<p>This design creates a Get RDB Info Web Service, in which the Imaging System requests RDB document information by sending the document's corresponding 'Resource Number' to CalSAWS.</p>

5 MIGRATION IMPACTS

[Document any migration impacts such as data model or potential business process changes]

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

DRAFT

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214441

Roll Back Absent Parent Validation for Foster
Care and Kin-GAP

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Tom Lazio
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
07/07/2020	1.0	Initial Draft	T. Lazio

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1 OVERVIEW

A soft validation displays on the Run EDBC page for Foster Care (FC) and Kin-GAP (KG) programs when there is an absent or unmarried parent associated with the case. At the request of Los Angeles County, this SCR will update the validation to no longer display on the Run EDBC page for KG and FC programs.

1.1 Current Design

SCR CA-207192 (DDID 2085) updated the conditions to display the following soft validation on the Run EDBC page when there is no absent/unmarried record for the biological/adoptive parent for a child:

There is no Absent/Unmarried Parent record for the following child(ren):

- [Name of Child with absent parent]

Currently, county staff must click on the 'Run EDBC' button to bypass the validation message.

The screenshot shows the 'Run EDBC' interface. At the top, there are three buttons: 'Change Reason', 'Run EDBC', and 'Cancel'. Below these is a 'Benefit Processing Range' section with 'Begin Month' and 'End Month' dropdowns, both set to '08/2020'. A table below shows a single row for 'Foster Care' with status 'Active' and a 'Run Reason' dropdown. A red validation message is displayed: 'There is no Absent/Unmarried Parent record for the following child(ren):' followed by a bullet point 'FC Child'. Below the message is the text 'To continue running EDBC, click the "Run EDBC" button.' At the bottom of the form, there are three buttons: 'Change Reason', 'Run EDBC', and 'Cancel'. A footer bar at the very bottom states 'This Type_1 page took 0.75 seconds to load.'

Program	Status	Timely Notice Exception	Reason	Run Reason
<input checked="" type="checkbox"/>	Foster Care	Active		<input type="text"/>

Figure 1.1.1 – Absent/Unmarried Parent record Validation

1.2 Requests

Since all counties do not collect absent parent information on FC or KG cases and having to click the 'Run EDBC' button to bypass the validation message is an extra step, the request is to remove the soft validation on the Run EDBC page when running EDBC for FC and KG programs.

1.3 Overview of Recommendations

1. Update the Run EDBC page to not display 'Absent/Unmarried Parent' validation for FC and KG EDBC.

1.4 Assumptions

1. This validation will not be changed and will still apply to the following impacted programs:
 - CalWORKs
 - Immediate Need
 - Diversion
 - Refugee Cash Aid
 - Medi-Cal

2 RECOMMENDATION

2.1 Run EDBC page

2.1.1 Overview

The 'Absent/Unmarried Parent' soft validation will be updated to not display for Foster Care and Kin-GAP EDBC.

2.1.2 Description of Changes

1. Update the 'Absent/Unmarried Parent' soft validation to not generate on the Run EDBC page when EDBC is ran for the following programs:
 - Foster Care
 - Kin-GAP

2.1.3 Page Location

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

2.1.4 Security Updates

N/A

2.1.5 Page Mapping

N/A

2.1.6 Page Usage/Data Volume Impacts

N/A

2.1.7 Programs Impacted

Foster Care, Kin-GAP

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.1.1.1	The LRS shall be user-friendly, including in presentation, navigation, and other ease of use features.	Eliminates the extra step of bypassing the Absent/Unmarried Parent validation that is unnecessary for Foster Care and Kin-GAP EDBC's.

S72 FS:

Case Number: B1CB200

Los Angeles PROD

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

SAR 7 03/2020 04/09/2020

Personal Contact:
No

Status			
Program	Status	Status Detail	Date
CF	Complete-	EDBC Accepted	04/09/2020

CalFresh Status History			
Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:13 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:13 PM	214791
Received	04/09/2020	04/09/2020 19:20:13 PM	214791
Sent	02/24/2020	02/24/2020 23:51:44 PM	582723
Generated	02/24/2020	02/24/2020 22:31:36 PM	593485

Case Number: B1CB200

Los Angeles PROD

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Does the information on this report, alone or combined with the information from
6. previously submitted report(s) for this submit month, equal a complete and correct
report? *

CalFresh Status History			
Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:19:44 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:19:44 PM	214791
Received	04/09/2020	04/09/2020 19:19:44 PM	214791
Sent	02/24/2020	02/24/2020 23:51:44 PM	582723
Generated	02/24/2020	02/24/2020 22:31:43 PM	593485

Close

LRS Los Angeles PROD Case Number: L908083

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number: **Go**

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 5 of 5

Display Type: From: To: **View**

Type	Submit Month	Program	Status	Status Date
SAR 7	04/2018	CF	Complete- EDBC Accepted	04/04/2018
CF RE Packet	10/2018	CF	Received	09/25/2018
MC RE Packet	10/2018	MC	Received	10/15/2018
MC RE Packet	04/2020	MC	Received	03/17/2020
SAR 7	04/2020	CF	Complete- EDBC Accepted	04/09/2020
SAR 72	04/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: L908083

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Journal Help Resources Page Mapping Images DCFS Images Log Out

Does the information on this report, alone or combined with the information from 6. previously submitted report(s) for this submit month, equal a complete and correct report? *

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:19:32 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:19:32 PM	214791
Received	04/09/2020	04/09/2020 19:19:32 PM	214791
Sent	04/09/2020	04/09/2020 19:19:32 PM	214791
Generated	03/27/2020	03/27/2020 13:12:30 PM	970259

Close

LRS Los Angeles PROD Case Number: L091A22

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Journal Help Resources Page Mapping Images DCFS Images Log Out

Reporting

Case Number: **Go**

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 1 of 1

Display Type: From: To: **View**

Type	Submit Month	Program	Status	Status Date
SAR 7	04/2020	CF	Complete- EDBC Accepted	04/09/2020
SAR 72	04/2020	CF	Complete- EDBC Accepted	04/09/2020

Case Number: L091A22

LRS Los Angeles PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Does the information on this report, alone or combined with the information from previously submitted report(s) for this submit month, equal a complete and correct report? *

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:19:32 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:19:32 PM	214791
Received	04/09/2020	04/09/2020 19:19:32 PM	214791
Sent	04/09/2020	04/09/2020 19:19:32 PM	214791
Generated	03/27/2020	03/27/2020 12:50:33 PM	970959

[Close](#)

This Type 1 page took 5.68 seconds to load.

S72 CW/RCA:

Case Number: B1Q0046

LRS Los Angeles PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number: [Go](#)

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 16 of 16

Display Type: From: To: [View](#)

Type	Submit Month	Program	Status	Status Date
SAR 7	03/2020	CW	Complete- EDBC Accepted	04/09/2020
SAR 7	03/2020	CF	Complete- EDBC Accepted	04/09/2020
SAR 72	03/2020	CW/RCA	Complete- EDBC Accepted	04/09/2020
SAR 72	03/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: B1Q0046

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

5. Is information reported on the report consistent with information known to the agency? *

6. Does the information on this report, alone or combined with the information from previously submitted report(s) for this submit month, equal a complete and correct report? *

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:05 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:05 PM	214791
Received	03/21/2020	03/21/2020 11:05:59 AM	253783
Sent	02/25/2020	02/25/2020 00:00:22 AM	582723
Generated	02/24/2020	02/24/2020 21:55:50 PM	582504

Close

LRS Los Angeles PROD Case Number: B1Q233

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number: Go

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 15 of 15

Display Type: From: To: View

Type	Submit Month	Program	Status	Status Date
SAR 7	04/2020	CW	Complete- EDBC Accepted	04/09/2020
SAR 7	04/2020	CF	Complete- EDBC Accepted	04/09/2020
SAR 72	04/2020	CW/RCA	Complete- EDBC Accepted	04/09/2020
SAR 72	04/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: B1Q233

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Personal Contact: No

Status

Program	Status	Status Detail	Date
CW	Complete- EDBC Accepted		04/09/2020
CF	Complete- EDBC Accepted		04/09/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:18:57 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:18:57 PM	214791
Received	04/09/2020	04/09/2020 19:18:57 PM	214791
Sent	04/09/2020	04/09/2020 19:18:57 PM	214791
Generated	03/27/2020	03/27/2020 12:11:42 PM	971010

