Calsaws

California Statewide Automated Welfare System

Design Document

CA-207165 | DDID 2117 Updates to Manual EDBC for FC, AAP, KG

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
7/15/2020	1.0	Initial document	Yale Yee
9/28/2020	2.0	Updated Figure 2.3.1 based on Deliverable comments	Amy Gill
10/5/2020 3.0		Added details for ARC EDBC	Yale Yee
10/20/2020	4.0	Added Content Revision and updated mockups for PSP	Yale Yee

Table of Contents

1	Ove	erview		. 5
	1.1	Currei	nt Design	. 5
	1.2	əsts	. 5	
	1.3	Overv	iew of Recommendations	. 5
	1.4	Assum	nptions	. 5
2	Rec	comme	endations	. 6
	2.1	Foster	Care EDBC (Manual)	. 6
		2.1.1	Overview	. 6
		2.1.2	Foster Care EDBC (Manual) Mockup	. 6
		2.1.3	Description of Changes	. 7
		2.1.4	Page Location	. 9
		2.1.5	Security Updates	. 9
		2.1.6	Page Mapping	10
		2.1.7	Page Usage/Data Volume Impacts	10
	2.2	Poten	tial Benefit Detail page	10
		2.2.1	Overview	10
		2.2.2	Potential Benefit Detail Mockup	10
		2.2.3	Description of Changes	11
		2.2.4	Page Location	11
		2.2.5	Security Updates	11
		2.2.6	Page Mapping	11
		2.2.7	Page Usage/Data Volume Impacts	12
	2.3	Kin-G/	AP EDBC (Manual)	12
		2.3.1	Overview	12
		2.3.2	Kin-GAP EDBC (Manual) Mockup	12
		2.3.3	Description of Changes	12
		2.3.4	Page Location	14
		2.3.5	Security Updates	14
		2.3.6	Page Mapping	14
		2.3.7	Page Usage/Data Volume Impacts	14
	2.4	AAP E	DBC (Manual)	14
		2.4.1	Overview	14

	2.4.2	AAP EDBC (Manual) Mockup	14
	2.4.3	Description of Changes	15
	2.4.4	Page Location	16
	2.4.5	Security Updates	16
	2.4.6	Page Mapping	16
	2.4.7	Page Usage/Data Volume Impacts	16
3	Requireme	ents	17
	3.1 Migra	tion Requirements	17

1 OVERVIEW

Manual EDBCs are an alternate procedure that allow the user an option to determine benefits manually. For this DDID, Manual EDBCs for Foster Care (FC), Kin-GAP (KG), and Adoption Assistance Program (AAP) will be updated to address the changes made with DDID 2191 - Consolidation of Foster Care Payments (CA-207140).

1.1 Current Design

Manual EDBCs for FC, AAP, and KG do not include the changes made with DDID 2191.

1.2 Requests

Manual EDBCs for FC, AAP and KG will include the changes made with DDID 2191 to consolidate issuances and distinguish fiscal expenditures. The following expenditures will be addressed:

- Placement Rate
- Special Care Increment
- Infant Supplement Payment
- Parenting Support Plan
- Infant Supplemental Rate Supplement
- Additional Payment
 - Kidstep Supplement
 - o County Authorized Allowance
- Educational Travel Reimbursement

1.3 Overview of Recommendations

1. Update Manual EDBC functionality for FC, AAP, and KG with additional fields based on the changes made with DDID 2191 (CA-207140).

1.4 Assumptions

- 1. No updates will be required for the FC/AAP/KG Claiming processing of Issuances or Issuance adjustments authorized by Manual EDBC.
- 2. In LRS/CalSAWS, Approved Relative Caretaker (ARC) benefits are issued through an ARC aid code on a FC EDBC.
- 3. CA-219462 will address implementing the Aid Code Information and Authorized Amount Per Rate Structure sections for a KG EDBC.

2 RECOMMENDATIONS

Manual EDBCs for FC, AAP, and KG are updated with additional fields based on the changes made with DDID 2191.

2.1 Foster Care EDBC (Manual)

2.1.1 Overview

The manual FC EDBC includes the changes made with DDID 2191 to consolidate issuances and distinguish fiscal expenditures.

2.1.2 Foster Care EDBC (Manual) Mockup

Aid Payment		
Rate Payment:	\$	0.00
Special Care Increment:	+	0.00
Infant Supplement Payment:	+	0.00
Parenting Support Plan:	+	0.00
Infant Supplemental Rate Supplement:	+	0.00
County Authorized Allowance:	+	0.00
Kidstep Supplement:	+	0.00
Educational Travel Reimbursement:	+	0.00
Unearned Income:	2	0.00
Earned Income:	-	0.00
Earned Income Disregard:	+	0.00
Potential Benefit:	\$	0.00
Previous Potential Benefit:	\$	0.00
Overpayment Adjustment Amount	\$	0.00
Authorized Amount	\$	0.00
Overpayment	\$	0.00
Figure 2.1.1 – Foster Care EDBC (Manual) Aid Payment Section		

Aid Payment		
Potential CalWORKs Benefit:	\$	0.00
Potential ARC Amount:	\$	0.00
Rate Payment:	\$	0.00
Special Care Increment:	+	0.00
Infant Supplement Payment:	+	0.00
Parenting Support Plan:	+	0.00
Infant Supplemental Rate Supplement:	+	0.00
County Authorized Allowance:	+	0.00
Kidstep Supplement:	+	0.00
Educational Travel Reimbursement:	+	0.00
Unearned Income:	-	0.00
Earned Income:	-	0.00
Earned Income Disregard:	+	0.00
Potential Benefit:	\$	0.00
Previous Potential Benefit:	\$	0.00
Overpayment Adjustment Amount	\$	<u>0.00</u>
Authorized Amount	\$	0.00
Overpayment	\$	0.00

