CalSAWS

California Statewide Automated Welfare System

Design Document

CA-54527

Modify the TTC Interface File

CalSAWS	DOCUMENT APPROVAL HISTORY	
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1 OVERVIEW

The Los Angeles County Treasurer and Tax Collector (TTC) oversee various collection activities on delinquent accounts for Los Angeles County. Outstanding overpayment and over-issuance Recovery Accounts are sent to TTC for collections. TTC migrated their collections system from Collections and Accounts Receivable System (CARS) to a new software (RevQ) in 2018 and this document describes the changes needed to align CalSAWS, RevQ and the Accounts Receivable System (ARS).

1.1 Current Design

The CalSAWS system will generate a monthly Referral file that includes outstanding overpayment and over-issuance Recovery Account on closed/terminated cases and send them to Internal Services Department (ISD). ISD will send this information to the Los Angeles County Treasurer and Tax Collector (TTC) for collections processing.

TTC then sends an inventory file of all collection accounts back to CalSAWS on a monthly basis. This file contains the TTC Account Number for each account that was referred to TTC.

Finally, TTC sends a Collection file to include collection details for the CalSAWS system to record each transaction and apply the collection amounts against any outstanding recovery account on a weekly basis.

1.2 Requests

1. Update TTC Referral File to:
   - Change the Name field to First Name, Middle Name, and Last Name.
   - Add Maiden Name, Name Suffix, Previous Last Name, Previous First Name, Previous Middle Name, Previous Name Suffix.
   - Add Mailing Address, Email, and Phone Numbers.
   - Add Address Line 2 to all addresses.
2. Update TTC Inventory File to:
   - Change the Name field to First Name, Middle Name, and Last Name.
   - Add Primary Address info.
   - Add RevQ Debtor Number.
3. Update TTC Collection File to:
   - Change the Name field to First Name, Middle Name, and Last Name.
   - Add RevQ Debtor Number.
4. Send a copy of the TTC Referral File to ARS monthly.
5. Re-map ‘Cash’ payment type to ‘Other Agency Collection – TTC’ with 84.35% collection rate. Re-map ‘AP-USCB’ payment type to ‘Collection Fee – TTC’ with 15.65% commission fee rate.
6. Set Effective Month to be the month of Posted Date for the transactions during the TTC Weekly Mass Upload.
7. Create Tax Intercept Reversal transactions during the TTC Weekly Mass Upload.
8. Fix the leading zero issue when updating TTC Account number for Recovery Account that are referred to TTC.

9. Update ARS Program Status File to include Responsible Party's SSN
10. Update ARS Claims File to add the following:
    - Recovery Account Number.
    - Recovery Account Status Code.
    - Recovery Account Cause Description.
11. Update ARS Receipts File:
    - Add Responsible Party Type.
    - Add Source Document Number.
    - Add GL Document ID.
    - Add GL Document Date.
    - Add Manual Receipt Number.
    - Use the creation date of a receipt for the Recording Date field.
12. Update ARS Transaction File to add the following:
    - Transaction Number
    - Related Transaction Number.
    - Related Transaction Type Code.
    - TOP Cycle Number.
    - ECAPS Document ID.
    - ECAPS Warrant Number.
    - ECAPS Warrant Paid Indicator.
13. Add validation on the Transaction Detail page to prevent users from entering a future month for Effective Month.
14. Provide a report for TTC Referral Account status.
15. Add Payment Type Description and Recovery Account on TTC Mass Upload Collections Weekly Report and TTC Mass Upload Collections Monthly Report
16. Ensure all batch jobs are complete before sending ARS Claims File.
17. Update Treasurer and Tax Collector Account Detail page to right align dollar amount of the History section.

1.3 Overview of Recommendations

1. Update TTC Referral Writer to do the following:
    - Change the Name field to First Name, Middle Name, and Last Name.
    - Add Maiden Name, Name Suffix, Previous Last Name, Previous First Name, Previous Middle Name, Previous Name Suffix.
    - Add Addresses, Email, and Phone Numbers.
    - Add Address Line 2 to all addresses.
2. Update TTC Referral Writer's dependency to refer Recovery Accounts with latest balances to TTC.
3. Update the TTC Inventory file definition to:
    - Change the Name field to First Name, Middle Name, and Last Name.
    - Add RevQ Debtor Identifier.
    - Add Primary address info.
4. Update TTC Inventory reader to record RevQ Debtor Identifier that will be displayed on the Monthly TTC Account Referral Status Report.
5. Update TTC Inventory Reader to match Claim Numbers returned by TTC with Recovery Account Numbers in CalSAWS without leading 0.
6. Update the TTC Collection file definition to:

- Change the Name field to First Name, Middle Name, and Last Name.
- Add RevQ Debtor Number.

7. Update TTC Collection Reader to re-map ‘Cash’ payment type to ‘Other Agency Collection – TTC’ with 84.35% collection rate. Update ‘AP-USCB’ payment type to ‘Collection Fee – TTC’ with 15.65% commission fee rate.
8. Update TTC Collection Reader to use the month of the batch run date as the Effective Month for the recovery account transactions.
9. Update TTC Collection Reader to create Tax Intercept Reversals transactions for inbound TOP and FTB transactions with negative amounts.
10. Create a new batch job to send a copy of the TTC Referral File to ARS monthly.
11. Update ARS Program Status Writer to add Responsible Party’s SSN.
12. Update ARS Claims Writer to add Recovery Account Number, Recovery Account Status Code, Recovery Account Cause Description.
13. Update ARS Claims Writer to execute last and send latest Recovery Account info to ARS.
14. Update ARS Receipts Writer to add the following fields:
    - Responsible Party Type.
    - Source Document Number.
    - GL Document ID.
    - GL Document Date.
    - Manual Receipt Number.
15. Update ARS Receipts Writer to increase the character length of Payment Type to 3 characters and left-justified.
16. Update ARS Receipts Writer to Use the creation date of a receipt for the Recording Date field.
17. Update ARS Transactions Writer to add the following fields:
    - Transaction Number
    - Related Transaction Number.
    - Related Transaction Type Code.
    - TOP Cycle Number.
    - ECAPS Document ID.
    - ECAPS Warrant Number.
    - ECAPS Warrant Paid Indicator.
18. Update ARS Transaction Writer to increase the character length of Transaction Type to 3 characters and left-justified.
19. Generate one-time ARS Receipt file and an ARS Transaction file to include all Top 545 and 547 transactions that have not been sent to ARS.
20. Create a new scheduled Monthly TTC Account Referral Status Report that will provide details on the monthly Recovery Account referrals to TTC.
21. Make the following updates to the TTC Mass Upload Collections Monthly Report and the TTC Mass Upload Collections Weekly Report:
    - Add a column for Recovery Account number to the Details and Exceptions sheets
    - Add a column for Payment Type Description on all three sheets
    - Update the report logo
    - Update the heading of the Exceptions sheet to correct a typo
22. Update Treasurer and Tax Collector Account Detail page to right align dollar amount of the History section.

1.4 Assumptions

1. TTC Inventory files are currently forwarded to ARS daily.
2. Request to add a validation that prevents users from entering a future month for Effective Month field will be implemented with SCR CA-219596.
3. Currently only CalFresh and CalWORK Recovery Accounts are referred to TTC for collections.
4. TTC will only reverse a payment that has already been collected. The system will not post a Tax Intercept Reversal transaction from TTC that has no matching payment record.

2 RECOMMENDATIONS

2.1 Treasurer and Tax Collector Account Detail

2.1.1 Overview

Treasurer and Tax Collector Account Detail page allows the user to view the information of respective Recovery Account Details and how much amount the TTC has collected.

This SCR is to update the Amount column of the History section to be right aligned.

2.1.2 Treasurer and Tax Collector Account Detail Mockup

History:

Record Type	Sent to TTC?	Amount	Posted Date
Decrease		179.02	05/10/2019
Decrease		843.98	05/10/2019
Decrease		179.02	04/26/2019
Decrease		843.98	04/26/2019
Establish	Yes	1,023.00	03/01/2016

Close

Figure 2.1.1 – History section of Treasurer and Tax Collector Account Detail

2.1.3 Description of Changes

Update the Amount column to display right-aligned dollar amounts. (Please see Figure 2.1.1)

2.1.4 Page Location

- **Global: Fiscal**
- **Local: Collections**
- **Task: Treasurer and Tax Collector Account Search**

2.1.5 Security Updates

No changes

2.1.6 Page Mapping

No changes

2.2 TTC Referral Interface (PO19F425)

2.2.1 Overview

The TTC Referral Writer retrieves outstanding overpayment and over-issuance Recovery Accounts for closed/terminated cases in the LRS and send them to the Los Angeles County Treasurer and Tax Collector (TTC) for collections processing. The batch is scheduled to execute on the 6th business day every month. Below describe required changes.

2.2.2 Description of Changes

1) Update the TTC Referral writer logic to make following changes in TTC Referral files:
   a. Change the Name field to first Name, Middle Name, and Last Name.
   b. Add Maiden Name, Name Suffix, Previous First Name, Previous Middle Name, Previous Last Name, Previous Name Suffix.
   c. Add the Email and latest home and cell phone numbers.
   d. Include both the Physical Address and the Mailing Address. The Physical Address will be the primary. Add Address Line 2 for all addresses.

   Please refer to 'TTC Referral Definition.xlsx' for detailed file layout.

   NOTE: TTC partner will make updates to process additional fields in the same release of this SCR.

2.2.3 Execution Frequency

No Change.

2.2.4 Key Scheduling Dependencies

Create a dependency for this batch to execute after the following batches are complete:

- Receipt Mass Upload Batch (PB19F114)
- Grant Expungement Reader (PI19F401)
- Issuance Batch (PB00F4XX)
- TTC Collections Reader (PI19F421)

2.2.5 Counties Impacted

Los Angeles County.

2.2.6 Data Volume/Performance

No Change.

2.2.7 Interface Partner

Los Angeles County Treasurer and Tax Collector (TTC).

2.2.8 Failure Procedure/Operational Instructions

No Change.

2.3 TTC Inventory Interface (PI19F427)

2.3.1 Overview

The Treasurer and Tax Inventory Reader reads the TTC Collections file, which contains various TTC Account Number for each Recovery Account, referred to by TTC. Below describe required changes to update Recovery Account's TTC account number.

2.3.2 Description of Changes

1) Update the TTC Inventory reader logic to match the TTC Account Number based on the Claim Numbers without leading 0 and the number will be left-justified.
2) Update the TTC Inventory file definition for the following updates:
    - Update Name field to be First Name, Middle Name, and Last Name of the person.
    - Add RevQ Debtor Identifier.
    - Add Primary address info.

   Name and Address fields will not be processed by the CalSAWS system and will be for ARS only. Please refer to 'TTC Inventory Definition.xlsx' for detailed file layout.
3) Record the RevQ Debtor Identifier for each TTC Account. The field will be displayed on Monthly TTC Account Referral Status Report (section 2.10).

Note: TTC will make the following system updates on their end in the same release of this SCR:

- Generate left-justified recovery account numbers without any padding 0.
- Add new fields requested by ARS in the Inventory files.
- The Inventory files will only include new or updated records instead of all TTC Accounts. Below are triggers to include TTC Account in the inventory file:
    1. Newly established TTC account with TTC Account Number and RevQ Debtor Identifier.
    2. Changes in the TTC account status, balance, or Debtor's primary address info.

2.3.3 Execution Frequency

No Change.

2.3.4 Key Scheduling Dependencies

No Change.

2.3.5 Counties Impacted

Los Angeles County.

2.3.6 Data Volume/Performance

No Change.

2.3.7 Interface Partner

Los Angeles County Treasurer and Tax Collector (TTC).

2.3.8 Failure Procedure/Operational Instructions

No Change.

2.4 TTC Collection Reader (PI19F421)

2.4.1 Overview

TTC Collections reader is to post the transactions received from TTC into the system which helps to recover the money from recovery account's responsible party and lowering the account balance. Below describe required changes.

2.4.2 Description of Changes

1) Update the TTC Collection file definition for the following updates:
    - Add RevQ Debtor Identifier
    - Update the Name field to be First Name, Middle Name, and Last Name.

   Name and RevQ Debtor Identifier fields will not be processed by the CalSAWS system and will be for ARS only. Please refer to 'TTC Collection Definition.xlsx' for detailed file layout.
2) Use the batch run month as the Effective Month of the Recovery Account Transaction instead of the posting date received from the TTC.
3) Update the Payment/Transaction Types and the commission rates of the Receipts/Recovery Account Transactions for USCB payments as below:

Payment/Transaction Type (current)	Split Rate (current)	Payment/Transaction Type (new)	Split Rate (new)
Cash	86%	Other Agency Collection - TTC	84.35%
AP-USCB	14%	Collection Fee - TTC	15.65%

   Note: This update will be for the ongoing records only, and there will be no DCR to update existing Transactions to re-map the transaction type.
4) Process Tax Intercept Reversal transactions for TOP and FTB transactions with the negative amount by doing the following:
    a. Create TTC Account Transactions with 'Increase' Type Code and the positive transaction amount.
    b. Create Receipt with 'Tax Intercept Reversal' Payment Type and the negative transaction amount.
    c. Post RA Transactions with 'Tax Intercept Reversal' Type Code and negative transaction amount to the 'Active' or 'Suspended' Recovery Account that is originally referred to TTC. For 'Closed' and 'Terminated' status, reactivate the Recovery Account with 'Active' as Status Reason before posting a Tax Intercept Reversal transaction to the RA.

   Note: Current logic to set Posted Date and State Cycle Number will remain unchanged and will be applied to Tax Intercept Reversal transactions.

   Process Tax Intercept Reversal for inbound TOP Transactions when the following conditions are met:

    a. The department is 14061, 14062, 14084, or 14088.
    b. The amount is negative.
    c. A 545 Transaction must have a matching 547 transaction within a TTC collection file, and vice versa.

       A 545 transaction without the pairing 547 transaction will have the error message '**NO 547 FOR 545.**' on the TTC Mass Upload Collections Reports.

A 547 transaction without the pairing 545 transaction will have the error message ‘**NO 545 FOR 547**.’ on the TTC Mass Upload Collections Reports.

d. The amount of the 545 Transaction should be 17.5% of the sum of the 545 and 547 transactions.

   If the amount of the 545 transaction do not match the percentage, both 545 and 547 transactions will have the error message ‘**Amounts does not match for 545 and 547.**’ on the TTC Mass Upload Collections Reports.

e. The amount of the 547 Transaction should be 82.5% of the sum of the 545 and 547 transactions.

   If the amount of the 547 transaction does not match the percentage, both 545 and 547 transactions will have the error message ‘**Amounts does not match for 545 and 547.**’ on the TTC Mass Upload Collections Reports.

f. The RA referred to TTC is ‘Active’, ‘Suspended’, ‘Closed’ or ‘Terminated’. For other status, the transaction will have the error message ‘**TI Reversal Unable to Apply.**’ on the TTC Mass Upload Collections Reports.

For example, within a TTC collection file contain 545 and 547 transactions below, then both records will be insert as Tax Intercept Reversal.

TTC Trans Code	CalSAWS Trans Type	Amount	Percentage
545	Tax Intercept Reversal	(10.14)	17.5%
547	Tax Intercept Reversal	(47.86)	82.5%

Create Tax Intercept Reversal Transactions for the inbound FTB transactions with negative amount:

a. 538 Transactions for all departments.
b. 535 and 545 Transaction with the department that is other than 14061, 14062, 14084, and 14088.
c. The RA referred to TTC is ‘Active’, ‘Suspended’, ‘Closed’ or ‘Terminated’. For other status, the transaction will have the error message ‘**TI Reversal Unable to Apply.**’ on the TTC Mass Upload Collections Reports.

Example below:

TTC Trans Code	CalSAWS Trans Type	Amount
538	Tax Intercept Reversal	(50.00)

2.4.3 Execution Frequency

No Change.

2.4.4 Key Scheduling Dependencies

No Change.

2.4.5 Counties Impacted

Los Angeles County.

2.4.6 Data Volume/Performance

No Change.

2.4.7 Interface Partner

Los Angeles County Treasurer and Tax Collector (TTC).

2.4.8 Failure Procedure/Operational Instructions

No Change.

2.5 ARS Program Status Writer (PO19F431)

2.5.1 Overview

This ARS Program Status Writer retrieves all program status changes (active, terminated, etc.) within the previous week and send them to ARS. ARS uses this data to identify which accounts need to be recalled from TTC. Below describe required changes.

2.5.2 Description of Changes

Update the ARS Program Status Writer to include Responsible Party's SSN. Please refer to DPSS_PGM_STATUS section of 'ARSFileDefinition.docx' for detailed file layout.
Note: Because of sensitive personal info, the file will be encrypted with the encryption key from ARS.

2.5.3 Execution Frequency

No Change.

2.5.4 Key Scheduling Dependencies

No Change.

2.5.5 Counties Impacted

Los Angeles County.

2.5.6 Data Volume/Performance

No Change.

2.5.7 Interface Partner

Accounts Receivable System.

2.5.8 Failure Procedure/Operational Instructions

No Change.

2.6 ARS Claims Writer (PO19F432)

2.6.1 Overview

This ARS Recovery Claims Writer will retrieve new recovery accounts within the previous week and send them to ARS for processing. Furthermore, this job also tracks any Cause Code or Status Code changes to the recovery account. ARS uses this data to sync their system with the CalSAWS. Below describe required changes.

2.6.2 Description of Changes

Update the ARS Claim Writer to include the following fields:

- Recovery Account Number.
- Recovery Account Status Code.
- Recovery Account Cause Description.

Please refer to DPSS_CLAIM_DATA section of 'ARSFileDefinition.docx' for detailed file layout.

2.6.3 Execution Frequency

No Change.

2.6.4 Key Scheduling Dependencies

Set up dependencies for this batch to execute after Fiscal Claiming batches are complete. This is to ensure the ARS Claim file will contain latest Recovery Account info.

2.6.5 Counties Impacted

Los Angeles County.

2.6.6 Data Volume/Performance

No Change.

2.6.7 Interface Partner

Accounts Receivable System

2.6.8 Failure Procedure/Operational Instructions

No Change.

2.7 ARS Receipts Writer (PO19F430)

2.7.1 Overview

This ARS Recovery Receipts Writer will retrieve new receipts created within the previous week and send them to ARS for processing. ARS uses this data to sync their system with the CalSAWS. Below describe required changes.

2.7.2 Description of Changes

1) Update the length of the Payment Type Code from 2 characters to 3 characters and left-justified.
2) Update the ARS Receipts Writer to include the following fields:
    - Responsible Party Type. Possible values are PE (Person), RE (Resource), and OT (Other).
    - Source Document Number.
    - GL Document ID.
    - GL Document Date.
    - Manual Receipt Number.

   Please refer to DPSS_CLAIM_PAYMENT_RECEIPT section of 'ARSFileDefinition.docx' for detailed file layout.
3) Use the creation date of a receipt for the Recording Date field.

2.7.3 Execution Frequency

No Change.

2.7.4 Key Scheduling Dependencies

No Change.

2.7.5 Counties Impacted

Los Angeles County.

2.7.6 Data Volume/Performance

No Change.

2.7.7 Interface Partner

Accounts Receivable System

2.7.8 Failure Procedure/Operational Instructions

No Change.

2.8 ARS Transactions Writer (PO19F433)

2.8.1 Overview

This ARS Recovery Transactions Writer will retrieve new recovery account transactions created within the previous week and send them to ARS for processing. ARS uses this data to sync their system with the CalSAWS. Below describe required changes.

2.8.2 Description of Changes

1) Update the length of the Transaction Type Code and Reversal Transaction Type Code from 2 characters to 3 characters and left-justified.
2) Update the ARS Transactions Writer to include the following fields:
    - Transaction Number
    - Related Transaction Number.
    - Related Transaction Type Code.
    - TOP Cycle Number.
    - ECAPS Document ID – Only has a value when Transaction Type is Refund.
    - ECAPS Warrant Number - Only has a value when Transaction Type is Refund.

- ECAPS Warrant Paid Indicator - Only has a value when Transaction Type is Refund. 'Y' indicates the issuance status is Paid, and 'N' for other statuses.

Please refer to DPSS_CLAIM_RECOVERY_DETAILS section of 'ARSFileDefinition.docx' for detailed file layout.

2.8.3 Execution Frequency

No Change.

2.8.4 Key Scheduling Dependencies

No Change.

2.8.5 Counties Impacted

Los Angeles County.

2.8.6 Data Volume/Performance

No Change.