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:19:14 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:19:14 PM	214791
Received	04/09/2020	04/09/2020 19:19:14 PM	214791
Sent	04/09/2020	04/09/2020 19:19:14 PM	214791
Generated	03/27/2020	03/27/2020 12:11:42 PM	971010

Report Type: SAR 72 **Submit Month:** 04/2020 **Date Received:** 04/09/2020

LRS Los Angeles PROD Case Number: B1Q233

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

5. Is information reported on the report consistent with information known to the agency? *

6. Does the information on this report, alone or combined with the information from previously submitted report(s) for this submit month, equal a complete and correct report? *

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:19:54 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:19:54 PM	214791
Received	04/09/2020	04/09/2020 19:19:54 PM	214791
Sent	04/09/2020	04/09/2020 19:19:54 PM	214791
Generated	03/27/2020	03/27/2020 12:11:50 PM	971010

Close

LRS Los Angeles PROD Case Number: B1C3227

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number:

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 25 of 32

1 2 Next

Display Type: From: To:

Type	Submit Month	Program	Status	Status Date
SAR 7	04/2020	CW	Complete- EDBC Accepted	04/09/2020
SAR 7	04/2020	CF	Complete- EDBC Accepted	04/09/2020
SAR 72	04/2020	CW/RCA	Complete- EDBC Accepted	04/09/2020
SAR 72	04/2020	CF	Complete- EDBC Accepted	04/09/2020

Case Number: B1C3227

LRS Los Angeles PROD

Case Info | **Eligibility** | Empl. Services | Child Care | Resource Databank | Fiscal | Special Units | Reports | Client Corresp. | Admin Tools

son Search | SAR 7 | 04/2020 | 04/09/2020

Customer Reporting

Personal Contact:
No

Status

Program	Status	Status Detail	Date
CW	Complete- EDBC Accepted		04/09/2020
CF	Complete- EDBC Accepted		04/09/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:08 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:08 PM	214791
Received	04/09/2020	04/09/2020 19:20:08 PM	214791
Sent	04/09/2020	04/09/2020 19:20:08 PM	214791
Generated	03/27/2020	03/27/2020 12:16:49 PM	970158

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:28 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:28 PM	214791
Received	04/09/2020	04/09/2020 19:20:28 PM	214791
Sent	04/09/2020	04/09/2020 19:20:28 PM	214791
Generated	03/27/2020	03/27/2020 12:16:49 PM	970158

Report Type: SAR 72 **Submit Month:** 04/2020 **Date Received:** 04/09/2020

Customer Report (SAR 72) Questions **This Report**

1. Sponsor's name:	Spouse's name:
2. Has the sponsor's spouse signed an affidavit of support? *	Unanswered

Case Number: B1C3227

LRS Los Angeles PROD

Case Info | **Eligibility** | Empl. Services | Child Care | Resource Databank | Fiscal | Special Units | Reports | Client Corresp. | Admin Tools

5. *
Is information reported on the report consistent with information known to the agency? *

6. Does the information on this report, alone or combined with the information from previously submitted report(s) for this submit month, equal a complete and correct report? *

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:19:54 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:19:54 PM	214791
Received	04/09/2020	04/09/2020 19:19:54 PM	214791
Sent	04/09/2020	04/09/2020 19:19:54 PM	214791
Generated	03/27/2020	03/27/2020 12:16:53 PM	970158

LRS Los Angeles PROD Case Number: B174538

Journal Help Resources Page Mapping Images DCS Images Log Out

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number: **Go**

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 22 of 22

Display Type: From: To: **View**

Type	Submit Month	Program	Status	Status Date
SAR 7	03/2020	CW	Complete- EDBC Accepted	04/09/2020
SAR 7	03/2020	CF	Complete- EDBC Accepted	04/09/2020
SAR 72	03/2020	CW/RCA	Complete- EDBC Accepted	04/09/2020
SAR 72	03/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: B174538

Journal Help Resources Page Mapping Images DCS Images Log Out

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Person Search

Customer Reporting

SAR 7 03/2020 04/09/2020

Personal Contact:
No

Program	Status	Status Detail	Date
CW	Complete- EDBC Accepted		04/09/2020
CF	Complete- EDBC Accepted		04/09/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:26 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:26 PM	214791
Received	04/09/2020	04/09/2020 19:20:26 PM	214791
Sent	02/24/2020	02/24/2020 23:51:50 PM	582723
Generated	02/24/2020	02/24/2020 22:30:00 PM	582542

Case Name: ROSA JANDRES
Case Number: B174538

Journal Help Resources Page Mapping Images DCFS Images Log Out

LRS
Los Angeles
PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:18:54 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:18:54 PM	214791
Received	04/09/2020	04/09/2020 19:18:54 PM	214791
Sent	02/24/2020	02/24/2020 23:51:50 PM	582723
Generated	02/24/2020	02/24/2020 22:30:00 PM	582542

Report Type: SAR 72 **Submit Month:** 03/2020 **Date Received:** 04/09/2020

Customer Report (SAR 72) Questions **This Report**

1. **Sponsor's name:** **Spouse's name:**

2. Has the sponsor's spouse signed an affidavit of support? * Unanswered

Case Number: B174538

Journal Help Resources Page Mapping Images DCFS Images Log Out

LRS
Los Angeles
PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

5. *

Does the information on this report, alone or combined with the information from

6. previously submitted report(s) for this submit month, equal a complete and correct report? *

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:13 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:13 PM	214791
Received	04/09/2020	04/09/2020 19:20:13 PM	214791
Sent	02/24/2020	02/24/2020 23:51:50 PM	582723
Generated	02/24/2020	02/24/2020 22:30:06 PM	582542

S7 FS:

LRS Los Angeles PROD Case Number: B0N4R92

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Case Number:

Person Search Customer Reporting

Display Type: From: To:

Type	Submit Month	Program	Status	Status Date
SAR 7	04/2020	CW	Not Applicable	03/27/2020
SAR 7	04/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: B0N4R92

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

CW	Not Applicable	CW is AR/CO	03/27/2020
CF	Complete- EDBC Accepted		04/09/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Not Applicable	03/27/2020	03/27/2020 12:01:42 PM	582467

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:33 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:33 PM	214791
Received	04/09/2020	04/09/2020 19:20:33 PM	214791
Sent	03/27/2020	03/27/2020 12:01:42 PM	582467

web.calsaws.net/c-iv/utilities/Journal/search?Y3R4Q2FzZUIk=ODA5NzUzNTYwn&Y3R4Q2FzZU51bWJlY291bnF1bWU=I&Y3R4Q2FzZU5hbWU=R0VBUkxEIFcgTUZFZRVmMgSllug&Y3R4U3BIY2lhbEN...

Journal Search

Case Number: B0N4R92 Resource ID:

Category: All Type: All

Initiated By: All Keyword:

Date From: 10/01/2019 To: 04/09/2020

Results per Page: 25

Search Results Summary Results 1 - 25 of 45

1 [2](#) [Next](#)

Case - B0N4R92 - GEARLD W MAYES JR.

Date	Type	Description
		SAR 7 - Semi

(04/09/2020 7:21 PM LRS System null)

Journal Detail

* - Indicates required fields

Case Number: B0N4R92 Case Name: GEARLD W MAYES JR.

Entry Information

Journal Category: * All Journal Type: * Document

Initiated By: System Method of Contact:

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description: Per direction from CDSS, the periodic report has been marked as 'Complete' due to COVID-19

Case Number: B1PZ037

LRS Los Angeles PROD Reporting

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Case Number:

Person Search

Customer Reporting

Search Results Summary Results 1 - 15 of 15

Display Type: From: To:

Type	Submit Month	Program	Status	Status Date
SAR 7	03/2020	CF	Complete- EDBC Accepted	04/09/2020

Case Number: B1PZ037

LRS Los Angeles PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Person Search

Customer Reporting

SAR 7 03/2020 04/09/2020

Personal Contact:
No

Status

Program	Status	Status Detail	Date
CF	Complete- EDBC Accepted		04/09/2020

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:20:32 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:20:32 PM	214791
Received	04/09/2020	04/09/2020 19:20:32 PM	214791
Sent	02/25/2020	02/25/2020 00:00:05 AM	582723
Generated	02/24/2020	02/24/2020 22:31:30 PM	970008

web.calsaws.net/c-iv/utilities/Journal/search?Y3R4Q2FzZUlk=ODEwNDk2MTYze&Y3R4Q2FzZU51bWJlcg=QjFQWjAzNw==r&Y3R4Q2FzZU5hbWU=Q0FNRVJPTiBSE1BUINIQUxMt&Y3R4U3BIY2libEN...