Figure 2.2.1 – Foster Care EDBC (Manual) With ARC Aid Code

-	Authorized Amount Per Aid Code							
	Aid Code	Auth Amount	Number of Days	Rate Structure	Placement Type	Pay Code		
	5K	\$ <u>5,164.00</u>	31	Non-CCR	Nonrelative Extended Family Member Home	EC EA Ineligible Emergency Placement Prior to Home Approval		

Figure 2.3.1 – Foster Care EDBC (Manual) Authorized Amount Per Aid Code Section

2.1.3 Description of Changes

- 1. Add the following fields under the Aid Payment section of the Foster Care EDBC (Manual) page:
 - a. Rate Payment
 - b. Special Care Increment
 - c. Infant Supplement Payment
 - d. Parenting Support Plan
 - e. Infant Supplemental Rate Supplement
 - <mark>f. Additional Rate</mark>
 - i. Add a dropdown of Additional Rate Types:

- 1. The available options are the following: a. Blank
 - b. County Authorized Allowance
 - c. Kidstep Supplement

Note: Infant Supplement related options will not be added to the page dropdown.

 The values in the dropdown are in alphabetical order.

ii. Add a validation on the 'Add' button when clicked and a value is entered without a type selected. The validation states the following:

1. "Add – Please select an Additional Rate Type" iii. The line item is added with a new Add button.

 The Add button creates a new line item with the Additional Rate Type, value inputted and a Remove button.

a. The Remove button removes the line item.

i<mark>v. The user has the ability to add multiple Additional Rate</mark> line items.

- g. Educational Travel Reimbursement
- h. Unearned Income
- i. Earned Income
- j. Earned Income Disregard
- 2. Allow user input for these fields and set the default value to '0.00' on the page.
 - a. The Rate Payment field when an ARC aid code is selected will be defaulted to '0.00' and will not be editable.
- 3. Add the following validation for the fields when the Calculate and Accept buttons are clicked:
 - a. [Field Name] Please enter an amount in xx,xxx,xxx.xx format.
- 4. Use the existing logic, linked to the Calculate and Accept button based on updating the fields or calculating before Accepting EDBC, for the fields mentioned in 2.1.3.1.
- 5. Associate the following symbol to represent the action of the fields:
 - a. Potential CalWORKs Benefit (\$)
 - i. Applicable to ARC only.
 - b. Potential ARC Amount (\$)
 - i. Applicable to ARC only.
 - c. Rate Payment (\$)
 - d. Special Care Increment (+)
 - e. Infant Supplement Payment (+)
 - f. Parenting Support Plan (+)
 - g. Infant Supplemental Rate Supplement (+)
 - h. County Authorized Allowance (+)
 - i. Kidstep Supplement (+)
 - <mark>j. Additional Rate (+)</mark>
 - k. Educational Travel Reimbursement (+)

- I. Unearned Income (-)
- m. Earned Income (-)
- n. Earned Income Disregard (+)
- 6. Update the Calculate button to populate the Potential Benefit amount performing the following:
 - a. Add the Potential CalWORKs Benefit
 - i. Applicable to ARC only.
 - b. Add the Potential ARC Amount

i. Applicable to ARC only.

- c. Add the Rate Payment
- d. Add the Special Care Increment
- e. Add the Infant Supplement Payment
- f. Add the Parenting Support Plan
- g. Add the Infant Supplemental Rate Supplement
- h. Add County Authorized Allowance
- . Add Kidstep Supplement
- <mark>j. Add the Additional Rate</mark>
- k. Add the Educational Travel Reimbursement
- I. Subtract the Unearned Income
- m. Subtract the Earned Income
- n. Add the Earned Income Disregard
- 7. Update the existing Potential Benefit field to not be editable.
 - a. Display the amount as a hyperlink when Fiscal Expenditure data exists in View Mode. Historical FC EDBCs do not display the amount as a hyperlink. This change is also applicable to Approved Relative Caretaker (ARC) aid codes.
- 8. These fields are saved to an existing table Fiscal Potential Benefit to store the potential benefits of each fiscal expenditure when the Calculate button is clicked.
- 9. Update the Foster Care EDBC (Manual) page to display Placement Type under the Authorized Amount Per Aid Code section (see Figure 2.1.2).
- 10. Store the data in an existing table Fiscal Expenditure –using the information in the Authorize Amount Per Aid Code section when the Accept button is clicked.
- 11. All changes also apply to ARC.

2.1.4 Page Location

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

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Create a PMCR to add the new fields on the page.

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Potential Benefit Detail page

2.2.1 Overview

A child page from the Foster Care/Kin-GAP/AAP EDBC (Manual) page displays all the Fiscal Expenditure table data when clicking on the Potential Benefit hyperlink.