2.8.7 Interface Partner

Accounts Receivable System

2.8.8 Failure Procedure/Operational Instructions

No Change.

2.9 TTC Referral File to ARS

2.9.1 Overview

Below describe required changes to forward a copy of TTC Referral File to ARS monthly.

2.9.2 Description of Changes

Create a new interface process to forward a copy of TTC Referral File to ARS monthly.
Note: Because of sensitive personal info, the file will be encrypted with the encryption key from ARS.

2.9.3 Execution Frequency

Monthly.

2.9.4 Key Scheduling Dependencies

TTC Referral Writer (PO19F425).

2.9.5 Counties Impacted

Los Angeles County.

2.9.6 Data Volume/Performance

Approximately 50,000 per year.

2.9.7 Interface Partner

Accounts Receivable System

2.9.8 Failure Procedure/Operational Instructions

Batch Support Operations staff will evaluate the nature of the failure and determine the appropriate action. This Batch job will not utilize restartability. The entire file will be written at the end of processing, or the file will not be created all. This approach will allow this job to be re-run without the possibility of creating a partial file and having to combine multiple partial files.

2.10 Generate an ARS Receipt file and an ARS Transaction file with TOP 545 and 547 transactions

2.10.1 Overview

Currently CalSAWS system has 2 characters length-limit for Payment Type/Transaction Type when creating ARS Receipts and ARS Transactions File. This has caused the system not able to send any TTC 545 and TTC 547 transactions to ARS since these transaction types has length of 3 characters. Below describe changes to generate a one-time Receipt and Transaction files to include the missing transactions for ARS.

2.10.2 Description of Change

Create an ARS Receipt File and an ARS Transaction File to include all TTC 545 and 547 transactions that were processed by TTC Weekly Mass Upload. The file will be fixed length text format and will be delivered to current ARS receiving file locations. These files will also be in old format – without additional fields requested in this SCR.

2.10.3 Estimated Number of Records Impacted/Performance

Approximately 120,000 for each file.

2.11 Reports – Monthly TTC Account Referral Status Report

2.11.1 Overview

Implement a new scheduled Monthly TTC Account Referral Status Report that will provide details on the monthly Recovery Account referrals to TTC.

2.11.2 Monthly TTC Account Referral Status Report Mockup

CalSAWS **Monthly TTC Referral Account Status Report**

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020
Summary

	Total Claims	Total Recovery Accounts	Total Cases	Total Referral Amount	Total Unique Referral Amount
Grand Total	**2,624**	**2,529**	**1,961**	**$2,171,876.34**	**$1,085,938.17**

Program	Cause	Department Code	Total Claims	Total Recovery Accounts	Total Cases	Total Referral Amount	Total Unique Referral Amount
CalWorks	CalWorks Admin Error	14051	210	199	147	$167,385.00	$83,692.50
CalWorks	CalWorks Household Erro	14052	305	287	235	$488,729.35	$244,364.68
CalFresh	CalFresh Admin Error	14061	1,055	1,001	753	$476,376.68	$238,188.34
CalFresh	CalFresh Household Error	14062	1,041	1,030	817	$1,022,808.06	$511,404.03
CalWorks	CalWorks Civil Judgment I	14087	0	0	0	$0.00	$0.00
CalFresh	CalFresh Civil Judgment R	14088	13	12	9	$16,577.25	$8,288.63

Summary | Details | Exceptions

Figure 2.11.1 – Monthly TTC Account Referral Status Report - Summary Sheet Mockup

CalSAWS **Monthly TTC Referral Account Status Report**

Los Angeles
Run Date: OCT-10-20 08:15 PM
Report Month: 09/2020
TTC Referral Details

	Record Count	Original Balance	Referral Amount
Total	5	$1,919.00	$1,275.32

Claim #	TTC Account #	Debtor #	Responsible Party	Recovery Account #	Recovery Account Creation Date	Cause	Case Number	Case Name	Program	Original Balance	Referral Amount	Discontinue Date
016429253	30845514	45125689	John Doe	26109041	10/15/2020	Cash - Admin C	B22X686	John Doe	AAP	$219.00	$219.00	9/9/1999
22541258	30850042	89546578	Bartholomew Bart	22541258	03/01/2020	Cash - Custom	L993419	Bartholomew B	CalWorks	$569.00	$44.55	9/9/1999
21102031	13205803	63872955	Joy Feliz	21102031	11/30/2020	CalFresh - Pote	B0R7P36	Joy Feliz	CalFresh	$478.00	$478.00	9/9/1999
21102031	30842917	31687255	Happy Feliz	21102031	11/30/2020	CalFresh - Pote	B0R7P36	Joy Feliz	CalFresh	$478.00	$478.00	9/9/1999
017429233	30826486	38472892	Jessica Rabbit	26546546	08/24/2019	CalFresh - IHE	B12V563	Jessica Rabbit	CalFresh	$175.00	$55.77	9/9/1999

Summary | **Details** | Exceptions

Figure 2.11.2 – Monthly TTC Account Referral Status Report - Details Sheet Mockup

CalSAWS **Monthly TTC Referral Account Status Report**

Los Angeles
Run Date: OCT-10-20 08:15 PM
Report Month: 09/2020
TTC Exception Details

	Record Count	Original Balance	Referral Amount
Total	2	$150.00	$256.00

Claim #	Responsible Party	Recovery Account #	Recovery Account Creation Date	Cause	Case Number	Case Name	Program	Original Balance	Referral Amount	Discontinue Date
22456212	Joe Doe	22456212	09/09/2020	Cash - Admin Cause	T0636CD	Joe Doe	CalWorks	$100.00	$100.00	9/9/1999
017438255	Moe Doe	24109048	5/21/2020	Cash - Customer Ca	B1M6J04	Moe Doe	CalFresh	$50.00	$156.00	9/9/1999

Summary | Details | **Exceptions**

Figure 2.11.3 – Monthly TTC Account Referral Status Report - Exceptions Sheet Mockup

2.11.3 Description of Change

1. Create a Monthly TTC Account Referral Status Report.

2. Generate this report monthly on the 10th business day for all Responsible Parties that were referred to TTC that month – e.g., on the 10th business day of December the report will be generated and populated with information on the referrals that were sent to TTC in the December Referral File.

   Technical Note: The population for this report can be found using the TTC_ACCT table. When a Responsible Party is referred to TTC, a record is created in this table. The TTC_ACCT_NUM_IDENTF field is initially left blank then later updated with the respective TTC account number once provided by TTC. If an exception occurs, the TTC_ACCT_NUM_IDENTIF will not be updated and remain blank. The report will include all TTC_ACCT records with a CREATED_ON date in the report month.

3. The report will contain three sheets: 'Summary', 'Details' and 'Exceptions'.
   a. The Summary sheet will contain summary information on the number of referrals made that report month.
   b. The Details sheet will contain detailed information on all Responsible Parties referred that report month that were successfully updated with a TTC account number in CalSAWS (TTC_ACCT.TTC_ACCT_NUM_IDENTF)
   c. The Exceptions sheet will contain detailed information on all Responsible Parties referred that report month that were not successfully updated with a TTC account number in CalSAWS (TTC_ACCT.TTC_ACCT_NUM_IDENTF) due to an error.

4. The report will have the following columns defined in the tables below:

Summary Sheet Column Definitions

Column Name	Column Description
Program	The program associated with a Recovery Account.
Cause	The current cause type of a Recovery Account.
Department Code	The TTC department code associated with a Recovery Account.
Total Claims	Total number of claim records referred to TTC for the report month grouped by program, cause, and department code. Note: There is a claim record for each Responsible Party associated with a Recovery Account. For example, if a Recovery Account with three responsible parties is referred to TTC, there would be three claim records reflected in this report for that Recovery Account.
Total Recovery Accounts	Total number of unique Recovery Accounts referred to TTC for the report month grouped by program, cause, and department code.
Total Cases	Total number of unique cases referred to TTC for the report month grouped by program, cause and department code.
Total Referral Amount	The sum of the referral amount for all Responsible Parties referred to TTC for collection for the report month grouped by program, cause and department code. Format: $XX.XX

Total Unique Referral Amount	The sum of the referral amount for all unique Recovery Accounts referred to TTC for collection for the report month grouped by program, cause and department code. Format: $XX.XX
Grand Total – Total Claims	Total number of Responsible Parties referred to TTC for the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Grand Total – Total Recovery Accounts	Total number of unique Recovery Accounts referred to TTC for the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Grand Total – Total Cases	Total number of unique cases referred to TTC for the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Grand Total – Total Referral Amount	The sum of the referral amount for all Responsible Parties referred to TTC for collection Note: This is a dynamic total and will change based on the filters selected on this sheet.
Grand Total – Total Unique Referral Amount	The sum of the referral amount for all unique Recovery Accounts referred to TTC for collection Note: This is a dynamic total and will change based on the filters selected on this sheet.

Details Sheet Column Definitions

Column Name	Column Description
Total – Record Count	Total number of Responsible Parties that were successfully updated in CalSAWS with their respective TTC account number in the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Total – Original Balance	Sum of the original balance for all Responsible Parties that were successfully updated in CalSAWS with their respective TTC account number in the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Total – Referral Amount	Sum of the referral amount for all Responsible Parties that were successfully updated in CalSAWS with their respective TTC account number in the report month.

	Note: This is a dynamic total and will change based on the filters selected on this sheet.
Claim #	The claim number associated with the Recovery Account. If the Recovery Account has a LEADER Claim Number, that is the Claim #. Otherwise, it is the Recovery Account #.
TTC Account Number	The TTC Account number assigned to the Responsible Party.
Debtor #	The unique RevQ Debtor Identifier associated with the Responsible Party. Note: This is new information being added to the TTC Collections File per the requests outlined in Section 2.3 and will be stored in the TTC_ACCT table.
Responsible Party	The responsible party associated with the Recovery Account. Note: There may be multiple Responsible Parties for a Recovery Account. If this is the case, each Responsible Party will have their own claim record and TTC account number.
Recovery Account #	The unique ID number of the Recovery Account.
Recovery Account Creation Date	The date the Recovery Account was created in the CalSAWS system. Format: MM/DD/YYYY
Cause	The current cause type associated with the Recovery Account.
Case Number	The case number associated with the Recovery Account.
Case Name	The case name associated with the Recovery Account.
Program	The program associated with the Recovery Account.
Original Balance	The original balance of the Recovery Account. Format: $X.XX
Referral Amount	The amount being referred to TTC in the month of the report. Format: $X.XX
Discontinue Date	The date aid was terminated for the program associated with the Recovery Account. Format: MM/DD/YYYY

Exception Sheet Column Definitions

Column Name	Column Description

Total – Record Count	Total number of Responsible Parties that were unsuccessfully updated in CalSAWS with their respective TTC account number in the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Total – Original Balance	Sum of the original balance for all Responsible Parties that were unsuccessfully updated in CalSAWS with their respective TTC account number in the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Total – Referral Amount	Sum of the referral amount for all Responsible Parties that were unsuccessfully updated in CalSAWS with their respective TTC account number in the report month. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Claim #	The claim number associated with the Recovery Account. If the Recovery Account has a LEADER Claim Number, that is the Claim #. Otherwise, it is the Recovery Account #.
Responsible Party	The responsible party associated with the Recovery Account. Note: There may be multiple Responsible Parties for a Recovery Account. If this is the case, each Responsible Party will have their own claim record and TTC account number.
Recovery Account #	The unique ID number of the Recovery Account.
Recovery Account Creation Date	The date the Recovery Account was created in the CalSAWS system. Format: MM/DD/YYYY
Cause	The current cause type associated with the Recovery Account.
Case Number	The case number associated with the Recovery Account.
Case Name	The case name associated with the Recovery Account.
Program	The program associated with the Recovery Account.
Original Balance	The original balance of the Recovery Account. Format: $X.XX
Referral Amount	The amount being referred to TTC in the month of the report. Format: $X.XX
Discontinue Date	The date aid was terminated for the program associated with the Recovery Account.

	Format: MM/DD/YYYY

Please see Supporting Documents for the report template mockup.

2.11.4 Report Location

- **Global:** Reports
- **Local:** Scheduled
- **Task:** Fiscal

2.11.5 Counties Impacted

Only LA county will be impacted by the changes outlined in this section.

2.11.6 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
MonthlyTTCAccountReferralStatusReport	This right gives access to view the Monthly TTC Account Referral Status Report	Monthly TTC Account Referral Status Report

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Monthly TTC Account Referral Status Report	This group gives access to view the Monthly TTC Account Referral Status Report	System Administrator, Fiscal Staff, Fiscal Supervisor, Fiscal Supervisor – LAC, Master Report Listing

2.11.7 Report Usage/Performance

This report is expected to be viewed as much as the TTC Mass Upload Monthly Report which is viewed 3-4 times per month.

2.12 Reports – TTC Mass Upload Collections Monthly Report

2.12.1 Overview

The TTC Mass Upload Collections Monthly Report is a scheduled report that displays a monthly summary of collections successfully or unsuccessfully uploaded to CalSAWS in the Mass Upload process. Update the report to include a column for ‘Recovery Account Number’ on the Details and Exceptions sheets and a column for ‘Payment Type Description’ on all three sheets of the report. Also update the report logo and the heading of the Exceptions sheet to correct the spelling error in “Exceptions”.

2.12.2 TTC Mass Upload Collections Monthly Report Mockup

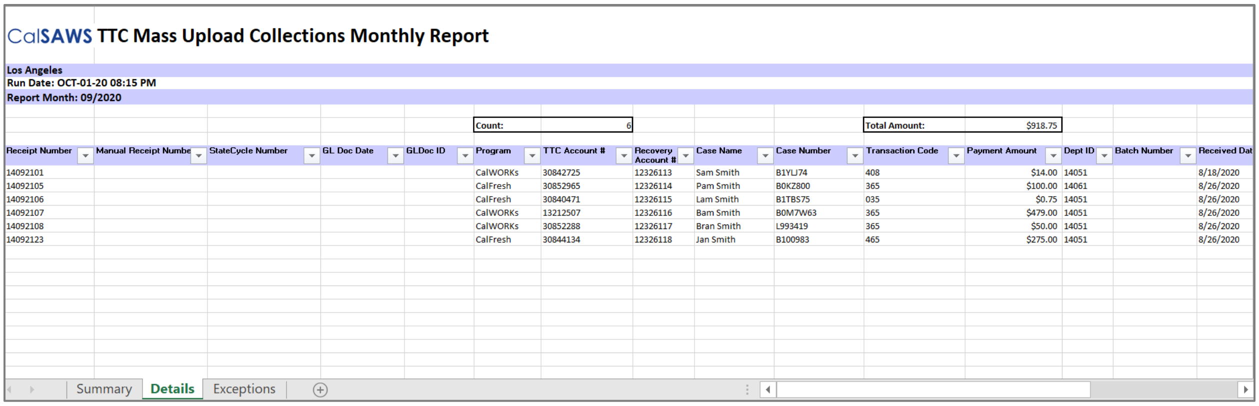
CalSAWS **TTC Mass Upload Collections Monthly Report**

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020

Dept ID	Transaction Code	Payment Type Description	Number of Records	Amount	Number of Exception Records	Exception Amount
14051	035	Mail-In Pymt	1	$0.75		
14051	059				1	($479.00)
14051	365	Card Pymt	2	$529.00		
14051	408	OCA Pymt-USCB	1	$14.00	1	($77.00)
14051	465	eCheck Pymt	1	$275.00		
14061	035	eCheck Pymt			1	($2.50)
14061	365	Card Pymt	1	$100.00		

Summary | Details | Exceptions

Figure 2.12.1 – Mass Upload Collections Monthly Report – Summary Sheet Mockup



CalSAWS TTC Mass Upload Collections Monthly Report

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020

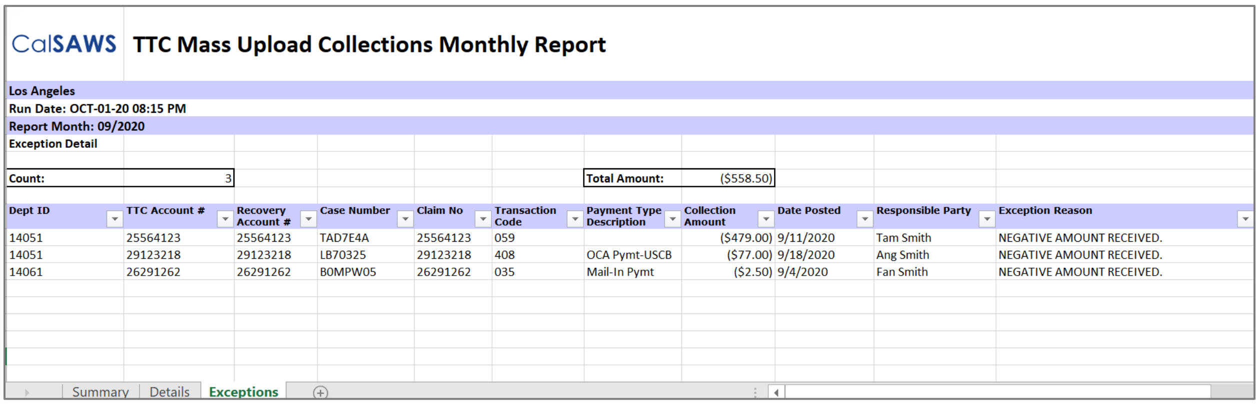
Count: 6

Total Amount: $918.75

Receipt Number	Manual Receipt Numbe	StateCycle Number	GL Doc Date	GLDoc ID	Program	TTC Account #	Recovery Account #	Case Name	Case Number	Transaction Code	Payment Amount	Dept ID	Batch Number	Received Dat
14092101					CalWORKs	30842725	12326113	Sam Smith	B1YLJ74	408	$14.00	14051		8/18/2020
14092105					CalFresh	30852965	12326114	Pam Smith	B0KZ800	365	$100.00	14061		8/26/2020
14092106					CalFresh	30840471	12326115	Lam Smith	B1TBS75	035	$0.75	14051		8/26/2020
14092107					CalWORKs	13212507	12326116	Bam Smith	B0M7W63	365	$479.00	14051		8/26/2020
14092108					CalWORKs	30852288	12326117	Bran Smith	L993419	365	$50.00	14051		8/26/2020
14092123					CalFresh	30844134	12326118	Jan Smith	B100983	465	$275.00	14051		8/26/2020

Summary | Details | Exceptions

Figure 2.12.2 – Mass Upload Collections Monthly Report – Details Sheet Mockup



CalSAWS TTC Mass Upload Collections Monthly Report

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020
Exception Detail

Count: 3

Total Amount: ($558.50)

Dept ID	TTC Account #	Recovery Account #	Case Number	Claim No	Transaction Code	Payment Type Description	Collection Amount	Date Posted	Responsible Party	Exception Reason
14051	25564123	25564123	TAD7E4A	25564123	059		($479.00)	9/11/2020	Tam Smith	NEGATIVE AMOUNT RECEIVED.
14051	29123218	29123218	LB70325	29123218	408	OCA Pymt-USCB	($77.00)	9/18/2020	Ang Smith	NEGATIVE AMOUNT RECEIVED.
14061	26291262	26291262	B0MPW05	26291262	035	Mail-In Pymt	($2.50)	9/4/2020	Fan Smith	NEGATIVE AMOUNT RECEIVED.

Summary | Details | Exceptions

Figure 2.12.3 – Mass Upload Collections Monthly Report – Exceptions Sheet Mockup

2.12.3 Description of Change

1. Add a column for 'Recovery Account #' to the Details and Exceptions sheets. Insert the column directly after the 'TTC Account #' column on both sheets.

Column Name	Column Description
Recovery Account #	The unique identifier of the Recovery Account associated with the collection record.

2. Add a column for 'Payment Type Description' to the Summary, Details and Exceptions sheets. On the Summary and Exceptions sheets, Insert the column directly after the 'Transaction Code' columns. On the Details sheet, insert the column directly after the 'Payment Type' column.

Column Name	Column Description
Payment Type Description	The description of the payment type for the collection record. The possible values for this field can be found in the Payment Type Description Mapping Table in the Appendix. **Technical Note:** This value is mapped from the TTC Transaction Code (TTC_ACCT_TRANSACT. FILE_TRANSACT_TYPE_IDENTIF) associated with the record per the mapping rules in the Appendix.

3. Update the logo to the new CalSAWS logo and the heading of the Exceptions sheet to correct the spelling error in "Exceptions" which is currently spelled "Excepitons".