Journal Search

Case Number: B1PZ037 Resource ID:

Category: All Type: All

Initiated By: All Keyword:

Date From: 10/01/2019 To: 04/09/2020

Results per Page: 25

Search Results Summary Results 1 - 25 of 34

1 2 Next

Case - B1PZ037 - CAMERON R MARSHALL

Date	Type	Description
		SAR 7 - Semi

Journal Detail

*- Indicates required fields

Case Number: B1PZ037 Case Name: CAMERON R MARSHALL

Entry Information

Journal Category: * All Journal Type: * Document

Initiated By: System Method of Contact:

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description: Per direction from CDSS, the periodic report has been marked as 'Complete' due to COVID-19

(04/09/2020 7:22 PM LRS System null)

S7 CW:

LRS Los Angeles PROD Case Number: B1X5226

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number: **Go**

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 22 of 22

Display Type: From: To: **View**

Type	Submit Month	Program	Status	Status Date
GN 6365 - Voc/Ed Training	04/2020	REP/WTW	Sent	04/02/2020
GN 6365 - Voc/Ed Training	03/2020	REP/WTW	Sent	03/02/2020
SAR 7	03/2020	CW	Complete- EDBC Accepted	04/09/2020
SAR 7	03/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: B1X5226

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Person Search

Customer Reporting

Report Type: SAR 7 Submit Month: 03/2020 Date Received: 03/01/2020

Personal Contact:
No

Program	Status	Status Detail	Date
CW	Complete- EDBC Accepted		04/09/2020
CF	Complete- EDBC Accepted		04/09/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:18:38 PM	214791
Reviewed- Ready to Run EDBC	03/01/2020	03/17/2020 08:24:16 AM	520896
Received	03/01/2020	03/01/2020 20:27:28 PM	253783
Sent	02/24/2020	02/24/2020 21:47:14 PM	593476

Testing Login page for the LRS System - LRS System -

Journal Search

Case Number: **Resource ID:**

Category: **Type:**

Initiated By: **Keyword:**

Date From: **To:**

Results per Page:

Search Results Summary Results 1 - 25 of 68

1 2 3 Next

Case - B1X5226 - COURTNEY BRIANNA GRAY

Date	Type	Description
		SAR 7 - Semi

Journal Detail

*- Indicates required fields

Case Number: B1X5226 **Case Name:** COURTNEY BRIANNA GRAY

Entry Information

Journal Category: * All **Journal Type:** * Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description: Per direction from CDSS, the periodic report has been marked as 'Complete' due to COVID-19

LRS Los Angeles PROD Case Number: B118839

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number:

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 25 of 41

1 2 Next

Display Type:

From: **To:**

Type	Submit Month	Program	Status	Status Date
SAR 7	04/2020	CW	Complete- EDBC Accepted	04/09/2020
SAR 7	04/2020	CF	Complete- EDBC Accepted	04/09/2020

LRS Los Angeles PROD Case Number: B118839

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Person Search

Customer Reporting

SAR 7 04/2020 04/09/2020

Personal Contact: No

Status

Program	Status	Status Detail	Date
CW	Complete- EDBC Accepted		04/09/2020
CF	Complete- EDBC Accepted		04/09/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:18:51 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:18:51 PM	214791
Received	04/09/2020	04/09/2020 19:18:51 PM	214791
Sent	04/09/2020	04/09/2020 19:18:51 PM	214791
Generated	03/27/2020	03/27/2020 12:02:17 PM	593334

RC S7:

Case Number: L082B64

LRS Los Angeles PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number:

Person Search

Customer Reporting

Customer Reporting List

Search Results Summary Results 1 - 4 of 4

Display Type: From: To:

Type	Submit Month	Program	Status	Status Date
MAGI MC Packet	04/2020	MC	Received	02/28/2020
SAR 7	03/2020	CW/RCA	Complete- EDBC Accepted	03/20/2020
SAR 7	03/2020	CF	Complete- EDBC Accepted	

Case Number: L082B64

LRS Los Angeles PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Person Search

Customer Reporting

Report Type: SAR 7 **Submit Month:** 03/2020 **Date Received:** 03/16/2020

Personal Contact:
No

Program	Status	Status Detail	Date
CW/RCA	Complete- EDBC Accepted	Action Required	04/09/2020
CF	Complete- EDBC Accepted		03/20/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/09/2020	04/09/2020 19:18:40 PM	214791
Reviewed- Ready to Run EDBC	04/09/2020	04/09/2020 19:18:40 PM	214791
Received	03/16/2020	03/16/2020 13:47:46 PM	253783
Sent	02/25/2020	02/25/2020 00:05:35 AM	582723

Journal Search



Case Number: L082B64

Resource ID:

Category: All

Type: All

Initiated By: All

Keyword:

Date From: 10/01/2019

To: 04/09/2020

Results per Page: 25

Search Results Summary Results 1 - 25 of 72

Case - L082B64 - Daria Kuzmina

Date	Type	Description
		SAR 7 - Semi

Journal Detail



* - Indicates required fields

Case Number: L082B64 **Case Name:** Daria Kuzmina

Entry Information

Journal Category: * All **Journal Type:** * Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description:
Per direction from CDSS, the periodic report has been marked as 'Complete' due to COVID-19



- Case Info
- Eligibility**
- Empl. Services
- Child Care
- Resource Databank
- Fiscal
- Special Units
- Reports
- Client Corresp.
- Admin Tools

Case Number:

Person Search

Customer Reporting

Search Results Summary Results 1 - 9 of 9

Display Type:

From: **To:**

Type	Submit Month	Program	Status	Status Date
GN 6070 - Satisfactory School Attendance (REM)	01/06/2020 - 04/05/2020	REP/WTW	Sent	04/07/2020
GN 6365 - WEX	04/2020	REP/WTW	Sent	04/02/2020
GN 6365 - Satisfactory School Attendance (REM)	04/2020	REP/WTW	Sent	04/02/2020
SAR 7	04/2020	CW/RCA	Complete- EDBC Accepted	

Journal Search



Case Number: LODACC6
 Resource ID:

Category: All
Type: All

Initiated By: All
Keyword:

Date From: 10/01/2019
To: 04/09/2020

Search

Results per Page: 25 Search

Search Results Summary Results 1 - 25 of 25

Case - LODACC6 - MARIA RIOS BARILLAS

Date	Type	Description
04/09/2020	Document	SAR 7 - Semi-Annual Eligibility

Journal Detail



*- Indicates required fields

<< Print

Case Number: LODACC6
Case Name: MARIA RIOS BARILLAS

Entry Information

Journal Category: * All
Journal Type: * Document

Initiated By: System
Method of Contact:

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description: Per direction from CDSS, the periodic report has been marked as 'Complete' due to COVID-19

<< Print

(04/09/2020 7:21 PM LRS System pull)

RCA:

Case Number: B0XGC47

LRS Los Angeles PROD

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

*- Indicates required fields

▶ Refine Your Search

Search Results Summary Results 1 - 7 of 7

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/27/2020 11:06 AM	Eligibility Status Report (SPA)	SAR 7	RCA	Print Central Cancelled		Details

Case Number: B0XGC47

LRS Los Angeles PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

*- Indicates required fields

Case Number:

Person Search Customer Reporting

Report Type: SAR 7

Submit Month: 05/2020

Date Received: 04/27/2020

Personal Contact: No

Program	Status	Status Detail	Date
CW/RCA	Complete-	EDBC Accepted	04/27/2020
CF	Not Applicable	No SAR Due	04/27/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/27/2020	04/27/2020 11:40:44 AM	215613
Reviewed- Ready to Run EDBC	04/27/2020	04/27/2020 11:40:44 AM	215613
Received	04/27/2020	04/27/2020 11:40:44 AM	215613
Sent	04/27/2020	04/27/2020 11:40:44 AM	215613
Generated	04/27/2020	04/27/2020 11:06:47 AM	970208

web.calsaws.net/c-iv/utilities/Journal/search?Y3R4Q2FzZUIk=ODE0NDY3NzQ5f&Y3R4Q2FzZU51bWJlcm90M0Nw==l&Y3R4Q2FzZU5hbWU=R0FCUKlFTEEGW

Journal Search

Help

Case Number: B0XGC47
 Resource ID:
 Category: All
 Type: All
 Initiated By: All
 Keyword:
 Date From: 10/01/2019
 To: 04/27/2020

Results per Page: 25 Search

Search Results Summary Results 1 - 25 of 55

1 2 3 Next

Case - B0XGC47 - GABRIELA ZAPATA

Date	Type	Description
04/27/2020	Document	SAR 7 - Semi-Annual Eligibility Status Report

Journal Detail

Help

*- Indicates required fields

<< Print

Case Number: B0XGC47 Case Name: GABRIELA ZAPATA

Entry Information

Journal Category: * All Journal Type: * Document
 Initiated By: System Method of Contact:
 Short Description: * SAR 7 - Semi-Annual Eligibility Status Report
 Long Description: Per direction provided in ACWDL dated March 27, 2020, the periodic report has been marked as 'Complete' due to COVID-19.