2.2.2 Potential Benefit Detail Mockup

Potential Benefit Detail

Expenditure	Aid Code	Pay Code	Placement Type	Rate Structure	Potentia Benefit
Placement Rate	5К	EC EA Ineligible Emergency Placement Prior to Home Approval	Nonrelative Extended Family Member Home	Non-CCR	\$2,617.00
Special Care Increment	5K	EC EA Ineligible Emergency Placement Prior to Home Approval	Nonrelative Extended Family Member Home	Non-CCR	\$300.00
Infant Supplemental Payment	5K	EC EA Ineligible Emergency Placement Prior to Home Approval	Nonrelative Extended Family Member Home	Non-CCR	\$411.00
Infant Supplemental Rate Supplement	5К	EC EA Ineligible Emergency Placement Prior to Home Approval	Nonrelative Extended Family Member Home	Non-CCR	\$489.00
Education Travel Reimbursement	5K	EC EA Ineligible Emergency Placement Prior to Home Approval	Nonrelative Extended Family Member Home	Non-CCR	\$347.00
County Supplemental Allowance	5K	EC EA Ineligible Emergency Placement Prior to Home Approval	Nonrelative Extended Family Member Home	Non-CCR	\$1,000.00
				Total	\$5,146.00

Close

Figure 2.2.1 – Potential Benefit Detail page

2.2.3 Description of Changes

- Use the existing child page (Fiscal History Expenditure Detail) created with DDID 2191 (CA-207140), populate the page using the EDBC's Fiscal Expenditure table, containing the following columns and values:
 - a. Expenditure: This is the Expenditure Type from the Fiscal Expenditure table.
 - b. Aid Code: This is the Aid Code from the Fiscal Expenditure table.
 - c. Pay Code: This is the Pay Code from the Fiscal Expenditure table.
 - d. Placement Type: This is the Placement Type from the Fiscal Expenditure table
 - e. Rate Structure: This is the Rate Structure from the Fiscal Expenditure table
 - f. Potential Benefit: This is the Expenditure Potential Benefit from the Fiscal Expenditure table
 - g. Total: This is the sum of all the Expenditure Potential Benefit amounts for the EDBC
 - h. Close: This is a button that navigates back to the Foster Care EDBC (Manual) page when clicked

Note: The Expenditure Types are listed in the following order:

- Placement Rate
- Special Care Increment
- Infant Supplemental Payment
- Parenting Support Plan
- Infant Supplemental Rate Supplement
- Education Travel Reimbursement
- Additional Payments (in alphabetical order by short description)
- 2. Rename the page to Potential Benefit Detail FC/AAP/KG manual EDBCs.

2.2.4 Page Location

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

2.2.5 Security Updates

N/A – This page has the same security as the EDBC. If the user can view the EDBC, the user can view this page.

2.2.6 Page Mapping

Create new page mappings for the Potential Benefit Detail page.

2.2.7 Page Usage/Data Volume Impacts

N/A

2.3 Kin-GAP EDBC (Manual)

2.3.1 Overview

The manual KG EDBC includes the changes made with DDID 2191 to consolidate issuances and distinguish fiscal expenditures.

2.3.2 Kin-GAP EDBC (Manual) Mockup

Aid Payment		
Rate Payment:	\$	0.00
Special Care Increment:	+	0.00
Infant Supplement Payment:	+	0.00
Infant Supplemental Rate Supplement:	+	0.00
County Authorized Allowance:	+	0.00
Kidstep Supplement:	+	0.00
Total Net Nonexempt Income:	-	0.00
Potential Benefit:	\$	0.00
Previous Potential Benefit:	\$	0.00
Overpayment Adjustment Amount	\$	<u>0.00</u>
Authorized Amount	\$	0.00
Overpayment	\$	0.00
	C	Calculate

Figure 2.3.1 – Kin-GAP EDBC (Manual) Aid Payment Section

2.3.3 Description of Changes

- 1. Add the following fields under the Aid Payment section of the Kin-GAP EDBC (Manual) page:
 - a. Rate Payment
 - b. Special Care Increment
 - c. Infant Supplement Payment
 - d. Infant Supplemental Rate Supplement
 - e. Additional Rate
 - i. Add a dropdown of Additional Rate Types:

1. The available options are the following:

<mark>a. Blank</mark>

- b. County Authorized Allowance
- c. Kidstep Supplement

Note: Infant Supplement related options will not be added to the page dropdown.

- 2. The values in the dropdown are in alphabetical order.
- ii. Add a validation on the 'Add' button when clicked and a value is entered without a type selected. The validation states the following:
- 1. "Add Please select an Additional Rate Type" ii. The line item is added with a new Add button.
 - The Add button creates a new line item with the Additional Rate Type, value inputted and a Remove button.
- a. The Remove button removes the line item. v. The user has the ability to add multiple Additional Rate line items.
- f. Total Net Nonexempt Income
- 2. Allow user input for these fields and set the default value to '0.00' on the page.
- 3. Add the following validation for the fields when the Calculate and Accept buttons are clicked:
 - a. [Field Name] Please enter an amount in xx,xxx,xxx.xx format.
- 4. Use the existing logic, linked to the Calculate and Accept button based on updating the fields or calculating before Accepting EDBC, for the fields mentioned in 2.3.3.1.
- 5. Associate the following symbol to represent the action of the fields:
 - a. Rate Payment (\$)
 - b. Special Care Increment (+)
 - c. Infant Supplement Payment (+)
 - d. Infant Supplemental Rate Supplement(+)
 - e. County Authorized Allowance (+)
 - f. Kidstep Supplement (+)
 - g. Additional Rate (+)
 - h. Total Net Nonexempt Income (-)
- 6. Update the Calculate button to populate the Potential Benefit amount performing the following:
 - a. Add the Rate Payment
 - b. Add the Special Care Increment
 - c. Add the Infant Supplement Payment
 - d. Add the Infant Supplemental Rate Supplement
 - e. Add County Authorized Allowance
 - f. Add Kidstep Supplement

g. Add the Additional Rate

- h. Subtract the Total Net Nonexempt Income
- 7. Update the existing Potential Benefit field to not be editable.
- These fields are saved to an existing table Fiscal Potential Benefit to store the potential benefits of each fiscal expenditure when the Calculate button is clicked.