Please see Supporting Documents for the report template mockup.

2.12.4 Report Location

- **Global:** Reports
- **Local:** Scheduled
- **Task:** Fiscal

2.12.5 Counties Impacted

Only LA county will be impacted by the changes outlined in this section.

2.12.6 Security Updates

There are no updates to security for this report.

2.12.7 Report Usage/Performance

There are no updates to report usage/performance.

2.13 Reports – TTC Mass Upload Collections Weekly Report

2.13.1 Overview

The TTC Mass Upload Collections Weekly Report is a scheduled report that displays a weekly summary of collections successfully or unsuccessfully uploaded to CalSAWS in the Mass Upload process. Update the report to include a column for 'Recovery Account Number' on the Details and Exceptions sheets and a column for 'Payment Type Description' on all three sheets of the report. Also update the report logo and the heading of the Exceptions sheet to correct the spelling error in "Exceptions".

2.13.2 TTC Mass Upload Collections Weekly Report Mockup

CalSAWS TTC Mass Upload Collections Weekly Report

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020

Dept ID	Transaction Code	Payment Type Description	Number of Records	Amount	Number of Exception Records	Exception Amount
14051	035	Mail-In Pymt	1	$0.75		
14051	059				1	($479.00)
14051	365	Card Pymt	2	$529.00		
14051	408	OCA Pymt-USCB	1	$14.00	1	($77.00)
14051	465	eCheck Pymt	1	$275.00		
14061	035	eCheck Pymt			1	($2.50)
14061	365	Card Pymt	1	$100.00		

Summary | Details | Exceptions

Figure 2.13.1 – Mass Upload Collections Weekly Report – Summary Sheet Mockup

CalSAWS TTC Mass Upload Collections Weekly Report

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020

Count: 6 **Total Amount:** $918.75

Receipt Number	Manual Receipt Numbe	StateCycle Number	GL Doc Date	GLDoc ID	Program	TTC Account #	Recovery Account #	Case Name	Case Number	Transaction Code	Payment Amount	Dept ID	Batch Number	Received Dat
14092101					CalWORKs	30842725	12326113	Sam Smith	B1YLJ74	408	$14.00	14051		8/18/2020
14092105					CalFresh	30852965	12326114	Pam Smith	B0KZ800	365	$100.00	14061		8/26/2020
14092106					CalFresh	30840471	12326115	Lam Smith	B1TBS75	035	$0.75	14051		8/26/2020
14092107					CalWORKs	13212507	12326116	Bam Smith	B0M7W63	365	$479.00	14051		8/26/2020
14092108					CalWORKs	30852288	12326117	Bran Smith	L993419	365	$50.00	14051		8/26/2020
14092123					CalFresh	30844134	12326118	Jan Smith	B100983	465	$275.00	14051		8/26/2020

Summary | Details | Exceptions

Figure 2.13.2 – Mass Upload Collections Weekly Report – Details Sheet Mockup

CalSAWS TTC Mass Upload Collections Weekly Report

Los Angeles
Run Date: OCT-01-20 08:15 PM
Report Month: 09/2020
Exception Detail

Count: 3 **Total Amount:** ($558.50)

Dept ID	TTC Account #	Recovery Account #	Case Number	Claim No	Transaction Code	Payment Type Description	Collection Amount	Date Posted	Responsible Party	Exception Reason
14051	25564123	25564123	TAD7E4A	25564123	059		($479.00)	9/11/2020	Tam Smith	NEGATIVE AMOUNT RECEIVED.
14051	29123218	29123218	LB70325	29123218	408	OCA Pymt-USCB	($77.00)	9/18/2020	Ang Smith	NEGATIVE AMOUNT RECEIVED.
14061	26291262	26291262	B0MPW05	26291262	035	Mail-In Pymt	($2.50)	9/4/2020	Fan Smith	NEGATIVE AMOUNT RECEIVED.

Summary | Details | Exceptions

Figure 2.13.3 – Mass Upload Collections Weekly Report – Exceptions Sheet Mockup

2.13.3 Description of Change

1. Add a column for 'Recovery Account #' to the Details and Exceptions sheets. Insert the column directly after the 'TTC Account #' column on both sheets.

Column Name	Column Description
Recovery Account #	The unique identifier of the Recovery Account associated with the collection record.

2. Add a column for 'Payment Type Description' to the Summary, Details and Exceptions sheets. On the Summary and Exceptions sheets, Insert the column directly after the 'Transaction Code' columns. On the Details sheet, insert the column directly after the 'Payment Type' column.

Column Name	Column Description
Payment Type Description	The description of the payment type for the collection record. The possible values for this field can be found in the Payment Type Description Mapping Table in the Appendix. **Technical Note:** This value is mapped from the TTC Transaction Code (TTC_ACCT_TRANSACT.FILE_TRANSACT_TYPE_IDENTIF) associated with the record per the mapping rules in the Appendix.

3. Update the logo to the new CalSAWS logo and the heading of the Exceptions sheet to correct the spelling error in "Exceptions" which is currently spelled "Excepitons".

Please see Supporting Documents for the report template mockup

2.13.4 Report Location

- **Global:** Reports
- **Local:** Scheduled
- **Task:** Fiscal

2.13.5 Counties Impacted

Only LA county will be impacted by the changes outlined in this section.

2.13.6 Security Updates

There are no updates to security for this report.

2.13.7 Report Usage/Performance

There are no updates to report usage/performance.

2.14 Database Change

Add a new column on the TTC_ACCT table:

1. RevQ Debtor Identifier – This column is to store the Identifier for a responsible party in the RevQ system.

2.15 CTCRs

Create new category in CODE_DETL based on the 'Payment Type Description Mapping.xlsx'. This mapping will be used to display 'Payment Type Description' on the TTC Mass Upload Reports (Weekly and Monthly).

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Fiscal	Field definitions for outbound TTC Referal.	TTC Referal Definition.xlsx
2	Fiscal	Field definitions for inbound TTC Inventory	TTC Inventory Definition.xlsx
3	Fiscal	Field definitions for inbound TTC Collection	TTC Collection Definition.xlsx
4	Fiscal	Field definitions for outbound ARS files	ARS File Definition.docx
5	Reports	Monthly TTC Account Referral Status Report Mockup	Monthly TTC Account Referral Status Report

6	Reports	Security Matrix for Monthly TTC Account Referral Status Report	Security Matrix
7	Reports	Mass Upload Collections Monthly Report Mockup	TTC Mass Upload Collections Monthly R
8	Reports	Mass Upload Collections Weekly Report Mockup	TTC Mass Upload Collections Weekly Re
9	Fiscal	CTCRs	Payment Type Description Mapping.xlsx

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.11.3.2	The LRS shall identify and track the following recording and posting details: a. Posting date; b. Accrual month; c. Receipt number; d. TTC account number; ~~e. Journal voucher number;~~ f. Recording and posting locations; g. Invoice number; and h. Vendor ID.	Due to the TTC's collection system change from CARS to RevQ, CalSAWS system will be updated to align with TTC and ARS.

5 APPENDIX

The following table details the possible values for the new Payment Type Description column being added to the TTC Mass Upload Monthly and Weekly Reports. These values are mapped from TTC Transaction Code – e.g., a collection record with a Transaction Code of '386' will display 'Card Adj' for Payment Type Description.

Note: For any records with transaction codes that are not in this table, Payment Type Description will be blank.

Payment Type Description Mapping Table

TTC Transaction Code	Payment Type Description
386	Card Adj
376	Card Chargeback
365	Card Pymt
355	Card Pymt (IVR)
396	Card Refund
635	Cash Adj
459	Direct Pymt
465	eCheck Pymt
486	eCheck Pymt Adj
496	eCheck Refund
536	eCheck Return
538	FTB
559	Library Mtls Return

035	Mail-In Pymt
634	Non-Cash Adj
436	NSF Pymt
409	OCA Pymt-LB
007	OCA Pymt-LB 123111
408	OCA Pymt-USCB
836	OCA Rev-PB Juv Reimb
835	OCA-PB Juv Reimb
735	Susp Pymt
545	TOP TI (17.5%)
535	TOP TI (35%)
537	TOP TI (65%)
547	TOP TI (82.5%)
435	Walk-In Pymt

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200332

DDCR 5039: Capture Electronic Signatures in the CalSAWS

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	G. Limbrick; V. Bathala; J. Dobbs; R. Dela Cruz
	Reviewed By	J. Kuester; M. Wu, P. Sridharan, R. Devidi

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/01/2020	0.1	Draft	G. Limbrick; V. Bathala; J. Dobbs; R. Dela Cruz

Table of Contents

1 OVERVIEW

This SCR Migrates C-IV functionality to allow a customer to sign a document electronically via text message or via the IVR (Interactive Voice Response system) and to track a customer's electronic signature within CalSAWS.

1.1 Current Design

Customers can create a username and pin on the Electronic Signature Registration page; customers can then e-sign (Check to Sign only) for specific documents on the Electronic Signature page. The Security Questions page and the Reset Customer PIN page provide support for resetting a forgotten PIN.

1.2 Requests

Replace the CalSAWS E-Sign (Check to Sign only) functionality with the C-IV system Check to Sign and CW/CF e-Sign functionality. **Note**: the email e-Sign functionality will remain unavailable until SCR CA-223502.

1.3 Overview of Recommendations

The e-Signature Registration functionality (the 'e-Signature Registration' Task navigation link, the 'Electronic Signature Registration List' page, the 'Electronic Signature Registration' page, the 'Security Questions' page, and the 'Reset Customer Pin' page) will be removed.

On the Document Detail page, remove the 'Staff ID' and 'Print Reason' fields and add the document 'Variation', 'Initial Print Date' and 'Print Status' fields. Update the look and feel of the Document Detail page to the more modern C-IV look and feel. Remove YBN specific Self Service Portal references.

The Electronic Signature page in CalSAWS will be updated to allow the worker to request a signature using Text Message or the IVR in addition to an updated Check to Sign option (IVR option will only be available for Counties using the IVR solution that was migrated from C-IV).

Please see the attached list for which forms will have which Electronic Signature functionality enabled.

When "Text" is selected for 'Signature Capture Type' the CalSAWS Text Messaging solution will send an English or Spanish text message to the customer for a Request, Response, Reminder, Expiration or Cancelation of the Electronic Signature Request.

When "IVR" is selected for 'Signature Capture Type' the CalSAWS system will generate a Capture Code; the worker will give the Capture Code to the customer with instructions to call the IVR. The IVR application will collect the callers Date of Birth and Capture Code and send them to CalSAWS for verification via web services migrated to CalSAWS from C-IV with SCR CA-207026.

Update the e-Signature Document Detail page, allowing the Worker to view the Signature History; rename the page to 'Electronic Signature Document Detail'.

When a Request or Reminder for a Signature is sent to the customer, a record will be viewable on the Customer Contact History page. Additionally, when the Signature is Received, a record will be viewable on the page.

Add three Automated Actions that will allow users to configure Task creation attributes when an e-Signature Request expires, is undeliverable or an e-Signature is received.

1.4 Assumptions

1. Electronic Signatures via email will be implemented with SCR CA-223502.
2. IVR web services to interact with CalSAWS will be migrated from C-IV with SCR CA-207026 in the same or a prior release.
3. The IVR Electronic Signature application will be available for the same hours as existing IVR applications.
4. The Electronic Signature IVR system will be available in English and Spanish only.
5. There will not be an IVR outbound campaign or reminder calls for expiring IVR Electronic Signatures.
6. IVR Reporting will be through CalSAWS Reports.
7. Reports to support Electronic Signatures will be created with SCR CA-223498.
8. The Electronic Signature indicator for the ARC 1/ARC 1A will be added with SCR **CA-49395**.
9. The Electronic Signature indicator for the CF 10 will be added with SCR **CA-216444**.
10. The Electronic Signature indicator for the CW 2219 will be added with SCR **CA-49617**.
11. The Electronic Signature indicator for the CMSP 202 will be added with SCR **CA-216515**.
12. The Electronic Signature indicator for the CMSP 203 will be added with SCR **CA-216495**.
13. The Electronic Signature indicator for the DPA 479 will be added with SCR **CA-205030**.
14. The Electronic Signature indicator for the CSF 139 (formerly the IVR 100) will be added with SCR **CA-216117**.
15. The Electronic Signature indicator for the MC 05 will be added with SCR **CA-216536**.
16. The Electronic Signature indicator for the MC 223 will be added with SCR **CA-216642**.
17. The Electronic Signature indicator for the TEXT 100 will be added with SCR **CA-216118**.
18. The Electronic Signature indicator for the CW 107 (formerly VER 103) will be added with SCR **CA-215148**.
19. The Electronic Signature indicator for the CW 106 (formerly the VER 106 CIV) will be added with SCR **CA-215146**.
20. The Electronic Signature indicator for the Medi-Cal Redetermination Packets will be updated with SCR **CA-216432**.

21. SCR **CA-224388** will update the attestation form generated from the Electronic Signature page.
22. The electronic signature for additional forms will be implemented with SCR **CA-224413.**

2 RECOMMENDATIONS

2.1 Remove the e-Signature Registration functionality

2.1.1 Overview

The e-Signature Registration functionality (the 'e-Signature Registration' Task navigation link, the 'Electronic Signature Registration List' page, the 'Electronic Signature Registration' page, the 'Security Questions' page, and the 'Reset Customer Pin' page) will be removed.

2.1.2 Description of Changes

1. Remove the 'e-Signature Registration' Task navigation link.
   Technical Note: This link is on the eApplicationTaskNav.jsp and the eApplicationPostTaskNav.jsp.
2. Remove the Electronic Signature Registration List page.
   a. Remove the Electronic Signature Registration page (a child page)
   b. Remove the Security Questions page (a child page)
   c. Remove the Reset Customer Pin page (a child page)

2.1.3 Page Location

- **Global: Case Info**
- **Local: e-Tools**
- **Task: e-Signature Registration**

2.1.4 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
ElectronicSignatureRegistrationListView	(to be removed)	

Security Right	Right Description	Right to Group Mapping
ElectronicSignatureRegistrationEdit	(to be removed)	
SecurityQuestionsEdit	(to be removed)	
ResetPINEdit	(to be removed)	

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Electronic Signature Registration List View	(to be removed)	
Electronic Signature Registration Edit	(to be removed)	

2.1.5 Page Mapping

Update page mapping with removed pages and fields.

2.2 Document Detail

2.2.1 Overview

On the Document Detail page, remove the 'Staff ID' and 'Print Reason' fields and add the document 'Variation', 'Initial Print Date' and 'Print Status' fields. Update the look and feel of the Document Detail page to the more modern C-IV look and feel. Remove YBN specific Self Service Portal references.

2.2.2 Document Detail Mockup

Figure 2.2.2.1- Document Detail

2.2.3 Description of Changes

1. Update the 'Sign' button:
   a. Re-label the button as: 'eSign'
   b. Move the button (when displayed) to the pages main top and bottom button rows
   c. Update the page logic to change when the 'eSign' button is displayed:
      i. Show the button for forms able to be signed with e-Sign functionality (telephonically or electronically signable) according to the attached list of forms
2. Update the 'View' button:
   a. Re-label the button as: 'View eSign'
   b. Move the button (when displayed) to the pages main top and bottom button rows
3. Remove the 'e-Sign' field label.
4. Update the 'Locally' button:
   a. Re-label the button as: 'Reprint Locally'
   b. Move the button (when displayed) to the pages main top and bottom button rows
5. Update the 'Centrally' button:

    a. Re-label the button as: ‘Reprint Centrally’
    b. Move the button (when displayed) to the pages main top and bottom button rows
6. Remove the ‘Reprint Option’ field label.
7. Add a ‘Document Information’ title bar to the page’s main panel.
8. Re-label the ‘Document Name’ field as ‘Name’.
9. Add a ‘Number’ field; show the document number in this field.
10. Remove the ‘Print/Reprint Date’ field.
11. Remove the ‘Print Reason’ field.
12. Remove the ‘Staff ID’ field.
13. Re-label the ‘YBN’ field as ‘Self-Service Portal’.
14. Add a ‘Program’ field; display the program associated to the document in this field.
15. Add a Print Details table
    a. Add headers for:
        i. ‘Variation’
            1. Show as a hyperlink to open the pdf form in a new window
            2. Show as “Final” for the first table row
            3. If the selected document has a related document record, then:
                a. If the related document is in the Overridden status show an “Original Non-Appended” Variation (table row)
                b. If the related document is in the Translated status show an “English Version” Variation (table row)
        ii. ‘Language’
            1. The document language
        iii. ‘Initial Print Date’
            1. The initial Central Print Date of the document; BLANK for a related document row
        iv. ‘Last Central Print Date’
            1. The most recent Central Print date of the document; BLANK for a related document row
        v. ‘Print Status’
            1. The Status of the document; BLANK for a related document row
               Technical Note: This is the Status from the GENERATE_DOC table

2.2.4 Page Location

- **Global: Client Corresp.**
- **Local: Distributed Documents (search then click the ‘Details’ button)**
- **Task: N/A**

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

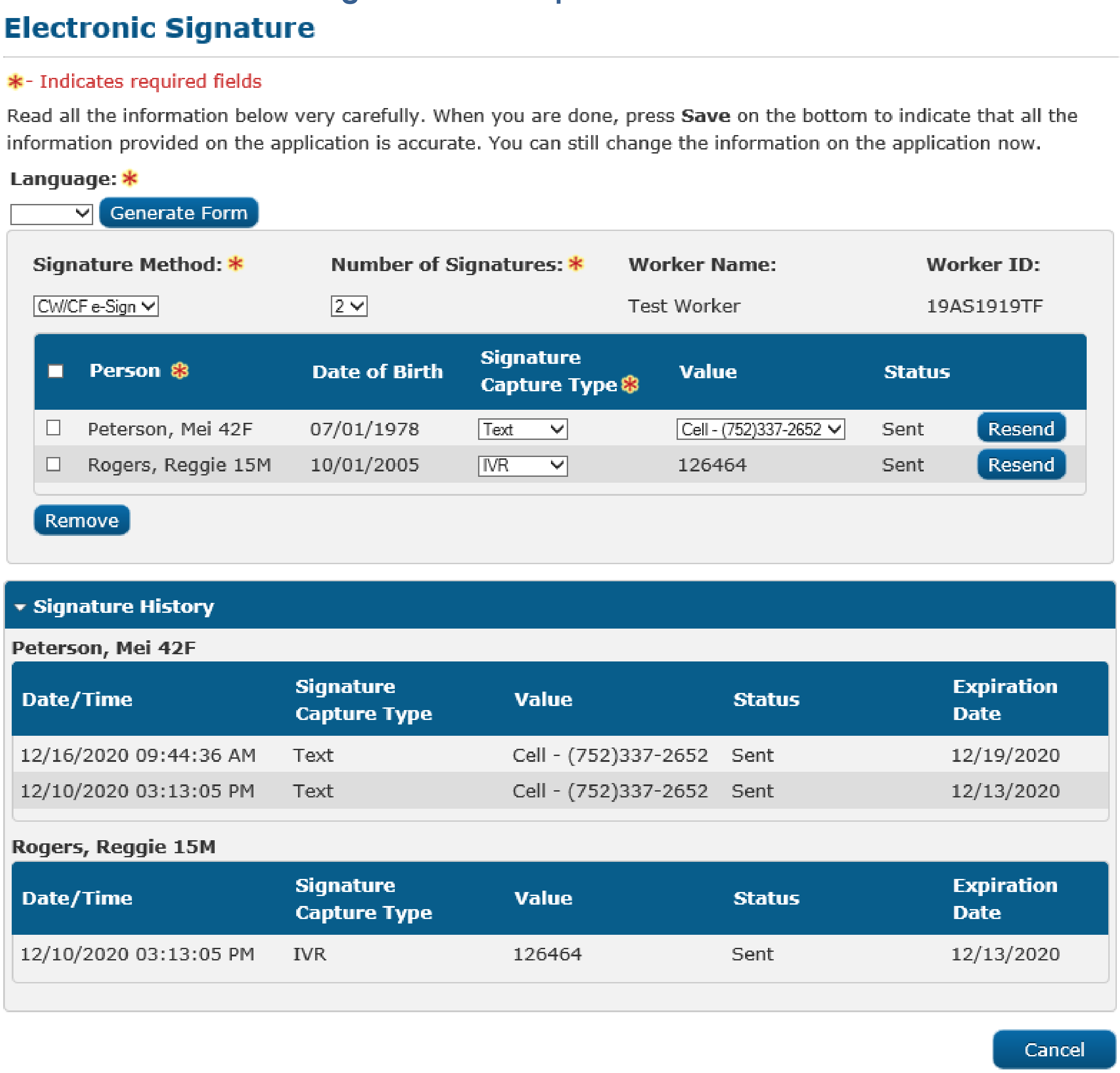
Update the page mapping with new and updated fields.