<< Print

(04/27/2020 11:42 AM, LRS System, null)

This Type 1 page took 0.81 seconds to load.

LRS Los Angeles PROD Case Number: LOEB086

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Distributed Documents Search

*- Indicates required fields

Refine Your Search

Search Results Summary Results 1 - 21 of 21

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/27/2020 11:09 AM	Eligibility Status Report (ENG)	SAR 7	RCA	Print Central Cancelled		Details

Reporting

Customer Reporting Detail

* - Indicates required fields

Close

Case Number:

on Search

Customer Reporting

Report Type: SAR 7 **Submit Month:** 05/2020 **Date Received:** 04/27/2020

Personal Contact:
No

Status			
Program	Status	Status Detail	Date
CW/RCA	Complete- EDBC Accepted		04/27/2020
CF	Complete- EDBC Accepted		04/27/2020

CalWORKs Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/27/2020	04/27/2020 11:41:21 AM	215613
Reviewed- Ready to Run EDBC	04/27/2020	04/27/2020 11:41:21 AM	215613
Received	04/27/2020	04/27/2020 11:41:21 AM	215613
Sent	04/27/2020	04/27/2020 11:41:21 AM	215613
Generated	04/27/2020	04/27/2020 11:09:47 AM	970258

web.calsaws.net/c-iv/utilities/Journal/search?Y3R4Q2FzZUlk=ODIzMzU5NzA4x&Y3R4Q2FzZU51bWJlcm9udD9jA4Ng==y&Y3R4Q2FzZU5hbWU=UkFOSSBSQVpPVUs=i8

Journal Search

Journal Detail

Case Number: LOEB086 **Resource ID:**

Category: All **Type:** All

Initiated By: All **Keyword:**

Date From: 10/01/2019 **To:** 04/27/2020

Search

* - Indicates required fields

<<

Print

Case Number: LOEB086 **Case Name:** RANI RAZOUK

Entry Information

Journal Category: * All **Journal Type:** * Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description:
Per direction provided in ACWDL dated March 27, 2020, the periodic report has been marked as 'Complete' due to COVID-19.

<<

Print

(04/27/2020 11:42 AM, LRS System, null)

This Type_1 page took 0.91 seconds to load.

Results per Page: 25 Search

Search Results Summary Results 1 - 25 of 29

1 2 Next

Case - LOEB086 - RANI RAZOUK

Date	Type	Description
04/27/2020	Document	SAR 7 - Semi-Annual Eligibility Status Report

CW:

LRS Los Angeles PROD Case Number: B1JQY60

Journal Help Resources Page Mapping Images EDCS Images Log Out

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

*- Indicates required fields

▶ Refine Your Search

Search Results Summary Results 1 - 17 of 17

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/27/2020 10:38 AM	Eligibility Status Report (ENG)	SAR 7	CalWORKs	Print Central Cancelled		Details

LRS Los Angeles PROD Case Number: B1JQY60

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Customer Reporting Detail

*- Indicates required fields Close

Report Type: SAR 7 Submit Month: 05/2020 Date Received: 04/27/2020

Personal Contact: No

Program	Status	Status Detail	Date
CW	Complete-	EDBC Accepted	04/27/2020
CF	Complete-	EDBC Accepted	04/27/2020

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/27/2020	04/27/2020 11:41:22 AM	215613
Reviewed- Ready to Run EDBC	04/27/2020	04/27/2020 11:41:22 AM	215613
Received	04/27/2020	04/27/2020 11:41:22 AM	215613
Sent	04/27/2020	04/27/2020 11:41:22 AM	215613
Generated	04/27/2020	04/27/2020 10:38:36 AM	970208

Journal Search



Case Number: B1JQY60

Resource ID:

Category: All

Type: All

Initiated By: All

Keyword:

Date From: 10/01/2019

To: 04/27/2020

Search

Results per Page: 25 Search

Search Results Summary Results 1 - 25 of 68

1 2 3 Next

Case - B1JQY60 - RACHEL RIVAS

Date	Type	Description
04/27/2020	Document	SAR 7 - Semi-Annual Eligibility Status Report COVID-19 CW/WTW G

Journal Detail



*- Indicates required fields

<< Print

Case Number: B1JQY60 **Case Name:** RACHEL RIVAS

Entry Information

Journal Category: * All **Journal Type: *** Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description: Per direction provided in ACWDL dated March 27, 2020, the periodic report has been marked as 'Complete' due to COVID-19.

<< Print

(04/27/2020 11:42 AM, LRS System, null)

This Type 1 page took 0.82 seconds to load.

LRS
Case Number: B23BR92

Los Angeles PROD
Journal Help Resources Page Mapping Images DCFS Images Log Out

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports
Client Corresp. Admin Tools

Distributed Documents

Distributed Documents Search Enclosure

Distributed Documents Search

*- Indicates required fields

▶ Refine Your Search

Search Results Summary
Results 1 - 6 of 6

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/27/2020 11:13 AM	Eligibility Status Report (ENG)	SAR 7	CalWORKs	Print Central Cancelled		Details

Case Number: B23BR92

LRS
Los Angeles
PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client. Corresp. Admin Tools

Customer Reporting Detail

*- Indicates required fields Close

Case Number: Go

Person Search

Customer Reporting

Report Type: SAR 7 **Submit Month:** 05/2020 **Date Received:** 04/27/2020

Personal Contact:
No

Status			
Program	Status	Status Detail	Date
CW	Complete-	EDBC Accepted	04/27/2020
CF	Complete-	EDBC Accepted	04/27/2020

CalWORKs Status History			
Status	Status Date	Action Date	Updated By
Complete- EDDB Accepted	04/27/2020	04/27/2020 11:40:49 AM	215613
Reviewed- Ready to Run EDBC	04/27/2020	04/27/2020 11:40:49 AM	215613
Received	04/27/2020	04/27/2020 11:40:49 AM	215613
Sent	04/27/2020	04/27/2020 11:40:49 AM	215613
Generated	04/27/2020	04/27/2020 11:13:47 AM	582543

web.calsaws.net/c-iv/utilities/Journal/search?Y3R4Q2FzZUlk=ODE1MjkzMDk1m&Y3R4Q2FzZU51bWJlcmg=QjlzQlI5Mg==r&Y3R4Q2FzZU5hbWU=Sk9ITk5ZIENFU

Journal Search

Case Number: B23BR92 Resource ID:

Category: All Type: All

Initiated By: All Keyword:

Date From: 10/01/2019 To: 04/27/2020

Results per Page: 25 Search

Journal Detail

Case Number: B23BR92 Case Name: JOHNNY CERVERA

Entry Information

Journal Category: * All **Journal Type:** * Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description:
Per direction provided in ACWDL dated March 27, 2020, the periodic report has been marked as 'Complete' due to COVID-19.

(04/27/2020 11:41 AM, LRS System, null)

Date	Type	Description
04/27/2020	Document	SAR 7 - Semi-Annual Eligibility Status Re

FS:

Journal Help Resources Page Mapping Images DCS Images Log Out

LRS Los Angeles PROD Case Number: SF688AB

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

*- Indicates required fields

▶ Refine Your Search

Search Results Summary Results 1 - 12 of 12

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/27/2020 11:13 AM	Eligibility Status Report (ENG)	SAR 7	CalFresh	Print Central Cancelled		Details

Journal Help Resources Page Mapping Images DCS Images Log Out

LRS Los Angeles PROD Case Number: SF688AB

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Customer Reporting Detail

*- Indicates required fields Close

Case Number:

Person Search

Customer Reporting

Report Type: SAR 7 **Submit Month:** 05/2020 **Date Received:** 04/27/2020

Personal Contact:
No

Status	Program	Status	Status Detail	Date
	CF	Complete-	EDBC Accepted	04/27/2020

Status	Status Date	Action Date	Updated By
Complete- EDDB Accepted	04/27/2020	04/27/2020 11:41:14 AM	215613
Reviewed- Ready to Run EDDB	04/27/2020	04/27/2020 11:41:14 AM	215613
Received	04/27/2020	04/27/2020 11:41:14 AM	215613
Sent	04/27/2020	04/27/2020 11:41:14 AM	215613
Generated	04/27/2020	04/27/2020 11:13:27 AM	582543

Journal Search

Case Number: SF688AB

Resource ID:

Category: All

Type: All

Initiated By: All

Keyword:

Date From: 10/01/2019

To: 04/27/2020

Results per Page: 25 Search

Search Results Summary Results 1 - 25 of 27

1 2 Next

Case - SF688AB - CYNTHIA E HOFF

Date	Type	Description
04/27/2020	Document	SAR 7 - Semi-Annual Eligibility Status Report

Journal Detail

*- Indicates required fields

<< Print

Case Number: SF688AB **Case Name:** CYNTHIA E HOFF

Entry Information

Journal Category: * All **Journal Type:** * Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description: Per direction provided in ACWDL dated March 27, 2020, the periodic report has been marked as 'Complete' due to COVID-19.