- 9. Store the data to an existing table Fiscal Expenditure using the information the Authorize Amount Per Aid Code section when the Accept button is clicked.
- 10. Update the amount of the Potential Benefit line item to link to the new Potential Benefit Detail page.
 - a. Display the amount as a hyperlink when Fiscal Expenditure data exists in View Mode. Historical KG EDBCs do not display the amount as a hyperlink.

2.3.4 Page Location

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

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

Create a PMCR to add the new fields on the page.

2.3.7 Page Usage/Data Volume Impacts

N/A

2.4 AAP EDBC (Manual)

2.4.1 Overview

The manual AAP EDBC includes the changes made with DDID 2191 to consolidate issuances and distinguish fiscal expenditures.

2.4.2 AAP EDBC (Manual) Mockup

Aid Payment			
Rate Payment:	\$	0.00	
Special Care Increment:	+	0.00	
County Authorized Allowance:	+	0.00	
Kidstep Supplement:	+	0.00	
Potential Benefit:	\$		0.00
Previous Potential Benefit:	\$	0.00	
Figure 2.4.1 – AAP EDBC (Manual) Aid Payment Section			

Pay Code:* Legal Guardian							
Delivery Method: * Immediacy Indicator: * Issuance Method: Mail Routine							
Authorized A	Authorized Amount Per Rate Structure						
Aid Code	Auth Amount	Number of Days	Rate Structure	Placement Type			
03	\$1,000.00	31	CCR	Adoptive Homes			

Figure 2.4.2 – AAP EDBC (Manual) Authorized Amount Per Aid Code Section

2.4.3 Description of Changes

- 1. Add the following fields under the Aid Payment section of the AAP EDBC (Manual) page:
 - a. Rate Payment
 - b. Special Care Increment
 - <mark>c. Additional Rate</mark>

<mark>. Add a dropdown of Additional Rate Types:</mark>

The available options are the following:

<mark>a. Blank</mark>

- b. County Authorized Allowance
- c. Kidstep Supplement

Note: Infant Supplement related options will not be added to the page dropdown.

2. The values in the dropdown are in alphabetical order.

ii. Add a validation on the 'Add' button when clicked and a value is entered without a type selected. The validation states the following:

1. "Add – Please select an Additional Rate Type" iii. The line item is added with a new Add button.

> The Add button creates a new line item with the Additional Rate Type, value inputted and a Remove button.

> > a. The Remove button removes the line item.

iv. The user has the ability to add multiple Additional Rate line items.

- 2. Allow user input for these fields and set the default value to '0.00' on the page.
- 3. Add the following validation for the fields when the Calculate and Accept buttons are clicked:
 - a. [Field Name] Please enter an amount in xx,xxx,xxx.xx format.
- 4. Use the existing logic, linked to the Calculate and Accept button based on updating the fields or calculating before Accepting EDBC, for the fields mentioned in 2.4.3.1.
- 5. Associate the following symbol to represent the action of the fields:

- a. Rate Payment (\$)
- b. Special Care Increment (+)
- c. County Authorized Allowance (+)
- d. Kidstep Supplement (+)
- <mark>e. Additional Rate (+)</mark>
- 6. Update the Calculate button to populate the Potential Benefit amount performing the following:
 - a. Add the Rate Payment
 - b. Add the Special Care Increment
 - c. Add County Authorized Allowance
 - d. Add Kidstep Supplement
 - e. Add the Additional Rate
- 7. Update the existing Potential Benefit field to not be editable.
- 8. Save these fields to an existing table Fiscal Potential Benefit to store the potential benefits of each fiscal expenditure when the Calculate button is clicked.
- 9. Update the AAP EDBC (Manual) page to display Placement Type under the Authorized Amount Per Aid Code section.
- 10. Store the data in an existing table Fiscal Expenditure –using the information in the Authorize Amount Per Aid Code section when the Accept button is clicked.
- 11. Update the amount of the Potential Benefit line item to link to the new Potential Benefit Detail page.
 - a. Display the amount as a hyperlink when Fiscal Expenditure data exists in View Mode. Historical AAP EDBCs do not display the amount as a hyperlink.

2.4.4 Page Location

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

2.4.5 Security Updates

N/A

2.4.6 Page Mapping

Create a PMCR to add the new fields on the page.

2.4.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2117	Original: The CONTRACTOR shall modify Manual EDBC process to generate and issue benefits for Foster Care, AAP, Kin-GAP, ARC.	This DDID will account for the complete manual EDBC changes required for payment consolidation as well. (DDID# 2191)	Manual EDBCs for FC, AAP, and KG are updated with additional fields based on the changes made with DDID 2191.
	Revised: The CONTRACTOR shall modify Manual EDBC process to generate and issue benefits for Foster Care, AAP, and Kin-GAP.		Requirement revised to remove ARC since ARC is the aid code on the FC program.