2.3 Electronic Signature Page

2.3.1 Overview

The Electronic Signature page in CalSAWS will be updated to allow the worker to request a signature using Text Message, or the IVR (IVR option will only be available for Counties using the IVR solution that was migrated from C-IV) in addition to an updated Check to Sign option.

2.3.2 Electronic Signature Mockups



Electronic Signature

*- Indicates required fields

Read all the information below very carefully. When you are done, press **Save** on the bottom to indicate that all the information provided on the application is accurate. You can still change the information on the application now.

Language: *

Generate Form

Signature Method: *	Number of Signatures: *	Worker Name:	Worker ID:
CW/CF e-Sign	2	Test Worker	19AS1919TF

	Person *	Date of Birth	Signature Capture Type *	Value	Status	
☐	Peterson, Mei 42F	07/01/1978	Text	Cell - (752)337-2652	Sent	Resend
☐	Rogers, Reggie 15M	10/01/2005	IVR	126464	Sent	Resend

Remove

Signature History

Peterson, Mei 42F

Date/Time	Signature Capture Type	Value	Status	Expiration Date
12/16/2020 09:44:36 AM	Text	Cell - (752)337-2652	Sent	12/19/2020
12/10/2020 03:13:05 PM	Text	Cell - (752)337-2652	Sent	12/13/2020

Rogers, Reggie 15M

Date/Time	Signature Capture Type	Value	Status	Expiration Date
12/10/2020 03:13:05 PM	IVR	126464	Sent	12/13/2020

Cancel

Figure 2.3.2.1 - Electronic Signature (Request Sent)

Figure 2.3.2.2 - Electronic Signature (Check to Sign)

2.3.3 Description of Changes

1. Update the instructions at the top of the page:
    a. Add the required field indicator and required field instructions: “- Indicates required fields”
    b. Update the existing instructions at the top of the page to: “Read all the information below very carefully. When you are done, press **Save** on the bottom to indicate that all the information provided on the application is accurate. You can still change the information on the application now.”
2. Add a ‘Language’ dropdown:
    a. Add the Required Field indicator
    b. Add options for generating the Telephonic Signature Declaration:
        i. Blank/Empty (default)
        ii. “English”
        iii. “Spanish”

c. Add Validation to the Language dropdown: if the 'Generate Form' button is pressed and no language was selected, show a validation message as: "Please select a Language"

3. Add a 'Generate Form' button; this button will open the Telephonic Signature Declaration pdf form, in a new browser window, in the selected language.
4. Remove the 'Check to Sign' field label and checkbox.
5. Add a 'Signature Method' dropdown with a required field indicator:
    a. Add options for the completing the Electronic Signature:
        i. "-Select-": (default)
        ii. "Check to Sign": This option allows the worker to sign the document on behalf of the customer(s)
        iii. "CW/CF e-Sign": This option allows the worker to send a Request for a signature to the customer(s)
6. Remove the 'Person' dropdown.
7. Remove the 'User Name' field.
8. Remove the 'PIN' field.
9. Add a 'Number of Signatures' dropdown:
    a. The dropdown contains the number of signatures required to complete the Electronic Signature:
        i. The worker may select either "1" or "2" depending on the signature requirement for the document
        ii. Default the dropdown to "1"
    b. Add logic so the changing the value will alter the number of rows available for signatures in the Person table (described below)
        i. If the user attempts to change the value from "2" to "1" while a customer is selected for both rows, both rows will remain
        ii. If both rows still have a person selected, upon saving, display a validation message as: "The number of signatures must match the number of people selected."
10. Add a 'Worker Name' field and field label; populate this field with the name of the worker saving the Electronic Signature.
11. Add a 'Worker Id' field; populate this field with the id of the worker saving the Electronic Signature.

Reposition the declaration statement "**I declare under penalty of perjury under the laws of the United States of America and the State of California that the information contained in this statement of facts is true, correct and complete."** (shown when "Check to Sign" is selected in 'Signature Method' dropdown) to below the 'Signature Method' dropdown:

12. Add a Person table with the following headers:
    a. CHECKBOX: Add a checkbox for selecting a row for removal
        i. Display this checkbox column only for saved records where "CW/CF e-sign" was selected in the 'Signature Method' dropdown
    b. 'Person'; add the required field indicator:

        i. If the person has a status of “Not Sent”, this field will show a dropdown. If the status is “Sent”, “Expired”, or “Received”, the field will show as static text
        ii. If the user selects “2” in the ‘Number of Signatures’ field and a person is selected in one row, the person will not be available in the dropdown for the other row; add all other persons on the case as selectable options formatted as: {LAST}“, ”{First}“ ”{Age}{Abreviated_Sex} i.e. “Doe, John 25M”
    c. ‘Date of Birth’: Populate this field with the date of birth of the related person
    d. ‘Check to Sign’: Show a checkbox to indicate that a signature is present for the person; only display this column when ‘Check to Sign’ is selected in the ‘Signature Method’ drop down
    e. ‘Signature Capture Type’; add the Required Field indicator:
        i. For an unsaved record: show this field as a dropdown with the following values to indicate the method to gather the customer’s signature:
            1. “-Select-” (default)
            2. “Text”
            3. “IVR”; show this option only for Counties using the IVR solution that was migrated from C-IV
        ii. For a previously saved record: populate the field with the most recent Signature Capture Type sent or when there are multiple Requests sent for the customer and a signature was received, populate with the type that the customer responded to
        iii. Only display this column when “CW/CF e-Sign” is selected in the ‘Signature Method’ dropdown
    f. ‘Value’:
        i. If “Text” is selected in the ‘Signature Capture Type’ dropdown:
            1. Show a dropdown with the customers contact phone numbers in the following format: “(<Phone Type>) – (XXX) XXX-XXXX”
            2. If the person has a status of “Not Sent”, this field will show a dropdown. If the status is “Sent”, “Expired”, or “Received”, the field will show as static text
        ii. If “IVR” is selected in the ‘Signature Capture Type’ dropdown, populate this field with IVR code after saving the page
        iii. Only display this column when “CW/CF e-Sign” is selected in the ‘Signature Method’ dropdown
    g. ‘Status’: Populate this field with the most recent Electronic Signature Request Status
        i. The “Not Sent” status displays before the signature Request is sent

    ii. The "Sent" status displays when there is an active signature Request for the customer
    iii. The "Sending Error" status displays when the system has failed to send the Text Message to the customer.
    iv. The "Expired" status displays when all signature Requests for the customer have expired
    v. The "Received" status displays when the signature Request has been received and validated
    vi. Only display this column when "CW/CF e-Sign" was selected in the 'Signature Method' dropdown for a saved record
  h. BLANK: use this column to display the 'Resend' button; this button will send a new signature Request to the customer
    i. Hide this button when the status of the Request is 'Received'
    ii. Only display this column when 'CW/CF e-Sign' was selected in the 'Signature Method' dropdown for a saved record

13. Add the 'Remove' button: This button will remove the data from selected row(s) with a status of 'Sent', 'Expired', 'Received', or 'Sending Error'.
    a. Removing data from a row will display the 'Save' button if it was not already present
    b. If data was removed and the Electronic Signature is saved, all existing signature Requests for the selected customer will be cancelled
    c. Show this button only for saved records where "CW/CF e-sign" was selected in the 'Signature Method' dropdown
14. Add the following instructions when the 'Check to sign' is selected in the 'Signature Method' dropdown : 'Please select the name of the person signing, click the above checkbox, and then click the **Save** button to electronically sign the document.'
15. Remove the 'Submit' button and add the 'Save' button:
    a. Show this button:
        i. When the 'Signature Method' is set to "Check to Sign" – or -
        ii. When 'Signature Method' is set to "CW/CF e-sign" and there is an unsent signature Request – or -
        iii. When a signature Request record is removed from the person table
    b. If 'Check to Sign' is the selected value in the 'Signature Method', the document will be signed when the 'Save' button is pressed
    c. If 'CW/CF e-Sign' is the selected value in the 'Signature Method', the document will be signed when all required signature responses are received.

i. Pressing the 'Save' button will save the response requirements for the document and cancel any removed signature Requests
ii. If a person has a status of "Not Sent", the signature Request will be sent (see sections 2.4 IVR Request for eSignature and 2.7 Real Time Text Message Request for eSignature)
iii. Add a record to the Customer Contact History page when a signature Request is sent
    1. The 'Date/Time' will be when the Request was sent to the customer. Clicking on this link will navigate the user to the Contact Detail page
    2. The 'Name' will be the Customer that the Request was sent to
    3. The 'Type' will be "Text" (the Signature Capture Type that was used to gather the Signature)
    4. The 'Reason' will be "Request for Electronic Signature"

16. Add the 'Signature History' panel.
    a. Display this panel only when "CW/CF e-Sign" is selected in the 'Signature Method' dropdown. This panel is collapsible and is collapsed by default
    b. Add a separate history section for each person who has had an initial signature Request sent
        i. Label each section with the Person information: formatted as: {LAST}", "{First}" "{Age}{Abreviated_Sex} i.e. "Doe, John 25M"
        ii. Add a table to each section with the following headers:
            1. 'Date/Time': Display the date and time an action has occurred
            2. 'Signature Capture Type': Display the method used to collect the signature
            3. 'Value': Populate this field with the Value as defined for the Person table
            4. 'Status': the status of the signature Request
                a. The "Sent" status displays when a signature Request is sent to the customer
                b. The "Sending Error" status displays when the system failed to send the Text Message to the customer
                c. The "Expired" status displays when the signature Request for the customer has expired
                d. The "Received" status displays when the signature Request has been received and validated
                e. The "Canceled" status displays if the worker cancels a customer's signature Request

        5. ‘Expiration Date’: Display the expiration date of the Request. This value will be three days after the signature Request is sent

17. Add the following validation messages:
    a. If the Signature Method is “Check to Sign” and any selected customer has an empty checkbox in the Check to Sign column, display the following validation message: “Check to Sign – Please click the checkbox to sign.”
    b. If the value in the Number of Signatures field does not match the number of customers selected, display the following validation message: “Number of Signatures – The number of signatures must match the number of people selected.”
    c. If the Signature Capture Type is “Text” and a text message could not be sent to the phone number displayed in the Value field, display the following validation message: “Value – The phone number selected could not receive the requested text message.”
    d. If the Signature Capture Type is “Text” and there is not a corresponding Value, display the following validation message: “Value – There is no Value for the selected Signature Capture Type.”
    e. If the Signature Capture Type is “IVR” and there is no Date of Birth, display the following validation message: “Date of Birth – This field is required for a Signature Capture Type of E-mail or IVR.”
18. Create an auto journal when requesting verification by the Worker, and if more than one Request is sent, create a journal entry for each customer.
    a. Category – All
    b. Type – Narrative
    c. Short Description – Electronic Signature Request Sent
    d. Long Description – A signature request has been generated for {Person Name} to complete the eSignature for a {Document Name}. {A Text Message with instructions was sent to {Phone Number}/{Person Name} was instructed to complete the eSignature through IVR}
19. Create an auto journal at expiration or successful verification of the signature.
    a. Category – All
    b. Type – Narrative
    c. Short Description – Electronic Signature Request {Received/Expired}
    d. Long Description – A signature request has {Expired/been Received} for {Person Name} to complete the eSignature for a {Document Name}.
20. Create an auto journal when a worker cancels/removes a Signature Request.
    a. Category – All

b. Type – Narrative
c. Short Description – Electronic Signature Request Cancelled
d. Long Description – A signature request has been canceled for {Person Name} to complete the eSignature for a {Document Name}.

21. Create an auto journal when a verification Reminder is sent by batch.
    a. Category – All
    b. Type – Narrative
    c. Short Description – Electronic Signature Request Reminder Sent
    d. Long Description – A signature request reminder has been generated for {Person Name} to complete the eSignature for a {Document Name}. A Text Message reminder with instructions was sent to {Phone Number}
22. Create an auto journal when a text message Request is undeliverable.
    a. Category – All
    b. Type – Narrative
    c. Short Description – Electronic Signature Request Undeliverable
    d. Long Description – A signature request is undeliverable for {Person Name} to complete the eSignature for a {Document Name}.

2.3.4 Page Location

- **Global: Client Corresp.**
- **Local: Distributed Documents** (search, then click the 'Details' button)
- **Task: N/A**

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

Update page mapping with new and updated fields.

2.3.7 Page Usage/Data Volume Impacts

N/A

2.4 IVR Request for eSignature

2.4.1 Overview

Workers in counties using the IVR solution that was migrated from C-IV will be able to request a signature via the IVR. When ‘IVR’ is selected for ‘Signature Capture Type’ the CalSAWS system will generate a 6-digit Capture Code from a sequence of unique numbers; the worker will give the Capture Code to the customer. The IVR application will collect the callers Date of Birth and Capture Code and send them to CalSAWS for verification.