<< Print

(04/27/2020 11:41 AM, LRS System, null)

This Type 1 page took 0.69 seconds to load.

LRS Los Angeles PROD Case Number: B0XBM96

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

*- Indicates required fields

Refine Your Search

Search Results Summary Results 1 - 5 of 5

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/27/2020 11:13 AM	Eligibility Status Report (ENG)	SAR 7	CalFresh	Print Central Cancelled		Details

Case Number: BOXBM96

LRS
Los Angeles
PROD

Case Info **Eligibility** Empl. Services Child Care Resource Databank Fiscal Special Units Reports Client Corresp. Admin Tools

Reporting

Case Number: **Go**

Person Search

Customer Reporting

Customer Reporting Detail

* - Indicates required fields **Close**

Report Type: SAR 7 **Submit Month:** 05/2020 **Date Received:** 04/27/2020

Personal Contact:
No

Status			
Program	Status	Status Detail	Date
CF	Complete-	EDBC Accepted	04/27/2020

CalFresh Status History

Status	Status Date	Action Date	Updated By
Complete- EDBC Accepted	04/27/2020	04/27/2020 11:40:33 AM	215613
Reviewed- Ready to Run EDBC	04/27/2020	04/27/2020 11:40:33 AM	215613
Received	04/27/2020	04/27/2020 11:40:33 AM	215613
Sent	04/27/2020	04/27/2020 11:40:33 AM	215613
Generated	04/27/2020	04/27/2020 11:13:21 AM	582503

web.calsaws.net/c-iv/utilities/Journal/search?Y3R4Q2FzZUlk=ODE1MjcxMjJka&Y3R4Q2FzZU51bWJlcg=QjBYQk05Ng==c&Y3R4Q2FzZU5hbWU=SVJWSU4gQ0FSVEVS

Journal Search **Journal Detail**

Case Number: Resource ID:

Category: Type:

Initiated By: Keyword:

Date From: To:

Results per Page: **Search**

Search Results Summary Results 1 - 15 of 15

Case - BOXBM96 - IRVIN CARTER

Date	Type	Description
04/27/2020	Document	SAR 7 - Semi-Annual Eligibility Status Report
04/14/2020	Document	Error Prone Flag Addition - Error Prone - Rent

* - Indicates required fields **<<** **Print**

Case Number: BOXBM96 **Case Name:** IRVIN CARTER

Entry Information

Journal Category: * All **Journal Type:** * Document

Initiated By: System **Method of Contact:**

Short Description: * SAR 7 - Semi-Annual Eligibility Status Report

Long Description:
Per direction provided in ACWDL dated March 27, 2020, the periodic report has been marked as 'Complete' due to COVID-19.

<< **Print**

(04/27/2020 11:42 AM, LRS System, null)

This Type_1 page took 0.77 seconds to load.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214803 | CIV-106851

Generate the CF377.1 for cases that were renewed due to COVID-19

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Jamie Ng
	Reviewed By	Tiffany Huckaby

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
4/03/2020	1.0	Initial Version	Jamie Ng

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1 OVERVIEW

This SCR provides the changes necessary to generate CF 377.1 CalFresh Approval Notice for cases that were renewed due to COVID-19.

1.1 Current Design

In LRS/CalSAWS, the CF 377.1 NOA generates from EDBC when the CalFresh program is recertified. In C-IV a generic Approval NOA is generated.

**YOUR APPLICATION FOR CALFRESH BENEFITS
HAS BEEN APPROVED.**

**Your initial amount of benefits is: \$131.00 for 03/2020.
Your benefit amount for the rest of your certification
period will be \$194.00 from 04/01/2020 through
02/28/2021.**

Figure 1.1 – CF 377.1 NOA

CF 377.1 Form is currently in LRS/CalSAWS template repository and no fields is populated.

Questions? Ask Your Worker.

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

YOUR APPLICATION FOR CALFRESH BENEFITS HAS BEEN APPROVED.

Your initial amount of benefits is: \$ _____ for _____ . Your benefit amount for the rest of your certification period will be \$ _____ from _____ through _____ .

IF YOU ALSO APPLIED FOR CASH AID, and it has not yet been approved, your CalFresh benefits may be lowered or stopped without another notice if your cash aid is approved.

- Your CalFresh eligibility starts the same day as your cash aid.
- Your first month's benefits include more than one month's benefits because of the date your application was approved.
- Your first month's benefits were prorated from the date you filed your application.

BECAUSE YOU RECEIVED CALFRESH BENEFITS RIGHT AWAY, we did not require you to give us the following verification:

You must give us this verification before _____ or your CalFresh eligibility will stop. You will not get another notice. If the verification you send changes your eligibility or benefits, we will make the change. You will not get an advance notice before we take this action.

Your CalFresh household may be eligible to a State Utility Assistance Subsidy (SUAS) payment. If eligible, the county will award you a \$20.01 SUAS cash payment. This is a one-time per year payment and if eligible it will be put into your cash EBT account. If you do not have a cash EBT account, one will be set up for you on your CalFresh EBT card. You will not have to do anything to get a new card, but you can use it to cover expenses not otherwise covered by CalFresh. This payment allows the county to use the highest utility deduction (Standard Utility Allowance - SUA) for food benefits. You may use this \$20.01 when you use your EBT card. If you want to know more, please contact your local county office.

Rules: These rules apply: _____
You may review them at your welfare office.

CF 377.1 (8/15) REQUIRED FORM-SUBSTITUTE PERMITTED

Figure 1.2 – CF 377.1 Form

1.2 Requests

Per Exec Order and HR 6201, the redetermination requirement is waived for the March - May 2020 due months. A new 6-month redetermination must be established.

CalFresh cases are being auto-recertified. The new extended RE will not be run through EDBC. These cases will require a CF 377.1.

1.3 Overview of Recommendations

- 1.) LRS/CalSAWS only: Update the existing CF 377.1 form in Template Repository to populate with the new RE period in a one-time batch.
- 2.) C-IV only: Add the CF 377.1 form to Template Repository and populate with the new RE period in a one-time batch.
- 3.) Generate this Form via DCR for the cases that were given new RE periods due to COVID-19.

1.4 Assumptions

1. Existing functionality of generating CF 377.1 NOA in LRS/CalSAWS will not be changed.
2. Existing functionality of generating Approval NOA in C-IV will not be changed.

2 RECOMMENDATIONS

2.1 Correspondence: Add the CF 377.1 form in C-IV

2.1.1 Overview

Add CF 377.1 (CalFresh approval) to C-IV Template Repository and populate in a DCR for cases that were renewed due to COVID-19 .

State Form: CF 377.1 (CalFresh approval) (9/15)

Programs: CF

Attached Forms: NA Back 9 (4/2013)

Forms Category- C-IV: NOA

Languages: English and Spanish

Commented [SH1]: Current C-IV NA Back 9 version is 4/2013

2.1.2 Description of Change

This effort will create CF 377.1 (CalFresh approval) (9/15) and add to the Template Repository.

2.1.2.1 CF 377.1 (CalFresh approval) XDP

Create a XDP for CF 377.1 NOA (CalFresh approval).

Form Header: Standard CF Header

Form Title: Notice of Approval for CalFresh Benefits

Form Number: CF 377.1 (9/15)

Form Mockups/Examples: See Supporting Documents #1 & 2

Commented [SH2]: This does not need to be in all-caps, can this be updated to normal formatting?

2.1.2.2 Add Form Variable Population for CF 377.1

CF 377.1 (9/15) will populate the following fields when generated via One-time batch. Header will be populated with standard system CF Header.