California Statewide Automated Welfare System

Design Document

CA-216162 | DDID 1967,1955

Updates to Automated Tasks for MEDS Alerts

	DOCUMENT APPROVAL HISTORY	
CalSAWS	Prepared By	Mayuri Srinivas, Justin Dobbs
	Reviewed By	Justin Dobbs, Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
8/20/2020	1.0	Initial Revision	Mayuri Srinivas
12/7/2020	1.1	Content Revision #1 Validation message updated to reference the "Case Carrying Worker" in place of "Program Worker".	Justin Dobbs

Table of Contents

1	Ove	erview.		4		
	1.1	Currei	nt Design	4		
	1.2	1.2 Requests				
	1.3	Overv	iew of Recommendations	4		
	1.4	Assum	iptions	4		
2	Rec	comme	endations	5		
	2.1	MEDS	Alert Admin Detail Page	5		
		2.1.1	Overview	5		
		2.1.2	MEDS Alert Admin Detail Page Mockup	6		
		2.1.3	Description of Changes	7		
		2.1.4	Page Validations1	6		
		2.1.5	Page Location1	17		
		2.1.6	Security Updates1	17		
		2.1.7	Page Mapping1	17		
		2.1.8	Page Usage/Data Volume Impacts1	7		
3	Requirements			8		
	3.1	Migra	tion Requirements1	8		

1 OVERVIEW

This design outlines modifications to the MEDS Alert Admin Detail page to incorporate functionality for counties to configure automated Task attributes based on MEDS Alerts. Reference the CA-210615 design document for specifics of the MEDS Alert Admin Detail page.

1.1 Current Design

The Medi-Cal Eligibility Data System (MEDS) outbound interface and online transactions sent to MEDS often generate MEDS Alert records in response. These MEDS Alert records are sent from MEDS to LRS/CalSAWS using the MEDS Alert inbound interface. A MEDS Alert record contains an exception, a fatal and/or non-fatal error or warning, etc., that should be addressed by the county.

CA-210615 introduces functionality that allows individual counties to enable or disable MEDS Alerts and/or the associated automated Tasks.

1.2 Requests

Modify the Task Information section of the MEDS Alert Admin Detail page to allow for more configurability other than just enabling/disabling the Task.

1.3 Overview of Recommendations

1. Update the Task Information section of the MEDS Alert Admin Detail page to offer a level of MEDS Alert Task configurability similar to the Task Information section available on the Automated Action Detail page per CA-214928 (DDID 34).

1.4 Assumptions

- 1. CA-210615 that introduces the MEDS Alert Admin Detail page will be available in the LRS/CalSAWS System with the same release or prior to the deployment of this enhancement.
- 2. Existing functionality will remain unchanged unless it is mentioned in the Description of Changes section below.

2 RECOMMENDATIONS

This section will describe the modifications that are necessary to update the Task Information section of the MEDS Alert Admin Detail page to offer more configurability.

2.1 MEDS Alert Admin Detail Page

2.1.1 Overview

The MEDS Alert Admin Detail page displays configuration information of MEDS Alerts in the LRS/CalSAWS System. A population of MEDS Alerts available on this page include a Task Information section that allow users to enable or disable the creation of a Task for these MEDS Alerts. The remaining MEDS Alerts do not include a Task Information section at all on this page. This section will describe recommendations needed to stage the configurability of automated Tasks for every MEDS Alert available on the MEDS Alert Admin Detail page. The section will also describe modifications to the Task Information section to allow for more configuration other than just enabling and disabling the Task.

2.1.2 MEDS Alert Admin Detail Page Mockup

MEDS Alert Admin Detail				
*- Indicates required fields				
			Edit	Close
MEDS Alert Information	1			
Alert ID: 9004	Alert Description: ACTIVE MEDI-CAL RECIPIEN	NT - DECEASED PER SSA BUY-IN		
Alert Type: PRI-ALT	Alert Status: Active			
Case Update Information	on			
Case Update: Case Update Update Household status, deceased date and verification details for a matched person actively enrolled any of the programs (CW, CF, GR, CAPI, RCI and MC); Automation is performed when MEDS reports that the Source of Death Information is any of these: Case Update Status: * (Medicare Buy-In System Reported Death, SDX Reported Title XVI Death Date or CA Vital Records Reported Death Date). Case Update Status: *				atus: *
Journal Entry: On {fileRunDate}, {Dece he/she is deceased as of	ased Individual Name} - {CIN} {deceasedDate}.	was matched to the {agencyNa	me} file as	
Task Information				
Type: Head of Household/Case F	Payee Deceased	Sub-Type:	Status: * Inactive	
Due Date: Default Due Date		Default Due Date: 10 Days		
Initial Assignment: Default Assignment	Initial Assignment:Default Assignment:Default AssignmentMEDS Alert Task Distribution			
Long Description: {Deceased Individual Name} died on {deceasedDate}.Please take appropriate action to change the case payee.				
✓ History				
No Data Found				
			Edit	Close

2.1.2.1 – MEDS Alert Admin Detail Page Reference: View Mode

MEDS Alert Admin Detail				
*- Indicates required	fields			
		Sa	ve and Return	Cancel
MEDS Alert Inform	ation			
Alert ID: 9004	Alert Description: ACTIVE MEDI-CAL RECIP	Alert Description: ACTIVE MEDI-CAL RECIPIENT - DECEASED PER SSA BUY-IN		
Alert Type: PRI-ALT	Alert Status: Active	Alert Status: Active		
Case Update Infor	mation			
Case Update: Update Household s actively enrolled any performed when ME (Medicare Buy-In Sy Vital Records Report Journal Entry: On {fileRunDate}, { he/she is deceased	atus, deceased date and verificat of the programs (CW, CF, GR, CA DS reports that the Source of Dea stem Reported Death, SDX Repor ed Death Date). Deceased Individual Name} - {CI as of {deceasedDate}.	tion details for a matched person API, RCI and MC); Automation is ath Information is any of these: ted Title XVI Death Date or CA IN} was matched to the {agencyN	Case Update : Active ame} file as	Status: *
Task Information				
Type: Head of Household/Case P Due Date: Default Due Date	ayee Deceased V	Sub-Type: Default Due Date: 10 Days	Status: * Active 🗸	
Initial Assignment	nitial Assignment: Default Assignment: Default Assignment MEDS Alert Task Distribution			
Long Description: {Deceased Individua change the case pay	l Name} died on {deceasedDate} ee.	.Please take appropriate action to		
• History				
		Sa	ve and Return	Cancel