2.4.2 IVR Application Flow Mockups

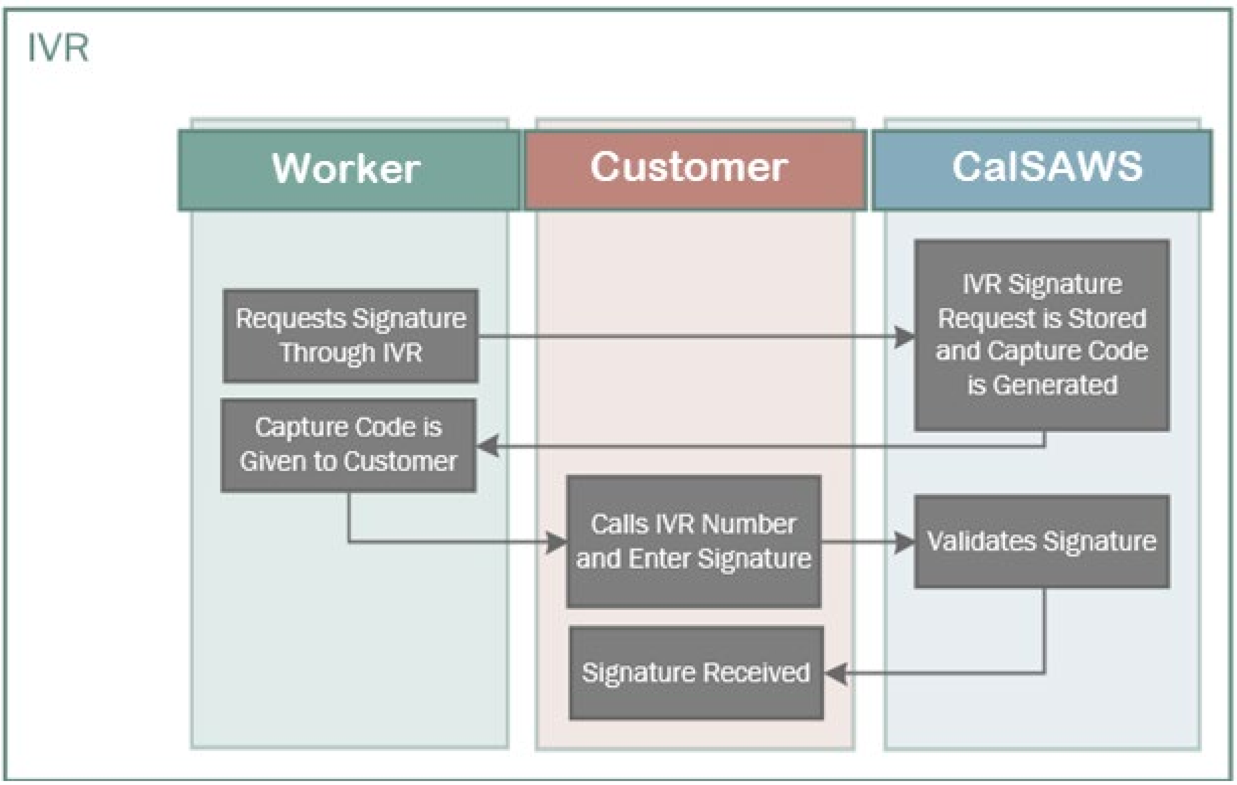


Figure 2.4.2.1 – IVR eSignature Interaction

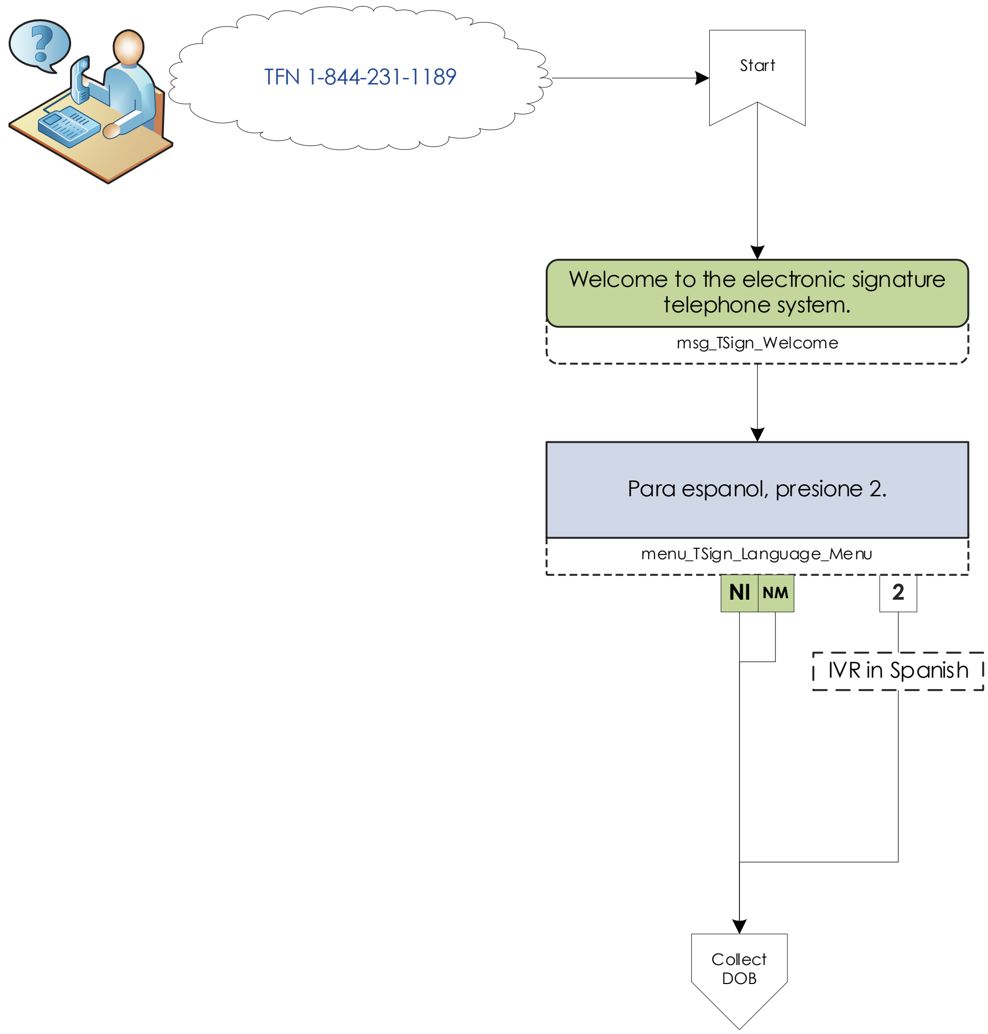


Figure 2.4.2.2 – IVR Entry Flow

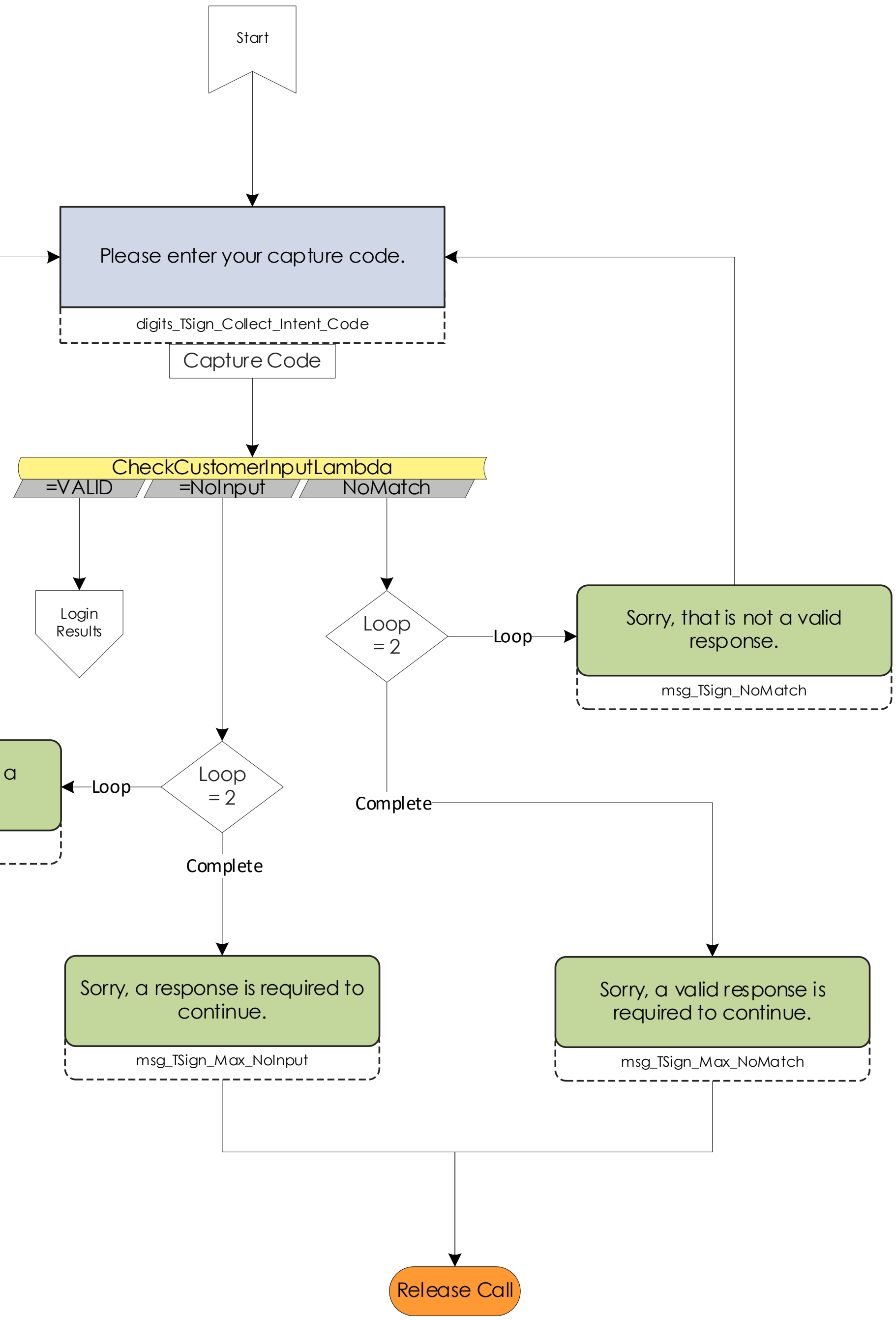


Figure 2.4.2.3 – Collect DOB Flow

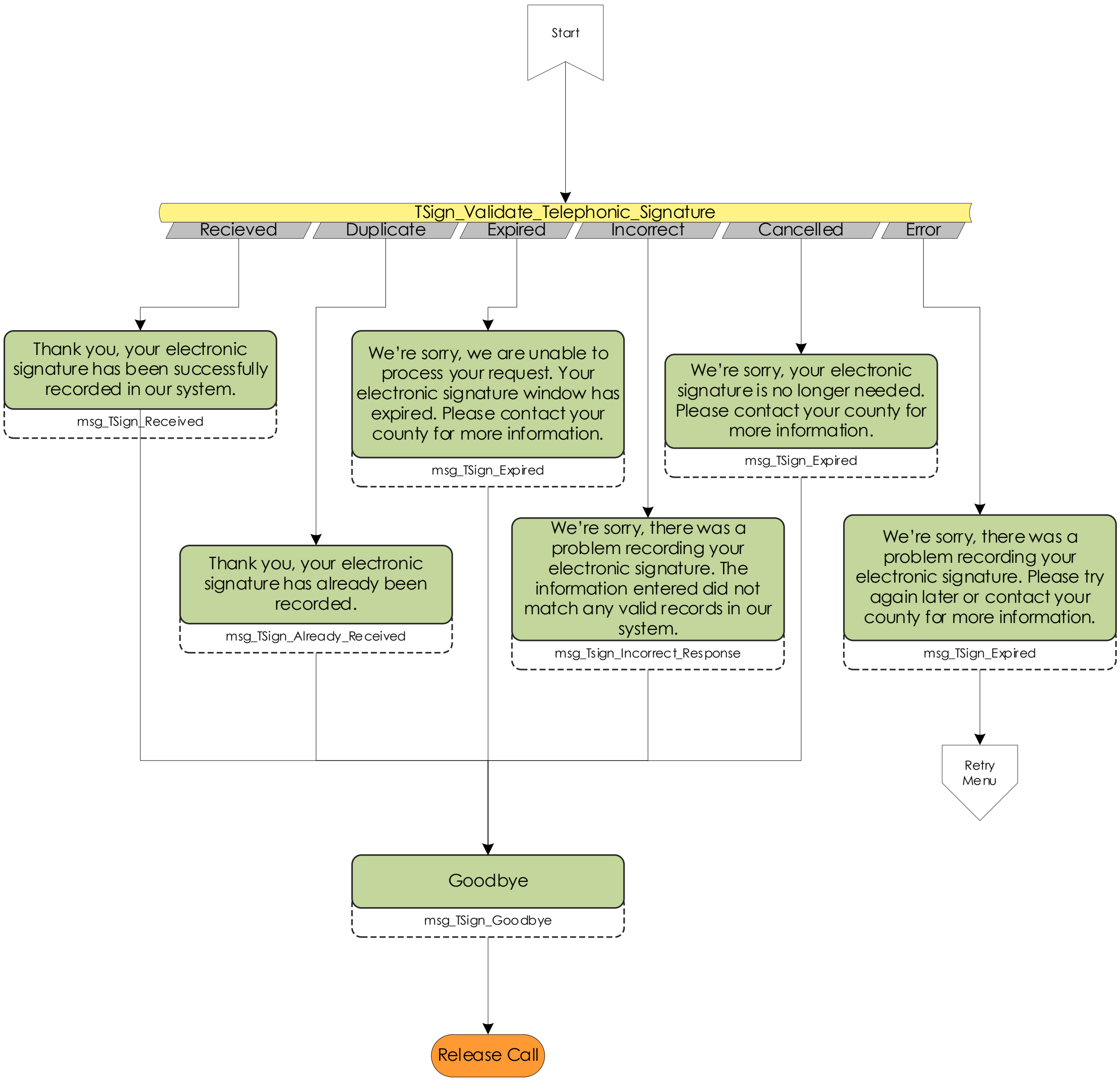


Figure 2.4.2.4 – Validate Response Flow

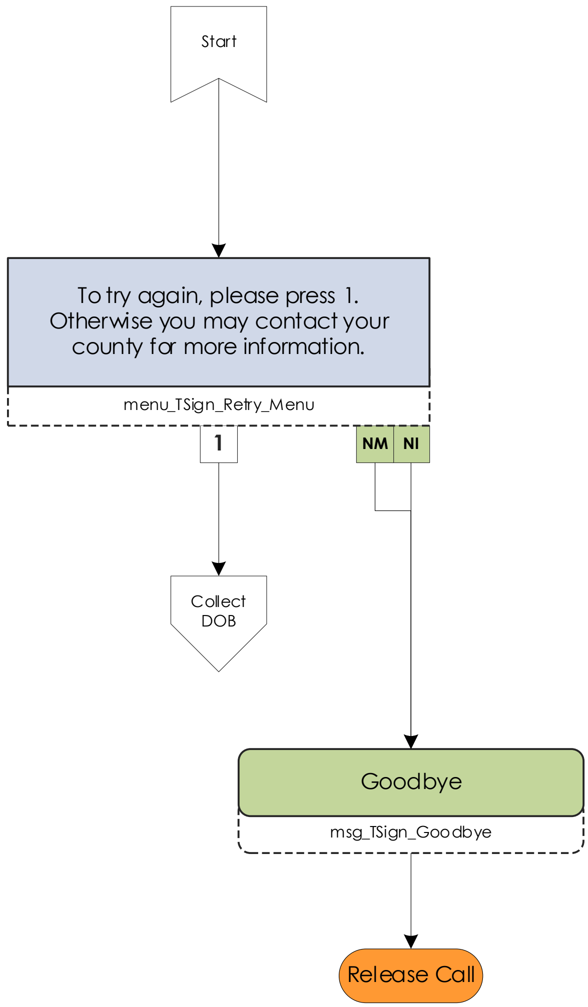


Figure 2.4.2.5 – Retry Menu

2.4.3 Description of Changes

1. Update the System to use the IVR application migrated from C-IV with SCR CA-207026 to accept a caller's Electronic Signature. See the diagrams above for the call flow.
    a. The IVR application will have a single Toll Free Number (TFN) callers will dial for all counties using the IVR solution that was migrated from C-IV. The Toll Free Number will be: 844-231-1189.
    b. The IVR application will collect the caller's Date of Birth and a Capture Code

c. Wording for the IVR Application (provided here for reference and implemented with SCR CA-207026) (iii through xiii is provided in English and Spanish):
    i. Welcome to the Electronic Signature telephone system
    ii. Para Espanol, oprima dos
    iii. We will need your Date of Birth and Capture Code to continue
    iv. Please enter your Date of Birth in the Day Day, Month Month, Year Year Year Year, format followed by the pound sign
        1. Sorry that was not a valid response
    v. Please enter your capture code followed by the pound sign
        1. Sorry that was not a valid response
    vi. Thank you, your Electronic Signature has been successfully recorded in our system.
    vii. Thank you, your Electronic Signature has already been recorded.
    viii. We're sorry, we are unable to process your request. Your Electronic Signature window has expired. Please contact your county for more information.
    ix. We're sorry, there was a problem recording your Electronic Signature. Please try again later or contact your county for more information
    x. We're sorry, your Electronic Signature is no longer needed. Please contact your county for more information.
    xi. We're sorry, there was a problem recording your Electronic Signature. The information entered did not match any valid records in our system
    xii. To try again please press 1
    xiii. Otherwise you may contact your county for more information
    xiv. Goodbye

2. SCR 207026 will migrate the IVR and webservice end points; update the System to use the new IVR solution:
    a. The IVR application will send to the web service the entered Date of Birth and the entered Capture Code
    b. The web service will return a status for:
        i. A successfully processed Request
        ii. An already processes Request
        iii. An expired Request, when the window to allow Electronic Signatures has expired
        iv. A cancelled Request

v. An invalid Request

2.4.4 Page Location

N/A

2.4.5 Security Updates

N/A

2.4.6 Page Mapping

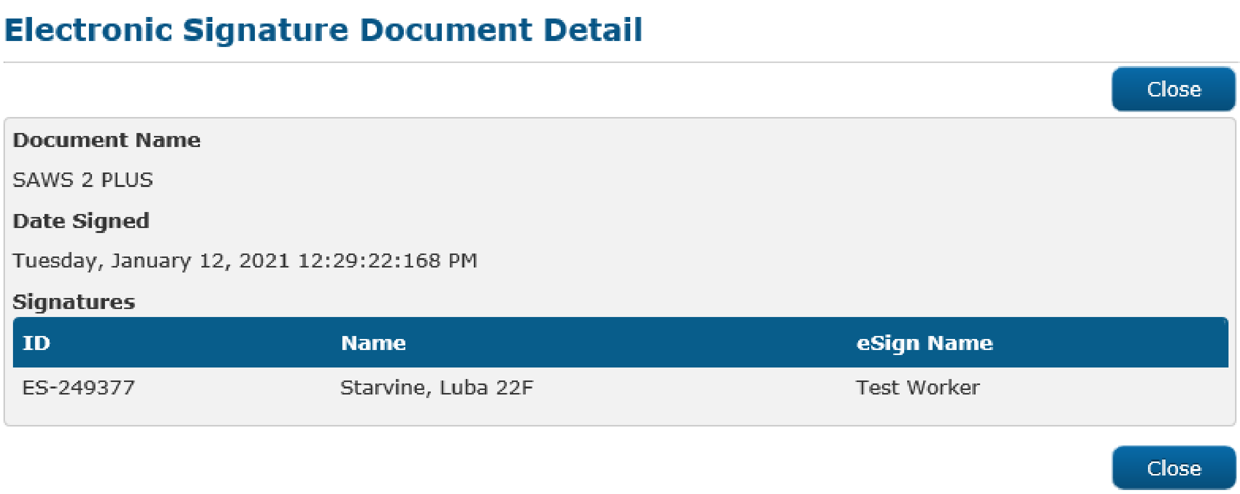
N/A

2.5 e-Signature Document Detail Page

2.5.1 Overview

Update the e-Signature Document Detail page, allowing the Worker to view the Signature History; rename the page to Electronic Signature Document Detail.

2.5.2 Electronic Signature Document Detail Mockup



Electronic Signature Document Detail

Close

Document Name

SAWS 2 PLUS

Date Signed

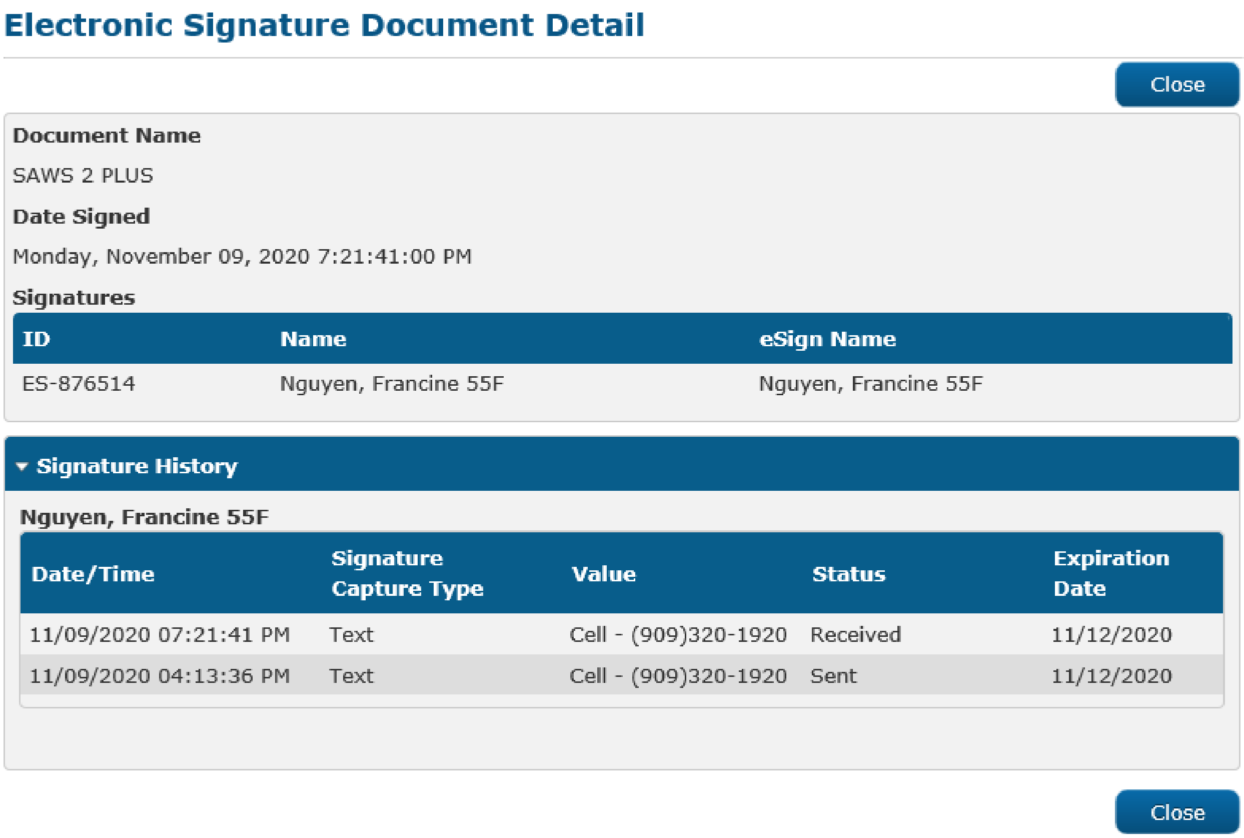
Tuesday, January 12, 2021 12:29:22:168 PM

Signatures

ID	Name	eSign Name
ES-249377	Starvine, Luba 22F	Test Worker

Close

Figure 2.5.2.1 - Electronic Signature Document Detail (Check to Sign no history)



Electronic Signature Document Detail

Close

Document Name

SAWS 2 PLUS

Date Signed

Monday, November 09, 2020 7:21:41:00 PM

Signatures

ID	Name	eSign Name
ES-876514	Nguyen, Francine 55F	Nguyen, Francine 55F

Signature History

Nguyen, Francine 55F

Date/Time	Signature Capture Type	Value	Status	Expiration Date
11/09/2020 07:21:41 PM	Text	Cell - (909)320-1920	Received	11/12/2020
11/09/2020 04:13:36 PM	Text	Cell - (909)320-1920	Sent	11/12/2020

Close

Figure 2.5.2.2 - Electronic Signature with History

2.5.3 Description of Changes

1. Rename the page as ‘Electronic Signature Document Detail’.
2. Update the ‘Name’ field: Display the Person information whose signature was given for the document: formatted as: {LAST}“, "{First}“ "{Age}{Abreviated_Sex} i.e. “Doe, John 25M”.
3. Update the ‘eSign Name’:
    a. Display the Person information whose signature was given for the document: formatted as: {LAST}“, "{First}“ "{Age}{Abreviated_Sex} i.e. “Doe, John 25M”
    b. If the Electronic Signature was provided by the worker, display the worker’s name in the ‘eSign Name’ field
4. Add a ‘Signature History’ panel – This panel will display the history of the customer’s Electronic Signature Requests; this panel is displayed only when a signature Request record is available i.e. “CW/CF e-Sign” was saved as the ‘Signature Method’
    a. This collapsible panel is collapsed by default
    b. Add a separate history section for each person who has had an initial signature Request sent. Label each section with the

Person information: formatted as: {LAST}", "{First}" "{Age}{Abreviated_Sex} i.e. "Doe, John 25M". Include a table with columns for:

   i. 'Date/Time' – This column will show the date and time a signature action took place.
   ii. 'Signature Capture Type' – This column will show the method of signature gathering.
   iii. 'Value' – This column will show the value for the signature method.
   iv. 'Status' – This is the status of the signature Request.
      1. Sent – This value displays when a signature request is sent to the customer.
      2. Expired – This value displays when the signature request for the customer has expired.
      3. Incorrect Response – This value displays when the signature request has been received and failed validation.
      4. Received – This value displays when the signature request has been received and validated.
   v. 'Expiration Date' – This is the due date for the signature response. This value will be 3 days after the signature Request is sent.

2.5.4 Page Location

- **Global: Client Corresp.**
- **Local: Distributed Documents** (search, then click the 'Details' button, then click the 'View eSign' button)
- **Task: N/A**

2.5.5 Security Updates

N/A

2.5.6 Page Mapping

Update page mapping for new and updated fields.

2.6 Automated Actions

2.6.1 Overview

The Automated Action framework allows county users a level of configurability for automated task generation. For example, the county can choose to deactivate a specific automated task within their county outside of the project enhancement process. They also can define attributes such as Task Type, Task Sub-Type, the due dates and initial assignment information for the resulting tasks through the Automated Action Detail page.

This section outlines modifications required to support Electronic Signature Automated Actions.