Form Body Variables:

© 2019 CalSAWS. All Rights Reserved.

**NOTICE OF APPROVAL
FOR CALFRESH BENEFITS**

COUNTY OF _____ OFFICE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Public Title _____
Case Name _____
Mailing Address _____
City _____
State _____
Zip _____
Telephone Number _____
Address _____

(ADDRESS)

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

<1> YOUR APPLICATION FOR CALFRESH BENEFITS HAS BEEN APPROVED.

Your initial amount of benefits is: \$ <2> for <3>. Your benefit amount for the rest of your certification period will be \$ <4> from <5> through <6>.

IF YOU ALSO APPLIED FOR CASH AID, and it has not yet been approved, your CalFresh benefits may be lowered or stopped without another notice if your cash aid is approved.

- <7> Your CalFresh eligibility starts the same day as your cash aid.
- <8> Your first month's benefits include more than one month's benefits because of the date your application was approved.
- <9> Your first month's benefits were prorated from the date you filed your application.

<10> BECAUSE YOU RECEIVED CALFRESH BENEFITS RIGHT AWAY, we did not require you to give us the following verification:

<11>

You must give us this verification before <12> or your CalFresh eligibility will stop. You will not get another notice. If the verification you send changes your eligibility or benefits, we will make the change. You will not get an advance notice before we take this action.

<13>

Your CalFresh household may be eligible to a State Utility Assistance Subsidy (SUAS) payment. If eligible, the county will award you a \$20.01 SUAS cash payment. This is a one-time per year payment and if eligible it will be put into your cash EBT account. If you do not have a cash EBT account, one will be set up for you on your CalFresh EBT card. You will not have to do anything to get a new card, but you can use it to cover expenses not otherwise covered by CalFresh. This payment allows the county to use the highest utility deduction (Standard Utility Allowance - SUA) for food benefits. You may use this \$20.01 when you use your EBT card. If you want to know more, please contact your local county office.

Rules: These rules apply. You may review them at your welfare office. <14>

CF 87.1 (8/15) REQUIRED FORM/SUBSTITUTE PERMITTED

Data Mapping	Variable Name	Population	Formatting	Template Repository Population	Populates with Form Generation
1	CF Application Approved Checkbox	<p>Editable when a blank form is generated.</p> <p>Checked when populated in DCR in Section 2.3</p>	Arial Font 10	No	<p>Yes</p> <p>Refer to Recommendation 2.3</p>
2	Initial Benefit Amount	<p>Editable when a blank form is generated.</p> <p>Authorized Amount on the latest Regular, Accepted Saved EDBC excluding disaster supplement that is effective for the month prior to the current RE begin month.</p> <p>(Ex: \$190.00)</p>	Arial Font 10	No	<p>Yes</p> <p>Refer to Recommendation 2.3</p>
3	Approval Month	<p>Editable when a blank form is generated.</p> <p>Use Month on the current Redetermination record Begin Date</p> <p>(Ex: MM/YYYY)</p>	Arial Font 10	No	<p>Yes</p> <p>Refer to Recommendation 2.3</p>
4	Full Month Allotment	<p>Editable when a blank form is generated.</p> <p>Full Month Allotment amount on the latest Regular, Accepted Saved EDBC excluding disaster supplement that is effective for the month prior to the current RE begin month.</p>	Arial Font 10	No	<p>Yes</p> <p>Refer to Recommendation 2.3</p>

Commented [SH3]: Can we specify the actual population? Is it going to be checked when it is pre-populated through batch?

Commented [SH4]: Can we include the month formatting? (ex. MM/YYYY)

Commented [SH5]: Again formatting (ex. \$190.00)

		(Ex: \$190.00)			
5	Certification Begin Date	Editable when a blank form is generated. The current Redetermination record Begin Date (Ex: MM/YYYY)	Arial Font 10	No	Yes Refer to Recommendation 2.3
6	Certification End Date	Editable when a blank form is generated. The current Redetermination record Due Date (Ex: MM/YYYY)	Arial Font 10	No	Yes Refer to Recommendation 2.3
7	CF Starts with Cash Aid Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
8	Extra Initial Benefit Checkbox	Editable when a blank form is generated. Not populated when generated via DCR..	Arial Font 10	No	No
9	Prorated Initial Benefit Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
10	Received CF Benefits Right Away Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
11	Following Verifications	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
12	Verifications Due Date	Editable when a blank form is generated.	Arial Font 10	No	No

Commented [SH6]: date format

Commented [SH7R6]: applies to the rest of the prepopulated values

Commented [SH8R6]: applies to the rest of the prepopulated values

		Not populated when generated via DCR.			
13	No Advance Notice	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
14	Regulations	Editable when a blank form is generated. Populated with Regulations "63-300, 63-503"	Arial Font 10	No	Yes

2.1.2.3 Add Form Control

The CF 377.1 Form does not need to be returned.

Due Date: None

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

2.1.2.4 Add CF 377.1 (9/15) NOA to Template Repository

Add the CF 377.1 (9/15) to Template Repository with the following Document Parameters:

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

2.1.2.5 Add CF 377.1 (9/15) Form Print Options and Mailing Requirements

The following Print options will be included for the CF 377.1 (9/15) Form.

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

Mailing Requirements:

Mail-To (Recipient): Primary Applicant of the CalFresh Program
 Mailed From (Return): CF Program Worker's Office address
 Outgoing Envelope Type: Standard

Additional Requirements:

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

Commented [SH9]: change to say "Post to C4Y"

2.1.2.6 Imaging Barcode Mapping in C-IV

The CF 377.1 CalFresh approval should be mapped to **Notification/NOA**

2.2 Correspondence: Update CF 377.1 Form in LRS/CalSAWS

2.2.1 Overview

Update CF 377.1 populations to be populated with the new RE period.

2.2.2 Description of Change

1. Update CF 377.1 populations when generated via **One-time batch**.

2.2.2.1 Add Form Variable Population for CF 377.1

CF 377.1 (9/15) will populate the following fields when generated via One-time DCR.

Form Body Variables:

**NOTICE OF APPROVAL
FOR CALFRESH BENEFITS**

COUNTY OF _____ OFFICE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Public Title _____
Case Name _____
Welfare Unit _____
Number _____
Telephone _____
Address _____

(ADDRESS)

Questions? Ask your Worker.

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

<1> YOUR APPLICATION FOR CALFRESH BENEFITS HAS BEEN APPROVED.

Your initial amount of benefits is: \$ <2> for <3>. Your benefit amount for the rest of your certification period will be \$ <4> from <5> through <6>.

IF YOU ALSO APPLIED FOR CASH AID, and it has not yet been approved, your CalFresh benefits may be lowered or stopped without another notice if your cash aid is approved.

- <7> Your CalFresh eligibility starts the same day as your cash aid.
- <8> Your first month's benefits include more than one month's benefits because of the date your application was approved.
- <9> Your first month's benefits were prorated from the date you filed your application.

<10> BECAUSE YOU RECEIVED CALFRESH BENEFITS RIGHT AWAY, we did not require you to give us the following verification:

<11>

You must give us this verification before <12> or your CalFresh eligibility will stop. You will not get another notice. If the verification you send changes your eligibility or benefits, we will make the change. You will not get an advance notice before we take this action.

<13>

Your CalFresh household may be eligible to a State Utility Assistance Subsidy (SUAS) payment. If eligible, the county will award you a \$20.01 SUAS cash payment. This is a one-time per year payment and if eligible it will be put into your cash EBT account. If you do not have a cash EBT account, one will be set up for you on your CalFresh EBT card. You will not have to do anything to get a new card, but you can use it to cover expenses not otherwise covered by CalFresh. This payment allows the county to use the highest utility deduction (Standard Utility Allowance - SUA) for food benefits. You may use this \$20.01 when you use your EBT card. If you want to know more, please contact your local county office.