Figure 2.1.2.2 – MEDS Alert Admin Detail Page Reference: Edit Mode

2.1.3 Description of Changes

- 1. Update the Task Information Section of the MEDS Alert Admin Detail page as follows:
 - a. Update the Task Type field to editable when the page is in Edit mode. This field will display a dropdown list containing Task Types that are available for the county. This field will be required

and enforced with a page validation message when the "Status" field in this section is set to "Active". When the page is in View mode, this field will display the Task Type associated to the MEDS Alert if one has been selected, otherwise this field will be blank. Page Validations can be found in Section 2.1.4.

- b. Add an optional Task Sub-Type field called "Sub-Type:" that will display if the selected Task Type contains one or more Task Sub-Type values. This field will display a dropdown list containing Task Sub-Types associated to the selected Task Type when the page is in Edit mode. When the page is in View mode, this field will display the Task Sub-Type associated to the MEDS Alert if one has been selected, otherwise the entire field, including the label, will not display.
- c. Update the label of the "Task Status:" field to be "Status:". This recommendation is strictly cosmetic and will not change the values available in this field or the underlying functionality.
- d. Modify the existing Due Date field to display the following two fields that will allow configuration of the Task Due Date:
 - i. Due Date This field will drive a dynamic field which will be referenced in this document as "Due Date Details" below.

This field will display the value of the Due Date field when the page is in View mode. When the page is in Edit mode, this field will display as a dropdown list containing the following options available for the determination of the Task due date:

- 1. Default Due Date Will set the due date to the default value specified for the MEDS Alert Task.
- 2. After Number of Calendar Days Will set the due date based on the System date plus the number of calendar days specified by the User.
- 3. After Number of Business Days Will set the due date based on the System date plus the number of business days specified by the User. Business days exclude weekends and County specific holidays.
- 4. Last Day of Month Will set the due date to the last calendar day of the month of the System date.
- 5. Last Day of Following Month Will set the due date to the last calendar day of the month following the month of the System date.
- e. Due Date Details This references the section on the page to the right of the "Due Date" field. This section will display field(s) dynamically based on the value chosen in the Due Date field. The table below describes the fields that will display dynamically for each option available in the Due Date field.

Due Date Value	Due Date Details Will Display	
Default Due Date	A "Default Due Date" field will display. The field value contains text to describe the value for how logic will determine the Due Date. Example values are "5 days" or "10 days".	
After Number of Calendar Days	A required "Number of Calendar Days" field will display. The input value must be a number from 0 – 999.	
After Number of Business Days	A required "Number of Business Days" field will display. The input value must be a number from 0 – 999.	

- f. Add the following fields to allow configuration of the assignment rules of the MEDS Alert Task:
 - Initial Assignment When the page is in View mode, this field will display the selected Initial Assignment value.
 When the page is in Edit mode, this field will display a dropdown that allows the User to choose the method for how Tasks generated by the MEDS Alert are assigned. Options included are:
 - Default Assignment Will assign the Task based on the default value that is available for the MEDS Alert Task.
 - Case Carrying Worker/Bank Will allow the user to add specific instructions regarding assignment to the Case Carrying Worker or Bank.
 Note: Current LRS/CalSAWS System logic evaluates for a "Case Carrying Worker" as part of the Office Distribution assignment logic. The Case Carrying Worker is found by evaluating a hierarchy of all programs on the Case. The worker associated to the highest priority program on the Case is considered the Case Carrying Worker.
 - ii. If the Initial Assignment value is "Default Assignment", a "Default Assignment" field will display containing a read only description of the default assignment method. MEDS Alerts Tasks will have a Default Assignment value of "MEDS Alert Task Distribution". This term describes the current assignment logic in place to assign MEDS Alert Tasks in the LRS/CalSAWS System. If the MEDS Alert Task is being created for Los Angeles County, this logic will

initially perform a lookup for a specific Office if the MEDS Alert is a ZZZ Alert or related to a Case with a Foster Care, Kin-Gap or Adoption Assistance Program; otherwise the Office associated to the MEDS Alert will be used. This Office will be evaluated to find a Position within the Office that has been configured to receive MEDS Alert Tasks. A Position can receive MEDS Alert Tasks if the Position Detail page has a checkmark in the "MEDS Alert" box of the "Tasks" section of the page.

If the Initial Assignment value is "Case Carrying Worker/Bank", the following 2 fields will display:

Initial Assignment:	Case Carrying Worker:
Case Carrying Worker/Bank 🗸	Most Recent Worker
	Default Bank ID:
	Select

- Case Carrying Worker This field will display the Case Carrying Worker value when the page is in View mode. If the page is in Edit mode, this field will display a dropdown box with the following options:
 - Currently Assigned Worker
 - Most Recent Worker Within 30 Days
 - Most Recent Worker Within 60 Days
 - Most Recent Worker Within 90 Days
 - Most Recent Worker Within 120 Days
 - Most Recent Worker
 - No Case Carrying Worker

The options above will apply the appropriate rules to the Case Carrying Worker during the Task Assignment. For Example, if the Case Carrying Worker value is "Most Recent Worker Within 30 Days", the highest priority program on the Case will be evaluated to find the most recently assigned worker within the last 30 days.