2.6.2 Automated Action Detail – Reference Example

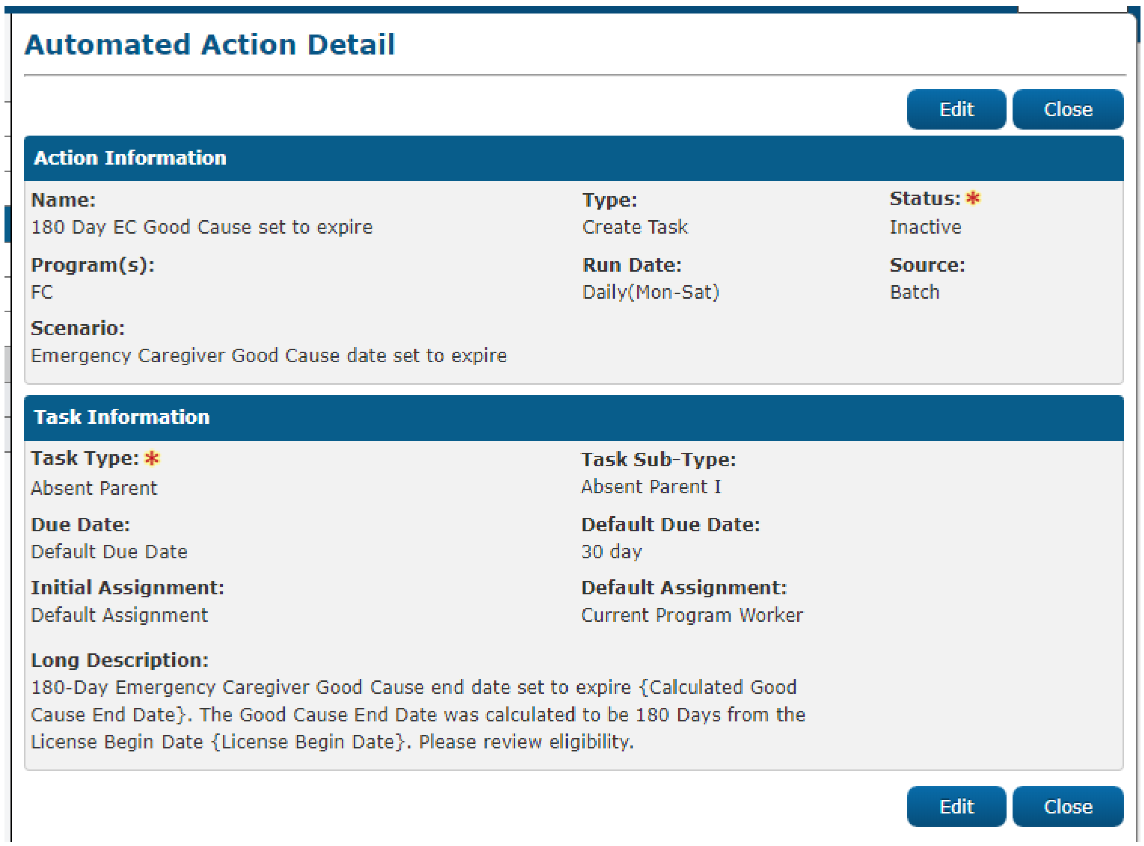


Figure 2.6.2.1 - Automated Action Detail - Reference

2.6.3 Description of Change

Add the following Automated Actions to the CalSAWS System.

Each Automated Action is currently available within the C-IV System allowing C-IV counties to configure specifics of each Automated Action until cutover into CalSAWS. The conversion processes at cutover will bring over any specific configurations for the C-IV counties. This enhancement will stage the Automated Actions for all 58 CalSAWS counties. For Los Angeles and the CalWIN counties, the below Automated Actions will be configured with an initial status of Inactive and a blank Task Type. Should one of these counties activate one of the following Automated Actions, the Automated Action Detail page validation will confirm that a Task Type is selected by the user at that time.

1. Electronic Signature Request Expired: Review

   a. Action Information
      i. Name: Electronic Signature Request Expired: Review
      ii. Type: Create Task
      iii. Status: Inactive
      iv. Program(s): CF, CW
      v. Run Date: Daily (Mon-Sat)
      vi. Source: Batch
      vii. Scenario: An Electronic Signature Request has expired.

   b. Task Information
      i. Task Type: null
      ii. Task Sub-Type: N/A
      iii. Due Date: Default Due Date
      iv. Default Due Date: 3 days
      v. Initial Assignment: Default Assignment
      vi. Default Assignment: The Worker who requested the Electronic Signature
      vii. Long Description: The electronic signature request for the {Document Number} provided via {Request Type} for {Person Name} on case {Case Number} has expired on {Expiration Date}. Please review the case information.

   Reference Section 2.7 which speaks to the migration of the batch process to trigger this Automated Action. **Technical:** This Automated Action will be implemented with a Category 399 scenario code of 'E1'.

2. Electronic Signature Request Undeliverable: Review

   a. Action Information
      i. Name: Electronic Signature Request Undeliverable: Review
      ii. Type: Create Task
      iii. Status: Inactive
      iv. Program(s): CF, CW
      v. Run Date: Daily (Mon-Sat)
      vi. Source: Batch
      vii. Scenario: An Electronic Signature Request is undeliverable.

   b. Task Information
      i. Task Type: null

ii. Task Sub-Type: N/A
iii. Due Date: Default Due Date
iv. Default Due Date: 3 days
v. Initial Assignment: Default Assignment
vi. Default Assignment: The Worker who requested the Electronic Signature
vii. Long Description: The electronic signature request for the {Document Number} provided via {Request Type} for {Person Name} on case {Case Number} is undeliverable. Please review the case information.

Reference Recommendation 2.7 which speaks to the migration of the batch process to trigger this Automated Action. **Technical:** This Automated Action will be implemented with a Category 399 scenario code of '140'.

3. Electronic Signature Received: Review

   a. Action Information
      i. Name: Electronic Signature Received: Review
      ii. Type: Create Task
      iii. Status: Inactive
      iv. Program(s): CF, CW
      v. Run Date: Real Time
      vi. Source: Online
      vii. Scenario: The customer has successfully verified an Electronic Signature Request.

   b. Task Information
      i. Task Type: null
      ii. Task Sub-Type: N/A
      iii. Due Date: Default Due Date
      iv. Default Due Date: 3 days
      v. Initial Assignment: Default Assignment
      vi. Default Assignment: The Worker who requested the Electronic Signature
      vii. Long Description: The electronic signature request for the {Document Number} provided via {Request Type} for {Person Name} on case {Case Number} was received. Please review the case information.

This Automated Action will trigger when an Electronic Signature Request is received. **Technical:** This Automated Action will be implemented with a Category 399 scenario code of '139'.

4. Add a new Automated Action for each text message listed in the Supporting Document.
    a. The 'Type' field will be "Text Outreach".
    b. Update the existing Action Information section in the Automated Action Detail page with details for each text message listed.
    c. 'Status' can be updated in Edit Mode. Selection options are:
        i. "Active" – text will be sent.
        ii. "Inactive" – no text will be sent.
5. 'Status' will be defaulted to "Inactive" for all counties except LA.
6. Add a new 'Text Information' section to the Automated Action Detail page for actions of type "Text Outreach" with the following fields:
    a. Message Text – The contents of the message to be generated by the Automated Action.

2.7 Real Time Text Message Request for eSignature

2.7.1 Overview

Create a real-time web service to create a text message for E-Signature. The web service is responsible for sending the initial text when "Text" is selected for 'Signature Capture Type' in the Electronic Signature page. The webservice will also send messages that the E-Signature process is complete, if the Capture Code is invalid, if the Capture Code is expired or if the signature is no longer required. The CalSAWS Text Messaging solution will send an English or Spanish text message to the customer. Update the system to send real-time text messages and respond to keywords from the customer as described in the Supporting Document: CA – 200332 DDCR 5039 Text Message Details.xlxs. A record must also be added to the Customer Contact History page for every Request sent to and received from the Customer.

2.7.2 Text Message Flow Mockups

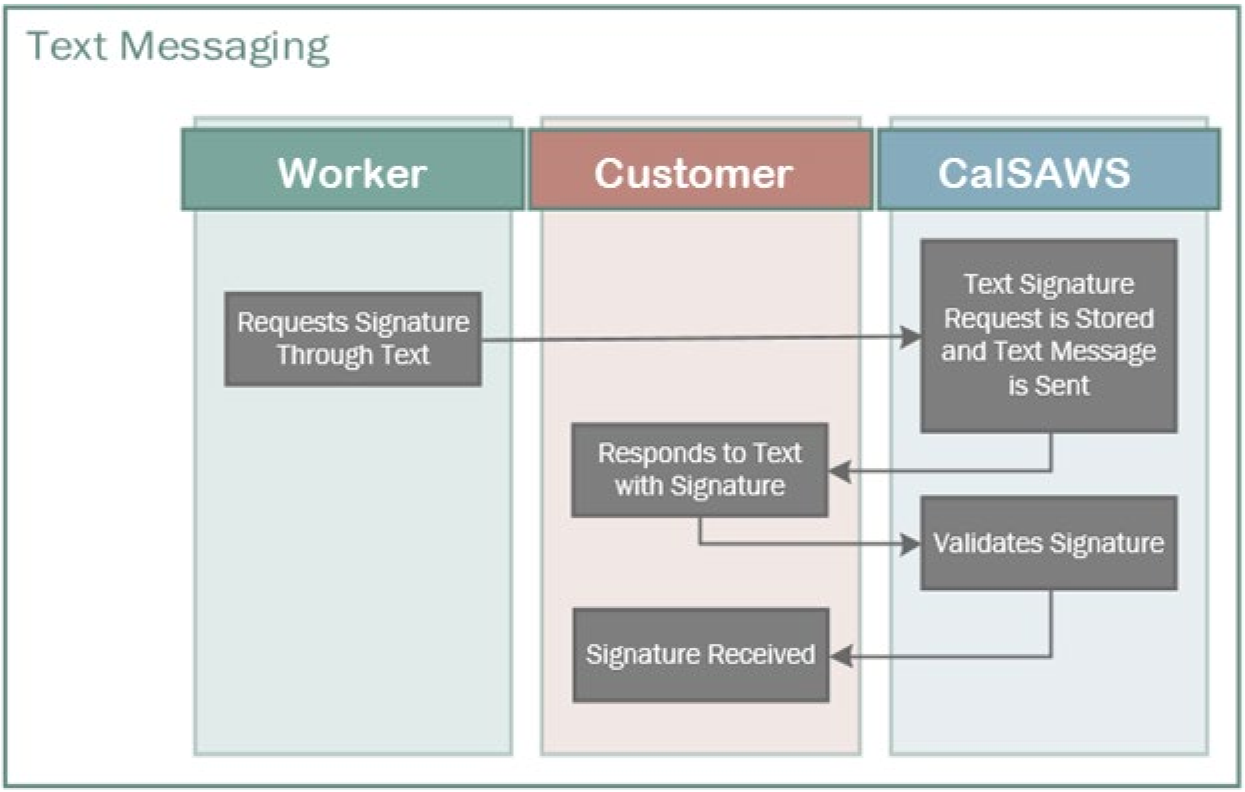


Figure 2.7.2.1 - Text Messaging Flow

2.7.3 Description of Changes

1. Create a new web service to send text messages; this sends the initial text to the customer requesting an E-Signature and handles the subsequent replies to the customer's responses. See the Supporting Document for specific messages and trigger conditions.
2. Messages are sent real-time or immediately, during business hours (Monday – Friday, 8:00 AM – 6:00 PM), based on changes to data in the system. See the Supporting Document for specific messages, trigger and run date conditions.
3. Messages are also sent real-time or immediately, in response to user input or responses. See the Supporting Document for specific messages, trigger and run date conditions.
4. Text messages will be sent for a County, only if they have an "Active" status as indicated on the Automated Actions page.
5. Text messages will be sent in Spanish if the person's Written Language preference is "Spanish", otherwise send the text message in English for all other written languages.
6. All text messages, except the Opt-in message, are sent to customers that have Opted-in to text messaging and have a Text Message status of "Verified".

7. Text messages will not be sent for Domestic Violence cases, indicated by either of the following:
    a. Active Domestic Violence Case Flag
    b. Confidential Case type of Domestic Violence
8. For text messages that have a <Phone Number> parameter in the message, use the number below based on the County of the customer's case:
    a. Use (866) 613-3777 if the customer is in Los Angeles County.
    b. Use (844) 859-2100 for all other counties.
9. E-Signature Request message details
    a. When "Text" is chosen as the 'Signature Capture Type' and the E-signature record is saved, send a text message to the customer containing a Capture Code
    b. Generate a random 4-digit number sequence (Capture Code) and append it to the message.
    c. This Capture Code and the phone number it was sent to should be saved so that it can be compared to the response from the user.
10. Response to CC#### message details
    a. When the system receives a message starting with 'CC'
        i. Compare the code (4 digits following CC) in the message and the phone number it was sent from with the list of saved E-signature Requests above.
            1. If a match is found and the E-signature status is not "Expired"
                a. Mark the E-signature record status as "Received".
                b. Respond to the user with the Response to valid CC#### message
                c. Add a new record to Customer Contact History with a Reason "E-signature complete"
            2. If a match is found and the E-signature status is "Expired"
                a. Respond to the user with the Response to expired CC#### message
                b. Add a new record to Customer Contact History with a Reason "E-signature code expired"
            3. If the phone number is found and the E-signature status is not "Expired" BUT the code does not match
                a. Respond to the user with the Response to invalid CC#### message
                b. Add a new record to Customer Contact History with a Reason "E-signature invalid code"

b. When a worker cancels an E-Signature Request, send the E-Signature No longer Required text message. Add a new record to the Customer Contact History page.

c. Add a record to the Customer Contact History page when a signature Request or Reminder is sent and when a signature is received.

    i. The 'Date/Time' will be when the Request/Reminder for a Signature was sent to the customer, or the Signature was Received from the user. Clicking on this link will navigate the user to the Contact Detail page

    ii. The 'Name' will be the Customer that the Request or Reminder for a Signature was sent to, or the Signature was Received from

    iii. The 'Type' will be "Text" (the Signature Capture Type that was used to gather the Signature).

    iv. The 'Reason' will be the Contact History Reasons listed in the Supporting Document.

2.7.4 Execution Frequency

Real-Time (During Business Hours)

2.7.5 Key Scheduling Dependencies

2.7.6 Counties Impacted

All Counties

2.7.7 Data Volume/Performance

2.7.8 Failure Procedure/Operational Instructions

N/A

2.8 Batch Text Message for E-Signature Not Complete

2.8.1 Overview

Currently there exists a job in C-IV which send Reminder texts to the customer if the E-Signature process is not complete Batch Job PB00Y909 sets the Electronic Signature record's status to "Expired" when the expiration date has elapsed and assigns a new task to the worker who generated the signature Request. Update the CalSAWS system to send batch text messages based on criteria described in the Supporting Document: CA – 200332 DDCR 5039 Text Message Details.xlxs. A record must also be added to the Customer Contact History page for every Request sent to and received from the Customer.

2.8.2 Description of Change

1. Create a batch sweeps to gather the target populations for E-Signature not complete to send text messages to. This will be based on the criteria described in the Supporting Document for each Batch text message.
2. Create a batch job(s) to send messages for incomplete E-Signature as described in the Supporting Document.
   NOTE: Certain jobs may need to be split into multiple thread jobs depending on the size of the target population.
3. Text messages will be sent for a County only if they have an "Active" status as indicated on the Automated Actions page.
4. Text messages will be sent in Spanish if the person's Written Language preference is "Spanish", otherwise send the text message in English for all other written languages.
5. All text messages are sent to customers that have Opted-in to text messaging and have a Text Message status of "Verified".
6. For text messages that have a <Phone Number> parameter in the message, use the number below based on the County of the customer's case:
   a. Use (866) 613-3777 if the customer is in Los Angeles County
   b. Use (844) 859-2100 for all other counties
7. Text messages will not be sent for Domestic Violence cases, indicated by either of the following:
   a. Active Domestic Violence Case Flag
   b. Confidential Case type of Domestic Violence
8. All batch text messages will be sent during normal business hours (8:00 AM to 6:00 PM).
9. When a Reminder for an incomplete E-Signature Request is sent to the customer, a record will be viewable on the Customer Contact History page:
   a. The 'Date/Time' will be when the Request/Reminder for a Signature was sent to the customer, or the Signature was Received from the user. Clicking on this link will navigate the user to the Contact Detail page
   b. The 'Name' will be the Customer that the Request or Reminder for a Signature was sent to, or the Signature was Received from
   c. The 'Type' will be "Text" (the Signature Capture Type that was used to gather the Signature)
   d. The 'Reason' will be the Contact History Reason as listed in the Supporting Document
10. Migrate Batch sweep job PB00A138 to CalSAWS

a. The batch job sets the Electronic Signature record's status to "Expired"
b. The batch job finds all signature records in which the 'Expiration Date' field from the Electronic Signature page is prior to or equal to the Batch Date and the record is not already in the following statuses (Appendix 7.1 E-Signature Record Status):
   i. "Sent"
   ii. "Incorrect Response"
c. Each record in the above list is updated to have a new status of "Expired"
d. Create a new automated task for the worker who sent the Signature Request that has expired, using the Automated Action details specified in recommendation section 2.6 Automated Actions.
   Note: This task will be associated with any applicable CF and CW program in which the person is associated, regardless of the current program status.
e. Create an auto journal for the expired Signature Request (See Online Recommendation III.D), using the following long description template:

Journal Entry	Description
New/Update	New
Journal Category	All
Journal Type	Electronic Signature
Short Description	Expired Signature Request
Long Description	A signature request has expired for <Person Name: 'First Name' + ' ' + 'Last Name'> to complete the eSignature for a <Document Name: DOC_TEMPL.TEMPL_TITLE_NAME>
Trigger Condition	Document has a new status of 'Expired'.

11. Migrate Batch sweep job PB00Y909 to CalSAWS
   a. The Electronic Signature is still incomplete 1 day after the initial E-Signature Request text is sent and the status is not the following
      i. Received
      ii. Incorrect Response.

The batch job will send the E-Signature Not Complete text message to the population. Refer to the Supporting Document for message details.

2.8.3 Execution Frequency

See Supporting Document.

2.8.4 Key Scheduling Dependencies

The predecessor job PB00S100D which will need to complete successfully before PB00A138 can execute.

2.8.5 Counties Impacted

All Counties

2.8.6 Data Volume/Performance

Unknown

2.8.7 Failure Procedure/Operational Instructions

N/A

2.9 Update E-signature Indicators for Forms

2.9.1 Overview

The e-signature and tele-signature indicators for a form will determine the signature method that shows up on the Electronic Signature page. If the Electronic Signature indicator is set to "Yes", "CW/CF e-Sign" will show in the dropdown. If the tele-sign indicator is set to "Yes", the "Check to Sign" will show in the dropdown. The indicators are stored in the Document Template table. The indicators will be updated to match the current values from C-IV.

2.9.2 Description of Change

1. Update the e-signature indicator for forms that are currently set to "Yes" to "No".
2. Update the e-signature and tele-signature indicators to "Yes" based on the following supporting document: **CA-200332 Electronic Signature.xlsx.**
3. Update the VER 104 to be visible to all counties in Template Repository.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	List of forms with Electronic Signatures.	CA-200332 Electronic Signature.xlsx
2	Batch	List of E-Signature text messages	CA – 200332 DDCR 5039 Text Message Details.xlxs

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.20	The LRS shall support multiple means of communicating appointments, appointment reminders, and critical dates and/or information that may affect a participant's eligibility, using the following means:a. E-Mail;b. Text messaging;d. Automated phone reminder;e. USPS mail; andf. YBN.	The e-Signature functionality will notify recipients through text messaging or IVR that they can electronically sign their document through those two options.

5 APPENDIX

5.1 E-Signature Record Status

Category	Description
Category ID	535
Available Category Values	Already Received Sending Error Not Sent Sent Expired Received Incorrect Response Canceled

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200975

DDID 1631: Implement Medical Caseload Report in LRS

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Remi Lassiter
	Reviewed By	Ravneet Bhatia, Parul Dhawan

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/9/2020	1.0	Initial Document	Remi Lassiter
1/28/2021	1.1	CMSP requirement removed	Remi Lassiter
2/2/2021	1.2	Column definitions added for Medi-Cal Caseload and Medi-Cal Caseload Line 6 Backup Reports	Remi Lassiter
2/18/2021	1.3	Design clarification made to add CMSP background information to the appendix	Remi Lassiter

Table of Contents

1 OVERVIEW

This SCR details the migration of the Medi-Cal Caseload Report and Medi-Cal Caseload Line 6 Backup Report from C-IV to CalSAWS which involves reactivating these reports in CalSAWS and converting them from on-request reports to scheduled monthly reports.

This SCR also creates a new monthly scheduled Medi-Cal Caseload Line 13 Backup Report which provides person level details for the active Medi-Cal population in the report month.

1.1 Current Design

The Medi-Cal Caseload Report and Medi-Cal Caseload Line 6 Backup Report are both on-request reports that are currently used in C-IV but are inactive in CalSAWS.

There is currently no Medi-Cal caseload report that provides person-level details.