Rules: These rules apply. You may review them at your welfare office. <14>

CF 07-1 (0/0) REQUIRED FORM/SUBSTITUTE PERMITTED

Data Mapping	Variable Name	Population	Formatting	Template Repository Population	Populates with Form Generation
1	CF Application Approved Checkbox	Editable when a blank form is generated.	Arial Font 10	No	Yes
2	Initial Benefit Amount	Editable when a blank form is generated. Authorized Amount on the latest Regular, Accepted Saved EDBC excluding disaster supplement that is effective for the month prior to the current RE begin month	Arial Font 10	No	Yes
3	Approval Month	Editable when a blank form is generated. Use Month on the current Redetermination record Begin Date	Arial Font 10	No	Yes
4	Full Month Allotment	Editable when a blank form is generated. Authorized Amount on the latest Regular, Accepted Saved EDBC excluding disaster supplement that is effective for the month prior to the current RE begin month	Arial Font 10	No	Yes
5	Certification Begin Date	Editable when a blank form is generated. The Current Redetermination record Begin Date	Arial Font 10	No	Yes

6	Certification End Date	Editable when a blank form is generated. The Current Redetermination record Due Date	Arial Font 10	No	Yes
7	CF Starts with Cash Aid Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
8	Extra Initial Benefit Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
9	Prorated Initial Benefit Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
10	Received CF Benefits Right Away Checkbox	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
11	Following Verifications	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
12	Verifications Due Date	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
13	No Advance Notice	Editable when a blank form is generated. Not populated when generated via DCR.	Arial Font 10	No	No
14	Regulations	Editable when a blank form is generated.	Arial Font 10	No	Yes

		Populated with Regulations "63-300, 63-503"			
--	--	---	--	--	--

2.3 Correspondence: Create DCR to populate CF 377.1 (9/15) – LRS/CalSAWS & C-IV

2.3.1 Overview

Create a one-time mass mailing to populate CF 377.1 (9/15) in LRS/CalSAWS & C-IV for cases that were renewed due to COVID-19.

2.3.2 Description of Change

This effort will create DCR to populate CF 377.1 (9/15) in LRS/CalSAWS & C-IV for cases that were renewed due to COVID-19.

New DCR will generate and populate CF 377.1 (9/15) in LRS/CalSAWS and CIV when these conditions are met:

1. Program is 'CalFresh'
2. Case was updated via Batch with one-time data change (new 6-month redetermination period) done in SCR CA-214635/ CIV-106787. Below are the conditions the for cases changed:
 - a. The CF program had a previous Redetermination Due Date from 3/31/2020 to 5/31/2020
 - b. The program is not Transitional CalFresh
 - c. The current Redetermination record was created by 'Batch'
 - d. The program status is Active or Ineligible

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CF 377.1 Mockup English	CF377.1_EN.pdf
2	Correspondence	CF 377.1 Mockup Spanish	CF377.1_SP.pdf
3			

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.1 CAR-1237	<p>The LRS shall automatically generate the following correspondence online or in the batch process, as a result of individual and/or case action initiated by the LRS or by COUNTY-specified Users, except when exempt due to program requirements:</p> <ul style="list-style-type: none"> a. Adverse notices (includes: decrease, collection, denial, or termination of benefits); b. Non-adverse notices (includes: approval, increase in benefits, no change, and rescission); and c. Non-approval notices (includes: cancellation, withdrawal, informational, and benefit issuance). 	Generate CF 377.1 CalFresh Approval Notice for the cases that were renewed due to COVID-19.

4.2 Migration Requirements

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

5 MIGRATION IMPACTS

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

6 APPENDIX

LRS Los Angeles PROD Case Number: B0Z9N48

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

* - Indicates required fields

▶ Refine Your Search

Search Results Summary Results 1 - 1 of 1

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/03/2020 10:18 PM	CalFresh Notice of Expiration of Certification (SPA)	CF 377.2	CalFresh	Printed Centrally		Details

LRS Los Angeles PROD Case Number: B077357

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

* - Indicates required fields

▶ Refine Your Search

Search Results Summary Results 1 - 8 of 8

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/03/2020 10:18 PM	CalFresh Notice of Expiration of Certification (ENG)	CF 377.2	CalFresh	Printed Centrally		Details

LRS Los Angeles PROD Case Number: B222492

Case Info Eligibility Empl. Services Child Care Resource Databank Fiscal Special Units Reports **Client Corresp.** Admin Tools

Distributed Documents Search

* - Indicates required fields

▶ Refine Your Search

Search Results Summary Results 1 - 14 of 14

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/03/2020 10:06 PM	CalFresh Notice of Expiration of Certification (ENG)	CF 377.2	CalFresh	Hold For Pickup		Details

Distributed Documents

Distributed Documents Search

Enclosure

Distributed Documents Search

*- Indicates required fields

▶ Refine Your Search

Search Results Summary
Results 1 - 3 of 3

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/03/2020 10:22 PM	CalFresh Notice of Expiration of Certification (ENG)	CF 377.2	CalFresh	Printed Centrally		Details

Distributed Documents

Distributed Documents Search

Enclosure

Distributed Documents Search

*- Indicates required fields

▶ Refine Your Search

Search Results Summary
Results 1 - 11 of 11

Date	Document Name	Number	Program	Status	Viewed Via Self-Service Portal	Details
04/03/2020 10:22 PM	CalFresh Notice of Expiration of Certification (ENG)	CF 377.2	CalFresh	Hold For Pickup		Details

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215592 | CIV- 107009

Update EID values in the forms

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nithya Chereddy
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
4/17/2020	1.0	Initial Draft of the artifact	

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1 OVERVIEW

Applicable Earned Income Disregard (EID) for benefit months on or before 5/2020 is \$225 and applicable EID for benefit months on or after 6/2020 is \$500. As the current EID values are populated based on the form generation date, there is a discrepancy if the form generation month and the latest EDBC are not in the same month.

Note: Supporting document 1 has the screenshot of the scenario with issue.

1.1 Current Design

SCRs CA-209033 C-IV 104383 made updates to the forms to dynamically update the text on the form to display the Earned Income Disregard (EID) value with either \$225 or \$500 based on the form generation date.

1.2 Requests

Update the EID values within the form text to display \$225 or \$500 based on the EDBC begin date instead of the form generation date.

1.3 Overview of Recommendations

Update the forms NA 301 CIV, NA 303 CIV in C-IV and NA 274G, NA 840 in LRS, to update the text within the forms to populate EID values based on the EDBC begin date instead of the form generation date.

1.4 Assumptions

1. NA 274G will be used for overpayments occurring on or after 6/1/2020 until NA 274H is implemented in the system.

2 RECOMMENDATIONS

2.1 Correspondence: Update the EID population


2.1.1 Overview

Applicable Earned Income Disregard (EID) for benefit months on or before 5/2020 is \$225 and applicable EID for benefit months on or after 6/2020 is \$500. As the current EID values are populated based on the form generation date, there is a discrepancy if the form generation month and the latest EDBC are not in the same month.

2.1.2 Description of Changes

1. Update the logic of populating the EID values within the form text to populate the EID value based on the oldest EDBC begin date associated to the recovery account for which the form is being generated for.
Forms to update in C-IV: NA 301 CIV, NA 303 CIV
Form to update in LRS: NA 274G
Technical Note: CT335_53 has 2 records concerning to EID values. The EID value of \$225 is valid from high dated begin date to 5/31/2020 and the EID value of \$500 is valid from 6/1/2020 to high dated end date.
Example scenario: If the oldest EDBC is on or before 5/31/2020, EID value on the form should be \$225, if the oldest EDBC is on or after 6/1/2020, EID value should be \$500.
2. Update the logic of populating the EID values within the NA 840 form text to populate the EID value based on the latest EDBC begin date.
Note: If the latest EDBC is on or before 5/31/2020, EID value on the form should be \$225, if the latest EDBC is on or after 6/1/2020, EID value should be \$500.
3. Populate the EID value based on the form generation date for NA 301, NA 303 or NA 274G if an EDBC associated to the recovery account does not exist.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	Screenshot of the scenario with issue	 Overpayment form issue.pdf

4 REQUIREMENTS

The following requirements will be resolved in order to resolve and achieve the desired outcome

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.1.2	The LRS shall include an automated method for implementing mass updates triggered by policy changes or mass participant financial changes, including Social Security or Veterans benefits cost of living adjustments (COLAs)	EID will be updated from \$225 to \$500

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-216480

Migrate CMSP 100 – Blank CMSP Notice of
Action Form (04/15)

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
07/09/2020	1.0	Original	Pramukh Karla
07/22/2020	2.0	Reference to DDID 1043 has been removed	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to add the CMSP 100 (04/15) to the LRS/CalSAWS and make this form available for all 58 counties.

1.1 Current Design

CMSP 100 does not exist in LRS/CalSAWS.

1.2 Requests

Add the CMSP 100 (04/15) version of the form to the LRS/CalSAWS.

1.3 Overview of Recommendations

1. Add CMSP 100 form to LRS/CalSAWS Template Repository for all 58 counties

1.4 Assumptions

1. CMSP 100 will have the LRS/CalSAWS Standard Header.
2. CMSP 100 will only populate case and worker information on the LRS/CalSAWS Standard Header.