2. Default Bank ID – This field will display the Default Bank ID value when the page is in View mode. If the page is in Edit mode, this field will display a text box and a "Select" BUTTON that will navigate to the Select Bank page allowing the User to search for and select a Bank. If a worker cannot be determined from the Case Carrying Worker rule, the Task will be assigned to the Bank specified in this field. If a Worker or a Bank cannot be

determined for assignment, the Task will not be created.

- g. Long Description A text field indicating the long description that will be used when the Task is created. This field will not be modified and will remain read only.
- Remove the Expiration Date field from the page. Expiration Date information will be housed and configurable on the Task Type Detail page per DDID 34 (CA-214928). The Task Type Detail page can be referenced for any attributes related to the selected Task Type.
- i. Each of the editable fields within the Task Information section will create the appropriate transactions to be displayed in the History section of the page if the values are modified. For Example, if the "Type" within the Task Information section is changed from "Value One" to "Value Two", the History section of the page will display the appropriate information for this change.
- 2. Configure MEDS Alerts that currently display the Task Information section to have appropriate default values for the new fields being added in the above recommendation. This recommendation will not change current functionality or logic of these MEDS Alert Tasks. The following are the initial editable values for the 14 MEDS Alert Tasks:

Note: Long Description is not included because the value is not editable. Status is also not included because the value will not be changed and users can change this field currently today, so the value that is available in the Status field will remain.

Alert ID	Alert Description	Task Information Attributes	
1 <i>5</i> 03	CLIENT INDEX NUMBER/MEDS-ID CONFLICT	 Type: 1503- Client Index Number/MEDS-ID conflict Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution 	
1504	CLIENT INDEX NUMBER/MEDS-ID CS COUNTY-	 Type: 1504-CIN/MEDS ID County-ID/MEDS conflict Sub-Type: null Due Date: Default Due Date 	

Alert ID	Alert Description	Task Information Attributes
	ID/MEDS-ID CONFLICT	 Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
1510	TRANSACTION FAILED MEDS NAME/BIRTHDATE MATCH CRITERIA	 Type: 1510- Transaction Failed Meds Name/Birthdate match criteria Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
2005	TRANSACTION COUNTY-ID DOES NOT MATCH MEDS	 Type: 2005-Transaction County ID does not match MEDS Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
2130	DECEASED PER MEDS – CONTACT YOUR MEDS LIASON	 Type: Head of Household/Case Payee Deceased Sub-Type: null Due Date: Default Due Date Default Due Date: 10 Days Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
6005	RECON RECORD ON MEDS/NOT ON COUNTY – RECON HOLD GENERATED	 Type: 6005- Recon record on MEDS/Not on County recon hold generated Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal

Alert ID	Alert Description	Task Information Attributes
		 period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
6006	DUP RECORDS ON COUNTY RECON FILE – RECON HOLD GENERATED	 Type: 6006- Dup records on County Recon file Recon hold generated Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
6008	DUP RECORDS ON COUNTY RECON FILE – NO MATCH ON MEDS	 Type: 6008-Dup records on County Recon file. No Match on MEDS. Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
9003	DEATH REPORTED TO MEDS – MEDS/CDB ELIGIBILITY TERMINATED	 Type: Head of Household/Case Payee Deceased Sub-Type: null Due Date: Default Due Date Default Due Date: 10 Days Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
9004	ACTIVE MEDI-CAL RECIPIENT - DECEASED PER SSA BUY-IN	 Type: Head of Household/Case Payee Deceased Sub-Type: null Due Date: Default Due Date Default Due Date: 10 Days Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution
9532	over 3 edwards Months – Medi- Cal	 Type: 9532- Over 3 edwards Months Medi_CAL determination overdue criteria Sub-Type: null Due Date: Default Due Date

Alert ID	Alert Description	Task Information Attributes	
	DETERMINATION OVERDUE	 Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution 	
9546	OVER 2 MONTHS ACCEL/PE ENROLL – AP DETERMIANTION OVER DUE	 Type: 9546- Over 2 months Accel App Determination overdue Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution 	
9548	OVER 2 MONTHS EXTENDED ELIG – MEDI-CAL DETERM OVERDUE	 Type: 9548- Over 2 months Extended Elig – MEDI-CAL determ overdue Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution 	
9550	ONGOING BURMAN ELIGIBLE – MEDS ELIGIBILITY UPDATE OVERDUE	 Type: 9550- Ongoing Burman Eligible MEDS Eligibility Update overdue Sub-Type: null Due Date: Default Due Date Default Due Date: If the alert is received before the first of the month + 10 business days, the task is due on the first day of the next MEDS renewal period or else the Task is due the first day of the following renewal period. Initial Assignment: Default Assignment Default Assignment: MEDS Alert Task Distribution 	