1.2 Requests

1. Migrate the Medi-Cal Caseload Report and Medi-Cal Caseload Line 6 Backup Report to CalSAWS.
2. Update the Medi-Cal Caseload Report and Medi-Cal Caseload Line 6 Backup Report to run as Scheduled monthly reports rather than On-Request reports.
3. Implement a new Medi-Cal Caseload Line 13 Backup Report that will provide backup information for the persons included in the Medi-Cal population of the report.

1.3 Overview of Recommendations

1. Make the following updates to the Medi-Cal Caseload Report:
    a. Reactivate the Medi-Cal Caseload Report in CalSAWS.
    b. Convert the report from an On-Request report to a Scheduled monthly report.
    c. Update the formatting of the worksheet headers and total field to align with current report cosmetic standards.
2. Make the following updates to the Medi-Cal Caseload Line 6 Backup Report:
    a. Reactivate the Medi-Cal Caseload Line 6 Backup Report in CalSAWS.
    b. Convert the report from an On-Request report to a Scheduled monthly report.
    c. Update the formatting of the worksheet headers and total field to align with current report cosmetic standards
3. Implement a new scheduled monthly Medi-Cal Caseload Line 13 Backup Report.

1.4 Assumptions

1. Reports shall be updated and reformatted to be operational with Qlik applications and current Excel version Workbook (*.xlsx).

2. By the time this SCR is implemented, the reports will be re-platformed with the new logo for all sheets. The developer will follow the current report cosmetic standards.
3. The developer will first migrate the latest C-IV code for these reports to CalSAWS then make the changes described in this SCR on top of that.
4. The necessary batch jobs will be created so that the Medi-Cal Caseload Reports can be generated as Scheduled monthly reports.

2 RECOMMENDATIONS

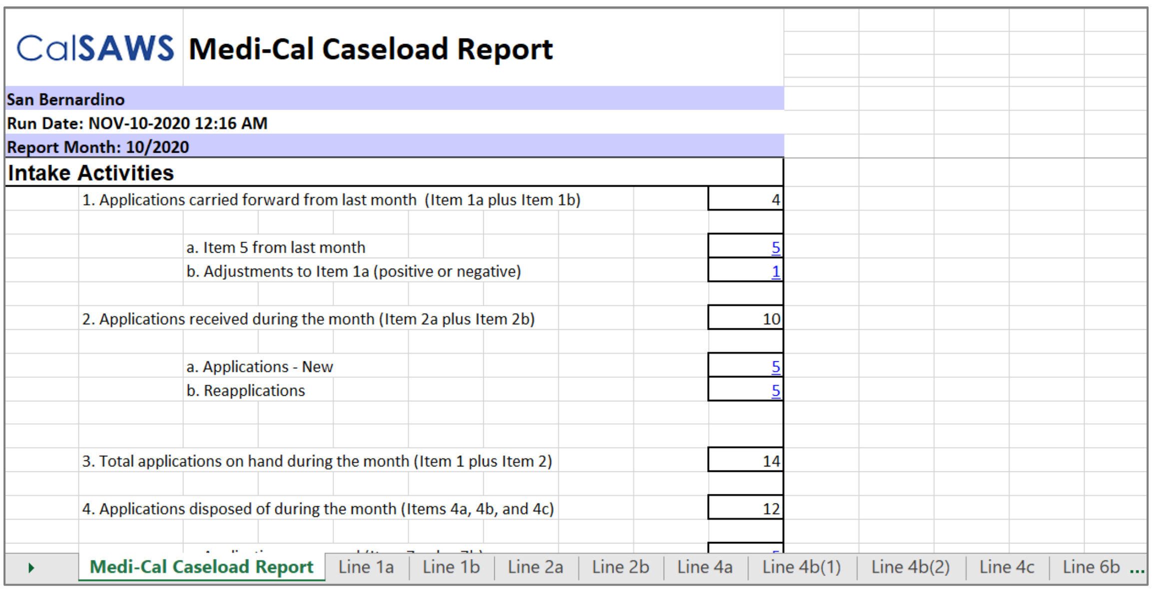
2.1 Medi-Cal Caseload Report

2.1.1 Overview

This section describes the following changes to the Medi-Cal Caseload Report:

- Reactivate the Medi-Cal Caseload Report in CalSAWS.
- Convert the report from an On-Request report to a Scheduled monthly report.
- Update the formatting of the worksheet headers and total field to align with current report cosmetic standards.

2.1.2 Medi-Cal Caseload Report Screenshot



CalSAWS Medi-Cal Caseload Report

San Bernardino
Run Date: NOV-10-2020 12:16 AM
Report Month: 10/2020

Intake Activities

1. Applications carried forward from last month (Item 1a plus Item 1b)	4
a. Item 5 from last month	5
b. Adjustments to Item 1a (positive or negative)	1
2. Applications received during the month (Item 2a plus Item 2b)	10
a. Applications - New	5
b. Reapplications	5
3. Total applications on hand during the month (Item 1 plus Item 2)	14
4. Applications disposed of during the month (Items 4a, 4b, and 4c)	12

Medi-Cal Caseload Report | Line 1a | Line 1b | Line 2a | Line 2b | Line 4a | Line 4b(1) | Line 4b(2) | Line 4c | Line 6b ...

Figure 2.2.1 – Medi-Cal Caseload Report Screenshot

Note: Only cosmetic changes are being made to the report template.

2.1.3 Description of Change

1. Reactivate the Medi-Cal Caseload Report in CalSAWS. See below for the report's column definitions:

Medi-Cal Caseload Report Sheet Column Definitions

Column Name	Column Description

1. Applications carried forward from last month (Item 1a plus Item 1b)	The count of Medi-Cal Applications that were pending in the previous month plus any adjustments. This value is equal to Line 1a plus/minus Line 1b.
a. Item 5 from last month	The count from the previous month's report of Medi-Cal applications pending at the end of the previous report month – e.g., for the report month of July, this is the count on June's report of all Medi-Cal applications that were pending as of the last day of June. This value is equal to the Line 5 from the previous report month.
b. Adjustments to Item 1a (positive or negative)	In the report month, the logic will determine Medi-Cal applications that were pending at the end of the previous month that count as carried forward and compare them to the actual applications that were counted on the previous report's Line 5, and any discrepancies (positive or negative) will be counted on this adjustment line. The associated section of the backup report will display any application differences found in comparing the two data sets, along with a positive or negative value for each.
2. Applications received during the month (Item 2a plus Item 2b)	The sum count of New Medi-Cal Applications and Reapplications received during the report month. This value is equal to Line 2a plus Line 2b.
a. Applications - New	The count of New Medi-Cal Applications received in the report month.
b. Reapplications	The count of Medi-Cal Reapplications received in the report month.
3. Total applications on hand during the month (Item 1 plus Item 2)	The count of pending Medi-Cal Applications carried forward from the previous month plus the count of New and Reapplications received during the report month. This value is equal to Line 1 plus Line 2.
4. Applications disposed of during the month (Items 4a, 4b, and 4c)	The count of Medi-Cal Applications dispositioned during the report month. This value is equal to the sum of Lines 4a-4c.
a. Applications approved (Item 7a plus 7b)	The count of New Medi-Cal Applications and Reapplications approved during the report month. This value is equal to Line 7a plus Line 7b.
b. Applications denied	The count of Medi-Cal Applications denied during the report month for a reason other than "Application Opened in Error" or "Duplicate Application". This value is equal to Line 4b.1 plus 4b.2.

1) Applications denied with reason	The count of Medi-Cal Applications denied during the report month for a known reason other than "Application Opened in Error" or "Duplicate Application" (CATGRY_ID = 73).
2) Applications denied reason unknown	The count of Medi-Cal Applications denied during the report month for an unknown reason. **Technical Note:** EVENT.TYPE_RSN_CODE is null
c. Other application dispositions	The count of Medi-Cal Applications denied during the report month with reason "Application Opened in Error" or "Duplicate Application" (CATGRY_ID = 73).
5. Applications pending at end of month (Item 3 minus Item 4)	The count of Medi-Cal Applications on hand during the report month that are still pending at the end of the report month. This value is equal to Line 3 minus Line 4.
6. Programs carried forward from last month (Item 6a plus Item 6b)	The sum count of Medi-Cal Programs that were active in the previous month plus any adjustments. This value is equal to Line 6a plus/minus Line 6b.
a. Programs carried forward from last month	The count from the previous month's report of Medi-Cal Programs that were active as of the last day of the previous report month – e.g. for the report month of July, this is the count of all active Medi-Cal Programs as of the last day of June. This value is equal to the Line 10 from the previous report month.
b. Adjustments to Item 6a (Positive or Negative)	In the report month, the logic will determine Medi-Cal Programs that were active at the end of the prior month that count as carried forward and compare them to the actual Programs that were counted on the previous report's Line 10, and any discrepancies will be counted on this adjustment line. The associated section of the backup report will display any program differences found in comparing the two data sets, along with a positive or negative value for each, with a net total count at the end.
7. Programs added during the month (Item 7a through 7d)	The count of Medi-Cal programs that were approved during the report month. This value is the sum of Line 7a-d. **Note:** The counts for programs added are based upon the date an application is approved, not when the program becomes active – e.g., if a program has a new application pended on June 20th that is approved the same day but effective for the month of July, then the case will be counted in the June report month because that is when the action to approve the program occurred.
a. Applications approved	The count of Medi-Cal programs that were approved during the report month as a result of a New Application.

b. Reapplications approved	The count of Medi-Cal programs that were approved during the report month as a result of a Reapplication.
c. ICT In	The count of Medi-Cal programs that were added during the report month as a result of an Inter County Transfer.
d. Other approvals	The count of Medi-Cal programs that were approved in the report month as a result of a rescission. An example of a case counted on this line would be a program discontinued for lack of RE packet then rescinded in the following month when it is returned.
8. Total programs open during the month (Item 6 plus Item 7)	The count of all Medi-Cal Programs active during the report month which consists of programs carried forward from last month and those programs added during the month. This value is equal to Line 6 plus Line 7.
9. Discontinuances	The count of all Medi-Cal Programs that were discontinued during the report month – e.g., if a discontinuance occurred 6/28 effective 7/1, this action will show on June's report.
10. Programs carried forward to next month	The count of all Medi-Cal Programs that are active as of the last day of the report month. This value is equal to Line 8 minus Line 9.
11. Distinct Cases	The count of distinct cases with an active Medi-Cal Program as of the last day of the report month. This is the count of unique cases from Line 10.
12. Persons added to existing programs	The count of persons who were approved on already active Medi-Cal Programs in the report month.
13. Medi-Cal population	The count of persons on active Medi-Cal Programs as of the last day of the report month. This value is equal to Line 13a plus Line 13b.
a. Distinct persons (Adults)	The count of adults on active Medi-Cal Programs as of the last day of the report month.
b. Distinct persons (Children)	The count of children on active Medi-Cal Programs as of the last day of the report month.

The population for this sheet is all Medi-Cal application or program activity occurring in the report month or carried forward from the previous month.

Line 1a Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal applications from the previous month's report that were pending at the end of report month. This value is equal to the count of all records on the sheet.

	Note: This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the Medi-Cal application as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal application.
Case Number	The case number associated with the Medi-Cal application.
Primary Applicant	The primary applicant associated with the Medi-Cal application.
Date of Application	The date the Medi-Cal application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal applications from the previous month's report that were pending as of the last day of the report month.

Line 1b Sheet Column Definitions

Column Name	Column Description
Total	Total adjustment records for the count of Applications Carried from last month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
PGM Status	The status of the Medi-Cal program as of the last day of the report month (CATGRY_ID = 72).
Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY
Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

Adjustments	The type of adjustment (positive or negative) warranted by the application record. Possible Values: • If the application was pending as of the last day of the previous month and is not present in the data set of Line 1a, display '+' • If the application was present in the data set of Line 1a and was not pending as of the last day of the previous month, display '-'

The population for this sheet is any application that is either pending as of the last day of the previous month and is not present in the data set of Line 1a (positive adjustment) or is not pending as of the last day of the previous month and is incorrectly present in the data set of Line 1a (negative adjustment).

Line 2a Sheet Column Definitions

Column Name	Column Description
Total	Total New Medi-Cal Applications received in the report month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
Primary Applicant	The primary applicant associated with the application.
Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

The population for this sheet is all New Medi-Cal Applications received in the report month.

Line 2b Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal Reapplications received in the report month. This value is equal to the count of all records on the sheet.

	Note: This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
Primary Applicant	The primary applicant associated with the application.
Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal Reapplications received in the report month.

Line 4a Sheet Column Definitions

Column Name	Column Description
Total	Total New Medi-Cal Applications and Reapplications approved during the report month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
Primary Applicant	The primary applicant associated with the application.
Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal applications approved during the report month.

Line 4b(1) Sheet Column Definitions

Column Name	Column Description
Total	Total New Medi-Cal Applications and Reapplications denied during the report month with known reason other than "Application Opened in Error" or "Duplicate Application". This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
Primary Applicant	The primary applicant associated with the application.
Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY
Status Reason Code	The status reason associated with the disposition event of the denied Medi-Cal application (CATGRY_ID = 73) – possible values can include but are not limited to 'Over Income', 'Ineligible Non Citizen, 'Deceased.

The population for this sheet is all Medi-Cal Applications denied during the report month with known reason other than "Application Opened in Error" or "Duplicate Application".

Line 4b(2) Sheet Column Definitions

Column Name	Column Description
Total	Total New Medi-Cal Applications and Reapplications denied in the report month with unknown reason. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
Primary Applicant	The primary applicant associated with the application.

Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY
Status Reason Code	The status reason associated with the disposition event of the denied Medi-Cal application. Possible values: NULL (because it is denied with unknown reason)

The population for this sheet is all Medi-Cal Applications denied during the report month with unknown reason.

Line 4c Sheet Column Definitions

Column Name	Column Description
Total	Total New Medi-Cal Applications and Reapplications denied in the report month with reason "Application Opened in Error" or "Duplicate Application". This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the application as of the last day of the report month.
Case Name	The case name associated with the application.
Case Number	The case number associated with the application.
Primary Applicant	The primary applicant associated with the application.
Date of Application	The date the application was submitted. Format: MM/DD/YYYY
Created on	The date the application record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY
Status Reason Code	The status reason associated with the disposition event of the denied Medi-Cal application (CATGRY_ID = 73). Possible values: • Application Opened in Error • Duplicate Application

The population for this sheet is all Medi-Cal Applications denied during the report month with reason "Application Opened in Error" or "Duplicate Application".

Line 6b Sheet Column Definitions

Column Name	Column Description
Total	Total adjustment records for the count of Applications Carried from last month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.
PGM Status	The status of the Medi-Cal program as of the last day of the report month (CATGRY_ID = 72).
Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY
Date of Application	The date the Medi-Cal application was submitted. Format: MM/DD/YYYY
Created on	The date the program record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY
Adjustments	The type of adjustment (positive or negative) warranted by the program record. Possible Values: • If the program was active as of the last day of the previous month and is not present in the data set of Line 6a, display '+' • If the program was present in the data set of Line 6a and was not active as of the last day of the previous month, display '-'

The population for this sheet is any program that is either active as of the last day of the previous month and is not present in the data set of Line 6a (positive adjustment) or is not active as of the last day of the previous month and is incorrectly present in the data set of Line 6a (negative adjustment).

Line 7a Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal programs that were approved during the report month as a result of a new application. This value is equal to the count of all records on the sheet.

	Note: This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.
Primary Applicant	The primary applicant associated with the Medi-Cal program.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY
Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal programs that were approved during the report month as a result of a new application.

Line 7b Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal programs that were approved during the report month as a result of a reapplication. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.
Primary Applicant	The primary applicant associated with the Medi-Cal program.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY
Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal programs that became active during the report month as a result of a reapplication.

Line 7c Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal programs that were added during the report month as a result of an Inter County Transfer. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.
Primary Applicant	The primary applicant associated with the Medi-Cal program.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY
Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal programs that were added during the report month as a result of an Inter County Transfer.

Line 7d Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal programs that were approved during the report month as a result of a rescission. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.
Primary Applicant	The primary applicant associated with the Medi-Cal program.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY

Action Date	The date the application was dispositioned. This is the event date when the worker took action. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal programs that were approved during the report month as a result of a rescission.

Line 8 Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal programs that were active during the report month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.
Primary Applicant	The primary applicant associated with the Medi-Cal program.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY
Created On	The date the program record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal programs that were active during the report month.

Line 9 Sheet Column Definitions

Column Name	Column Description
Total	Total Medi-Cal Programs that were discontinued during the report month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the Medi-Cal program.
Case Number	The case number associated with the Medi-Cal program.

Primary Applicant	The primary applicant associated with the Medi-Cal program.
Date of Disc	The date the program was discontinued. Format: MM/DD/YYYY
Effective Date	The date the program's discontinuance goes into effect. Format: MM/DD/YYYY
Disc Reason	The reason the program was discontinued (CATGRY_ID = 73).

The population for this sheet is all Medi-Cal Programs that were discontinued during the report month.

2. Convert the Medi-Cal Caseload Report from an On-Request report to a Scheduled report.
    a. Generate this report monthly for the Medi-Cal caseload of the previous month. This report should be generated after the fiscal and auto-termination processes have been completed for the report month.
    b. Create a sweep job that includes logic to store saved off data for use in carried forward counts from the previous report month. It should mirror the C-IV sweep code for this report.

3. Make the following updates to the report template to align with current report cosmetic standards:
    a. Move the 'Total' field to the top of the report for all the Line item detail sheets.
    b. Update all worksheet headers to include the following three lines:
        i. County Name formatted as "County Name"
        ii. Run Date formatted as "Run Date: MON-DD-YY HH:MM AM/PM"
        iii. Report Month formatted as "Report Month: MM/YYYY"

    Note: See attached report template mockup in Supporting Documents for expected report cosmetic standards.

2.1.4 Report Location

- **Global: Reports**
- **Local: Scheduled**
- **Task: Case Activity**

Note: this location is the updated report location per the changes described in this SCR.

2.1.5 Counties Impacted

All CalSAWS counties will be impacted by the changes described in this section.

2.1.6 Security Updates

No updates to security. The right to view the Medi-Cal Caseload Report will be maintained as a Scheduled report by the same security groups that it had as an On-Request Report.

2.1.7 Report Usage/Performance

This report is expected to be viewed as much as the Quality Review Caseload Report which is viewed 3-4 times per month.

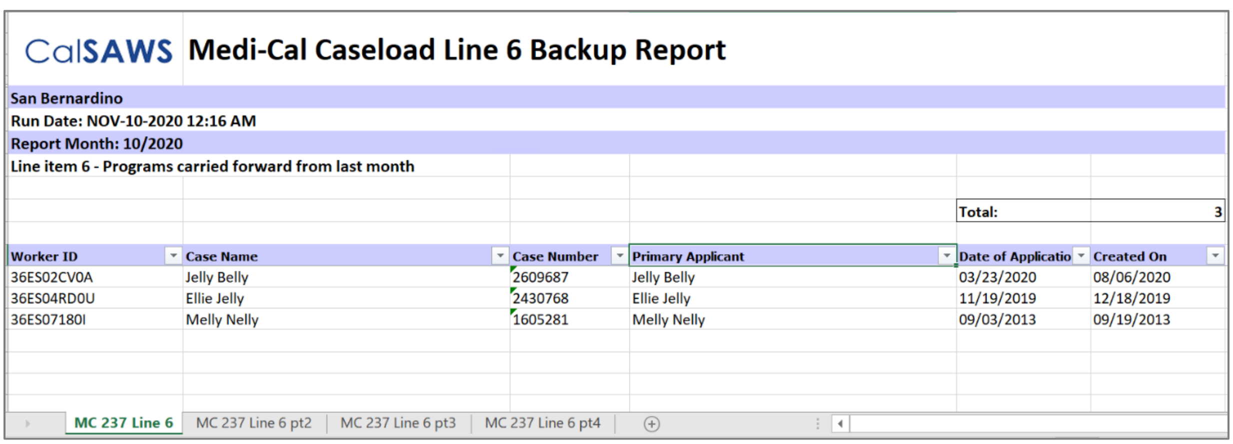
2.2 Medi-Cal Caseload Line 6 Backup Report

2.2.1 Overview

This section describes the following changes to the Medi-Cal Caseload Line 6 Backup Report:

- Reactivate the Medi-Cal Caseload Line 6 Backup Report in CalSAWS.
- Convert the report from an On-Request report to a Scheduled monthly report.
- Update the formatting of the worksheet headers and total field to align with current report cosmetic standards.