2 RECOMMENDATIONS

2.1 Add CMSP 100 (04/15) – Blank CMSP Notice of Action Form to Template Repository

2.1.1 Overview

This section will cover the updates needed to add CMSP 100 Form to LRS/CalSAWS.

State Form: CMSP 100

Programs: Medi-Cal/MSP/CMSP

Attached Forms: N/A

Forms Category: Form

Languages: English, Spanish

2.1.2 Description of Change

Create a new CMSP 100 – Blank CMSP Notice of Action form that can be generated from the Template Repository.

1. Create CMSP 100 Form XDP with 2 impressions. First impression will be CMSP 100 form and the second impression will be CMSP NA Back 9 form.

Form Header: LRS/CalSAWS State Standard Header

Form Title: Blank CMSP Notice of Action Form

Form Number: CMSP 100

Include NA Back 9: Yes (CMSP NA Back 9)

Form Mockup/Example: See Supporting Document #1

2. Add the CMSP 100 – Blank CMSP Notice of Action Form to Template Repository. The following parameters will be required:

Required Form Input: Case Number, Customer Name, Program, and Language.

CMSP 100 form will be blank when generated from the template repository. LRS/CalSAWS Standard Header will be populated with worker and case information.

3. Add the following barcode options to the CMSP 100 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

4. Add the following print options to the CMSP 100 Form:

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

Mailing Requirements:

Mail-To (Recipient): Applicant of the Program selected on the Document parameter page.

Mailed From (Return): Worker's Office Address

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: N/A

Additional Requirements:

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

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CMSP 100	CMSP100_EN.pdf CMSP100_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-216887

Enable GROW Orientation job and update GROW Orientation notices to reflect telephonic calls due to COVID-19

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Phong Xiong
	Reviewed By	Jamie Ng

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/16/2020	1.0	Original Draft	Phong Xiong
07/08/2020	1.1	Updates to reflect new options	Phong Xiong

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
		presented by GR Program	

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1 OVERVIEW

This SCR is to enable GROW orientation appointment job and modify the GROW Orientation Appointment notice/form language to change the location from a physical district office address to a telephonic call and/or online video due to the delay in opening of the district offices due to COVID.

1.1 Current Design

Currently in CalSAWS due to COVID-19, GROW Orientation daily job for GR cases is disabled from the scheduler. Also, the GROW Orientation letter verbiage is reflecting a physical district office location.

1.2 Requests

As per the direction from LA County, the disabled GROW Orientation Appointments job for GR cases should be enabled. Also, update the Orientation letter to reflect the verbiage related to the virtual/telephonic appointment details.

Modify Orientation Appointment Notice to change the location from a physical district office address to a telephonic call/online video, contact person due to the delay in opening of the district offices due to COVID.

1.3 Overview of Recommendations

1. Enable the daily GROW Orientation job PB19C910 for GR cases.
2. Revised/create text and templates for the NOAs below:
 - a. ABP 1461 - General Relief Opportunities for Work Orientation Appointment Notice

2 RECOMMENDATIONS

Enable GROW Orientation Appointments job.

Revised/create text and templates for the NOAs below:

ABP 1461 - General Relief Opportunities for Work Orientation Appointment Notice

2.1 Enable GROW Orientation Daily Job

2.1.1 Overview

Daily GROW orientation job will be enabled due to COVID-19.

2.1.2 Description of Change

Update the scheduler to enable the daily GROW Orientation job for GR cases.

Job Id - PB19C910

Frequency - Daily

Description - GROW Orientation Activity schedule job

This batch sweep will create GROW Orientation Appointments/Activity for eligible GR persons.

2.2 ABP 1461 - General Relief Opportunities for Work Orientation Appointment Notice

2.2.1 Overview

ABP 1461 (2/2014) - General Relief Opportunities for Work Orientation Appointment Notice is used to inform new participants of their orientation appointment.

State Form/NOA: ABP 1461 (02/2014)

Program(s): General Relief Opportunities for Work (GROW)

Current Attached Forms: N/A

Current Forms Category: Form

Current Language:

English and Spanish

2.2.2 Description of Change

Update ABP 1461 (02/2014) with modified verbiage.

Note: Revision date will be updated to (06/2020) during build.

2.2.2.1 Update ABP 1461 - General Relief Opportunities for Work Orientation Appointment Notice XDP

Update XDP with additional verbiage in English and Spanish.

Updated Languages:

English and Spanish

You have an Orientation appointment for the GROW Program. This appointment can be done by telephone or video online. If you decide to complete orientation by telephone, you must call on the date and time listed. If online, view the video on the website given below and call the number listed at the bottom of the page to report you completed orientation online. ¹

~~Plan to be in the office a half day for this appointment. Please do not bring children.~~ ²

		1 (866) 488-8482 ³ Or dps.lacounty.gov/en/jobs/grow.html FACILITY NAME/LOCATION
DATE	TIME	

- **If you cannot keep your appointment, call the number listed below to reschedule. You can only reschedule your appointment one time.**
- To reschedule, you must contact us no later than the date of your original appointment above.
- If you are able to work, you are required to complete Orientation and participate in the GROW Program to receive General Relief (GR) cash aid. ⁴
- If you are able to work, not completing your Orientation appointment without a good reason may result in denial of GR cash aid or your GR cash aid may stop and you may be sanctioned. ⁵

GROW Program and provide guidance during GROW participation.

DO NOT MISS THIS OPPORTUNITY ⁶ ⁷

For GROW Orientation questions:	Phone Number:

DO NOT COME TO THE OFFICE FOR ORIENTATION ⁸

NOA Mockups/Examples: See Supporting Documents #2

Number	Existing Text	Updated Text
1	You have an Orientation appointment for the GROW Program. Please report to the	You have an Orientation appointment for the GROW Program. This appointment can be

	GROW Site listed below on the date and time shown.	done by telephone or video online. If you decide to complete orientation by telephone, you must call on the date and time listed. If online, view the video on the website given below and call the number listed at the bottom of the page to report you completed orientation online.
2	Plan to be in the office a half day for this appointment. Please do not bring children.	Removed
3	(Location Variable)	1 (866) 488-8482 Or dpss.lacounty.gov/en/jobs/grow.html
4	<ul style="list-style-type: none"> If you are able to work, you are required to attend Orientation and participate in the GROW Program to receive General Relief (GR) cash aid. 	<ul style="list-style-type: none"> If you are able to work, you are required to complete Orientation and participate in the GROW Program to receive General Relief (GR) cash aid.
5	<ul style="list-style-type: none"> If you are able to work, not attending your Orientation appointment without a good reason may result in denial of GR cash aid or your GR cash aid may stop and you may be sanctioned. 	<ul style="list-style-type: none"> If you are able to work, not completing your Orientation appointment without a good reason may result in denial of GR cash aid or your GR cash aid may stop and you may be sanctioned.
6	For GROW questions:	For GROW Orientation questions:
7	Top Row from bottom table -Orientation Facilitator: -Contact Number to Reschedule Orientation:	Removed
8	BRING THIS NOTICE TO YOUR APPOINTMENT	DO NOT COME TO THE OFFICE FOR ORIENTATION

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Form	ABP1461 Mockup	ABP1461_EN_Mock_Up.pdf ABP1461_SP_Mock_Up.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.3 CAR-1239	<p>The LRS shall produce various notices, NOAs, forms, letters, stuffers, and flyers, including:</p> <ul style="list-style-type: none"> a. Appointment notices; b. Redetermination, Recertification, and/or Annual Agreement notices and forms; c. Other scheduling notices (e.g., quality control, GR hearings, and appeals); d. Periodic reporting notices; e. Contact letters; f. Notices informing the applicant, participant, caregiver, sponsor or authorized representative of a change in worker, telephone hours or Local Office Site; g. Information notices and stuffers; h. Case-specific verification/referral forms; i. GR Vendor notices; k. Court-mandated notices, including Balderas notices; l. SSIAP appointment notices; m. Withdrawal forms; n. COLA notices; o. Time limit notices; p. Transitioning of aid notices; q. Interface triggered forms and notices (e.g., IFDS, IEVS); r. Non-compliance and sanction notices; s. Benefit issuance and benefit recovery forms and notices, including reminder notices; t. Corrective NOAs on State Fair Hearing decisions; u. CSC paper ID cards with LRS-generated access information; and v. CSC PIN notices. 	Update ABP1461 with appropriate verbiage