3. Update the Long Description of the following MEDS Alert Tasks to no longer reference "LRS":

Alert ID	Current Long Description	Updated Long Description
1503	There is a discrepancy in MEDS or LRS involving the SSN associated with the CIN	There is a discrepancy with MEDS involving the SSN associated with the CIN.
1504	There is a data discrepancy On MEDS and LRS involving the SSN or CIN	There is a data discrepancy with MEDS involving the SSN or CIN.
1510	There is a data discrepancy On MEDS and LRS involving the name and birthdate	There is a data discrepancy with MEDS involving the name and birthdate.
2005	There is a data discrepancy between MEDS and LRS involving the County ID	There is a data discrepancy with MEDS involving the County ID.
9003, 9004, 2130	{Deceased Individual Name} died on {deceasedDate}.Please take appropriate action to change the case payee in the LRS.	{Deceased Individual Name} died on {deceasedDate}. Please take appropriate action to change the case payee.
6005	A MEDS record does not have a matching record on LRS but there has been activity on MEDS within the last six months that affects the person share of cost or eligibility status	A MEDS record cannot be matched but there has been activity on MEDS within the last six months that affects the person share of cost or eligibility status.
6006, 6008	LRS displays more than one record with the same MEDS ID (SSN) and there is a matching record on MEDS.	There is more than one record with the same MEDS ID (SSN) and there is a matching record on MEDS.
9550	A beneficiary has been placed in a forced eligibility status from a MEDS hold for more than one month. This generally as a result of data discrepancy between MEDS and LRS	A beneficiary has been placed in a forced eligibility status from a MEDS hold for more than one month. This generally as a result of data discrepancy with MEDS.

4. Enable the Task Information section with default values for all MEDS Alerts that do not currently display the Task Information section.

- a. The "Status" will be initially set to "Inactive".
- b. The Task Type and Task Sub-Type values will initially be set to blank. If a user updates the Status field in this section to be "Active", page validation will enforce the selection of a Task Type value. This approach will allow each county to specify a county specific Task Type as needed rather than a prescribed Task Type. Page Validations can be found in Section 2.1.4.
- c. The Long Description that will be associated to each of these tasks will be:

MEDS Alert {Alert ID} - {Alert Description} has been received.

For example: If a Task is created for MEDS Alert 0515, the Text Description will display as "MEDS Alert 0515 – INVALID PRIMARY LANGUAGE CODE has been received."

- d. The remaining attributes within the section will be initially configured as follows:
 - i. Due Date: Default Due Date
 - ii. Default Due Date: 10 Days
 - iii. Initial Assignment: Default Assignment
 - iv. Default Assignment: MEDS Alert Task Distribution
- 5. Update the MEDS Alert processing logic that evaluates the MEDS Alert Admin Detail page Task Information section to function for each MEDS Alert that is accessible on the MEDS Alert Admin Detail page. This modification is necessary so that the Task Information section being introduced in recommendation #4 for MEDS Alerts that don't currently have this section will also be evaluated during the MEDS Alert processing.
- 6. **Technical:** Update the data model supporting the MEDS Alert Admin Detail page to link to the TASK_TYPE table to retrieve the appropriate attributes for the page that are associated to a specific Task Type. This data link will need to initially be loaded for the 14 MEDS Alerts that currently display the Task Information section. Similarly, the default due date information will be housed in the appropriate reference column in the codes table for Category 399.

2.1.4 Page Validations

- 1. "Type A Task Type must be selected."
 - a. Updating the Task Information section of the MEDS Alert Admin Detail page to have a Status of "Active" will display a validation message on Save when a Task Type has not been selected.

- 2. "Number of Calendar Days Value must be a number from 0 999. Please enter a different value."
 - a. When the User attempts to save a value other than a number from 0 999 in the Number of Calendar Days field, a validation message is triggered.
- 3. "Number of Business Days Value must be a number from 0 999. Please enter a different value."
 - a. When the User attempts to save a value other than a number from 0 999 in the Number of Business Days field, a validation message is triggered.
- 4. "Default Bank ID Bank ID does not exist."
 - a. Add a validation to display when the User attempts to save the page with the Bank ID field populated with an ID that does not correspond to an existing Bank in the LRS/CalSAWS System.
- 5. "Case Carrying Worker Tasks must be assigned to a Position or a Bank."
 - a. Add a validation to display when the User attempts to save the page with "No Case Carrying Worker" selected in the Case Carrying Worker field, and no Bank ID populated in the Bank ID field.

2.1.5 Page Location

- Global: Admin Tools
- Local: Admin
- Task: MEDS Alert Admin > Search for an Alert > Click on the desired results from the List page to navigate to the MEDS Alert Admin Detail page

2.1.6 Security Updates

N/A

2.1.7 Page Mapping

Implement page mapping for the Task Information section of the MEDS Alert Admin Detail page.

2.1.8 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1967	As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twenty-nine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements in the LRS Agreement. As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.	- Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management. - For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C- IV), the requirements for the unforeseen Differences allowance hours must be finalized, approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.	The MEDS Alert Admin Detail page will be modified to allow configuration of MEDS Alert Task information by each county.
1955	The CONTRACTOR shall create automated tasks for MEDS alerts specified in the "MEDS Alert Message Inventory" appendix, that are received by the CalSAWS Software and do not generate tasks currently. The	- This requirement will be met with the implementation of DDID 1964 and Automated Action SCR associated with from DDID 1967.	The MEDS Alert Admin Detail page will be modified to allow configuration of MEDS Alert Task

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
	automated tasks from MEDS alerts must be county configurable to allow authorized users to enable or disable the individual tasks.	- Please refer to CalSAWS Agreement Exhibit U Schedule 1 - Attachment 1 Contractor Assumptions Inventory List, worksheet 'MEDS Alert Message Inv'	information by each county.