2.2.2 Medi-Cal Caseload Line 6 Backup Report Screenshot



CalSAWS **Medi-Cal Caseload Line 6 Backup Report**

San Bernardino
Run Date: NOV-10-2020 12:16 AM
Report Month: 10/2020
Line item 6 - Programs carried forward from last month

Total: 3

Worker ID	Case Name	Case Number	Primary Applicant	Date of Applicatio	Created On
36ES02CV0A	Jelly Belly	2609687	Jelly Belly	03/23/2020	08/06/2020
36ES04RD0U	Ellie Jelly	2430768	Ellie Jelly	11/19/2019	12/18/2019
36ES07180I	Melly Nelly	1605281	Melly Nelly	09/03/2013	09/19/2013

MC 237 Line 6 | MC 237 Line 6 pt2 | MC 237 Line 6 pt3 | MC 237 Line 6 pt4

Figure 2.2.1 – Medi-Cal Caseload Line 6 Backup Report Screenshot

Note: Only cosmetic changes are being made to the report template

2.2.3 Description of Change

1. Reactivate the Medi-Cal Caseload Line 6 Backup Report in CalSAWS.

Medi-Cal Caseload Line 6 Backup Report Column Definitions

Column Name	Column Description
Total	Total Medi-Cal programs from the previous month's report that were active at the end of report month. This value is equal to the count of all records on the sheet. **Note:** This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the program as of the last day of the report month.
Case Name	The case name associated with the program.
Case Number	The case number associated with the program.
Primary Applicant	The primary applicant associated with the program.
Date of Application	The date the Medi-Cal application was submitted. Format: MM/DD/YYYY
Created on	The date the program record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

The population for this sheet is all Medi-Cal programs from the previous month's report that were active as of the last day of the report month.

2. Convert Medi-Cal Caseload Line 6 Backup Report from an On-Request report to a Scheduled report.
   a. Generate this report monthly for the Medi-Cal caseload of programs carried forward in the previous month. This report should be generated after the fiscal and auto-termination processes have been completed for the report month.

      The detail information in this report should reconcile with the Line 6 summary counts of the Medi-Cal Caseload Report.

      Technical Note: This report reads from the same sweep job described in the section above for the Medi-Cal Caseload report.

4. Make the following updates to the report template to align with current report cosmetic standards:
    a. Move the 'Total' field on all sheets to the top of the report.
    b. Update all worksheet headers to include the following three lines:
        i. County Name formatted as "County Name"
        ii. Run Date formatted as "Run Date: MON-DD-YY HH:MM AM/PM"
        iii. Report Month formatted as "Report Month: MM/YYYY"

    Note: See attached report template mockup in Supporting Documents for expected report cosmetic standards.

2.2.4 Report Location

- **Global: Reports**
- **Local: Scheduled**
- **Task: Case Activity**

Note: this location is the updated report location per the changes described in this SCR.

2.2.5 Counties Impacted

All CalSAWS counties will be impacted by the changes described in this section.

2.2.6 Security Updates

No updates to security. The right to view the Medi-Cal Caseload Line 6 Backup Report will be maintained as a Scheduled report by the same security groups that it had as an On-Request Report.

2.2.7 Report Usage/Performance

This report is expected to be viewed as much as the Quality Review Caseload Report which is viewed 3-4 times per month.

2.3 Medi-Cal Caseload Line 13 Backup Report

2.3.1 Overview

Implement a new monthly Medi-Cal Caseload Line 13 Backup Report that will provide person level details for the entire active Medi-Cal population in the report month.

2.3.2 Medi-Cal Caseload Line 13 Backup Report Mockup

CalSAWS **Medi-Cal Caseload Line 13 Backup Report**

San Bernardino
Run Date: NOV-10-2020 12:16 AM
Report Month: 10/2020
Line item 13a - Distinct Persons (Adults)

Total: 4

Worker ID	Case Name	Case Number	Person Name	Aid Code	Date of Application	Created On
36ES02CV0A	Ellie Nicks	2609687	Ellie Nicks	03	03/20/2020	08/06/2020
36ES02CV0A	Ellie Nicks	2609687	Belly Nicks	03	03/23/2020	08/06/2020
36ES07180I	David Davis	1605281	David Davis	03	09/03/2013	08/06/2020
36ES07180I	David Davis	1605281	Ben Davis	03	09/03/2013	08/06/2020

Adults | Children

Figure 2.3.1 – Medi-Cal Caseload Line 13 Backup Report - Adults Sheet Mockup

CalSAWS **Medi-Cal Caseload Line 13 Backup Report**

San Bernardino
Run Date: NOV-10-2020 12:16 AM
Report Month: 10/2020
Line item 13a - Distinct Persons (Children)

Total: 3

Worker ID	Case Name	Case Number	Child Name	Aid Code	Date of Application	Created On
36ES04RD0U	Nelly Nicks	2430768	Jelly Nicks	M5	11/19/2019	12/18/2019
36ES04RD0U	Nelly Nicks	2430768	Deli Nicks	M6	11/19/2019	12/18/2019
36ES07200D	George Georgetown	2880644	George Georgetown	M7	01/31/2016	02/04/2016

Adults | Children

Figure 2.3.2 – Medi-Cal Caseload Line 13 Backup Report - Children Sheet Mockup

2.3.3 Description of Change

1. Create a Medi-Cal Caseload Line 13 Backup Report.

2. Generate this report monthly for all Medi-Cal program persons who were active as of the last day of the report month. This report should be generated after the fiscal and auto-termination processes have been completed for the report month.

The detail information in this report should reconcile with the Line 13 summary counts of the Medi-Cal Caseload Report.

Technical Note: This report reads from the same sweep job described in the section above for the Medi-Cal Caseload report.

3. The report will contain two sheets – 'Adults' and 'Children' and will have the following columns defined in the tables below.

Adults Sheet Column Definitions

Column Name	Column Description
Total	Total persons on the sheet. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the case as of the last day of the report month.
Case Number	The case number of the case the active Medi-Cal program is on.
Person Name	The name of the person on the active Medi-Cal program. Format: First Name Last Name
Aid Code	The aid code associated to the person on the active Medi-Cal program as of the last day of the report month.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY
Created On	The date the program record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

This sheet will contain all distinct adults on an active Medi-Cal program as of the end of the report month.

Children Sheet Column Definitions

Column Name	Column Description
Total	Total children on the sheet. Note: This is a dynamic total and will change based on the filters selected on this sheet.
Worker ID	The worker ID assigned to the case at the time the report is generated.
Case Name	The name of the case the active Medi-Cal program is on.
Case Number	The case number of the case the active Medi-Cal program is on.

Child Name	The name of the child on the active Medi-Cal program. Format: First Name Last Name
Aid Code	The aid code associated to the child on the active Medi-Cal program.
Date of Application	The date the application for the program was submitted. Format: MM/DD/YYYY
Created On	The date the program record was entered in the report's staging table by the report sweep job. Format: MM/DD/YYYY

This sheet will contain all distinct children on an active Medi-Cal program as of the end of the report month.

See the Supporting Documents for the report template mockup.

2.3.4 Report Location

- **Global: Reports**
- **Local: Scheduled**
- **Task: Case Activity**

2.3.5 Counties Impacted

All CalSAWS counties will be impacted by the changes described in this section.

2.3.6 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
MediCalCaseloadLine13BackupReport	This right gives access to view the Medi-Cal Caseload Line 13 Backup Report	Caseload Reports, LRS Reports Access - Operational Reports

2. Security Groups

No updates to security groups – all security groups mapped to the new security right above are existing.

2.3.7 Report Usage/Performance

This report is expected to be viewed as much as the Quality Review Caseload Report which is viewed 3-4 times per month.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Reports	Medi-Cal Caseload Report Mockup	Medi-Cal Caseload Report Mockup
2	Reports	Medi-Cal Caseload Line 6 Backup Report Mockup	Medi-Cal Caseload Line 6 Backup Report
3	Reports	Medi-Cal Caseload Line 13 Backup Report Mockup	Medi-Cal Caseload Line 13 Backup Repor
4	Reports	Security Matrix for Medi-Cal Caseload Line 13 Backup Report	Security Matrix

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1631	The CONTRACTOR shall set aside an allowance of nine thousand hours (9,000) to create new reports or update existing reports as part of Migration for the 58 Counties. These reports will be defined during the migration design effort. The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement. As requirements for the new reports are identified, they 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 revised or new reporting requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the 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.	- Migrate the Medi-Cal Caseload Report and Medi-Cal Caseload Line 6 Backup Report from C-IV to CalSAWS and convert them from on-request reports to scheduled monthly reports - Create a new monthly scheduled Medi-Cal Caseload Line 13 Backup Report

5 MIGRATION IMPACTS

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

6 APPENDIX

Background on the Exclusion of CMSP cases from the Medi-Cal Caseload Report

When this report was initially created, the CMSP 237 was already in place for the CMSP counties, but a "regular" MC 237 didn't exist in C-IV, since it was no longer a required state report. However, the counties wanted the "MC Caseload" report for management purposes and wanted to have it structured in the familiar state report style.

This meant that the report requirements were not directed by state policy, but by the reports committee, with input from the MC program folks. The decision was made to exclude the CMSP caseload from the MC Caseload Report to avoid double-counting that population since the CMSP 237 report already existed.

Around the same time, program app redesign was in full swing. This report was the first new major caseload report to be implemented with program app events as the main driver for the report logic.

To summarize so far:

1) New MC 237 aka MC Caseload Report was to be structured like a state report, and to exclude CMSP.
2) Program App redesign (EVENT, PGM_APP_EVENT, PERS_APP_EVENT) was leveraged for this report.

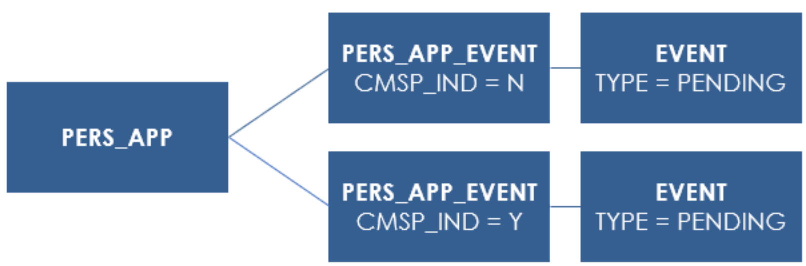
Excluding CMSP is always easier said than done. A few things to consider about CMSP:

1) CMSP is person level and distinguishable from non-CMSP by PERS_APP_EVENT.CMSP_IND = 'Y' or aid code.
2) Removing active CMSP individuals from person counts is straightforward. When querying the database, if the initial pull finds an active MC program person, the logic must drill down to the PERS_APP_EVENT.CMSP_IND and verify that the person does not have an approval or rescind-approval event associated to a PERS_APP_EVENT with a 'Y' under CMSP_IND.
3) For case/program level counts, all individuals on the case must be inspected to confirm at least one active person on the case has a non-CMSP approval event as their most recent event in order to classify the entire case as "countable" in the report.
4) For Application Counts, the same logic applies.
    a. If an application is new in the month (pended) and approved, and at least one person on the application is approved with a non-CMSP indicator, that program application is counted in the New App line and the Approved application line. This works because the overall PGM_APP and PGM_APP_EVENT history shows the program application as having been approved.

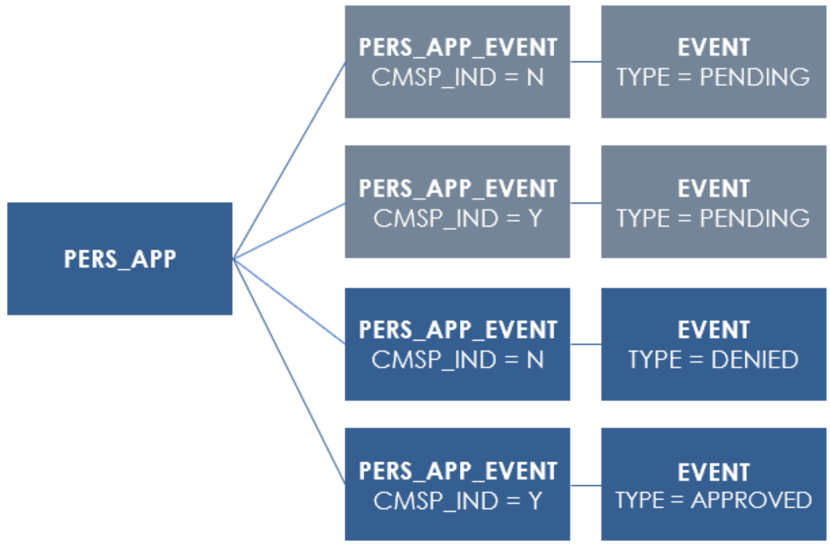
b. If the application is new in the month, and everyone is denied for regular MC and CMSP, then the app is counted as a new application and a denial. Again, like 4)a. the overall PGM_APP and PGM_APP_EVENT history will show the program application as having been denied.
c. If the application is new in the month, and everyone is denied for regular MC and at least one person is approved for CMSP, then things get tricky. The program level data shows approved. The regular MC person event data is all denied, and the CMSP person event data is approved. Since CMSP-only cases are not counted on the report, the repot logic will consider this scenario as a denial for regular MC. This means there is program-level data which shows approved in the system, but denied in the report, since the approval is for CMSP only.
d. For carried forward applications, similar to the above. The report will first check the history of events for each person on the potentially carried forward case to ensure that the case isn't open in the database for CMSP only. Similar to 4)c. above, for applications being considered as denied, the carry forward case counts drop the case if the program level data shows active-ongoing for CMSP only persons.

CMSP Application Flow – In the Database

From a database perspective, CMSP programs are distinguishable from regular MC by aid code or PERS_APP_EVENT.CMSP_IND = Y. When a person applies for CMSP, A PERS_APP record is created with two PERS_APP_EVENT records associated to it. One PERS_APP_EVENT record has CMSP_IND = Y and one has CMSP_IND = N so the CMSP and MC halves of the application can be tracked separately. Both PERS_APP_EVENT records are associated with Pending EVENT records.

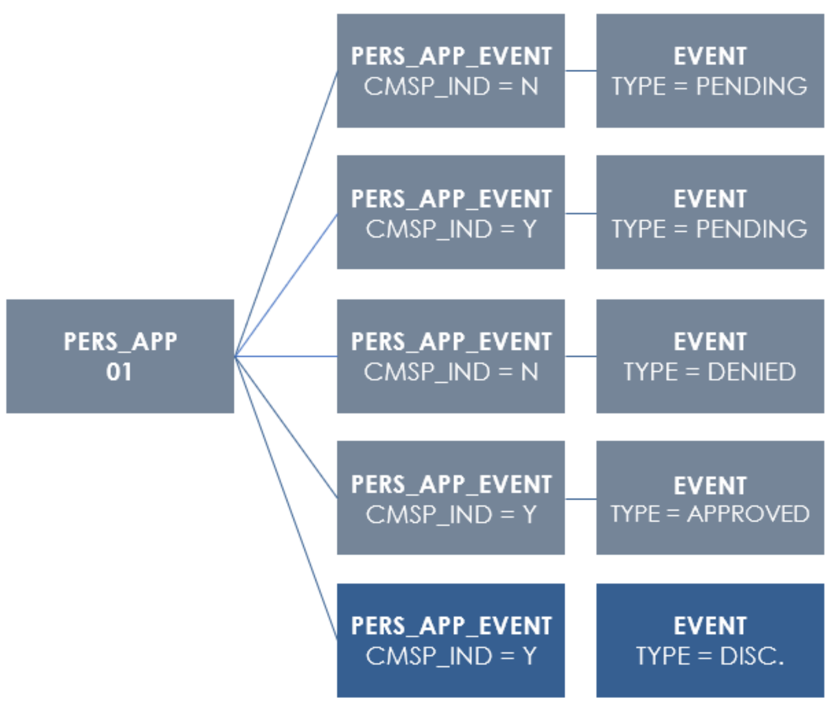


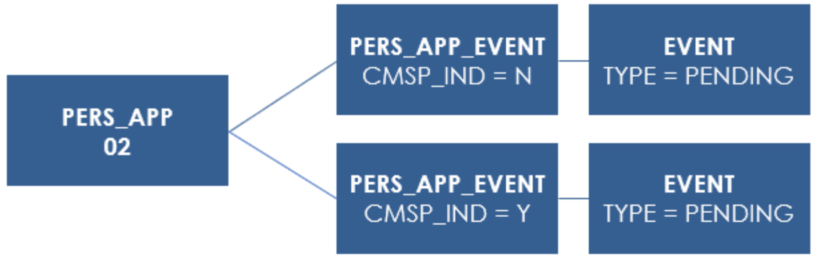
When EDBC is run and the application is dispositioned, the system will make appropriate PERS_APP_EVENT and associated EVENT records for both MC and CMSP depending on which passes or fails. When an application is approved for CMSP, MC is denied.



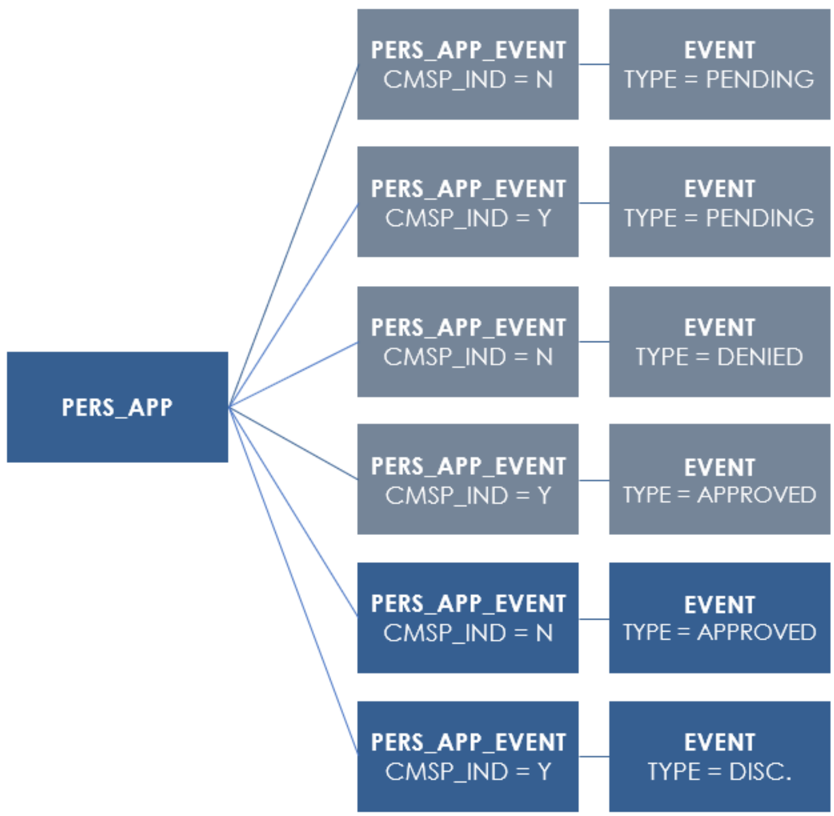
From here, a person might continue receiving CMSP, transition to regular MC or eventually stop receiving aid altogether. If they transition to regular MC they would then be expected to be included in this report. There are two scenarios in which a person might transition from CMSP to MC:

Scenario 1: Transitioning with a New Application
In this scenario, the person's CMSP eligibility period (~6 months) ends, and they reapply for aid with a new application. The current PERS_APP will have a Discontinued event for their CMSP portion and a new PERS_APP record will be created with associated EVENTs.





Scenario 2: Transitioning with the Same Application
In this scenario, the person gains MC eligibility while still active on CMSP. The CMSP portion of their application is discontinued via a new PERS_APP_EVENT record with CMSP_IND = Y and associated Discontinued EVENT record and the MC portion is reopened and approved via a new PERS_APP_EVENT record with CMSP_IND = N and associated Approved EVENT record.



CalSAWS

California Statewide Automated Welfare System

Design Document

CA-202854

Implement the IVR Inbound Outbound Report

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Greg Deogracia
	Reviewed By	Ravneet Bhatia, Thao Ta

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
1/28/2020	1.0	Initial Release	Greg Deogracia

Table of Contents

1 OVERVIEW

For C-IV CalSAWS migration planning, SCR CA-202554 was created to enable the IVR Inbound / Outbound Report in Calsaws. At this time, only C-IV counties will be utilizing the report with future planning being reviewed to enable reporting for LRS/Region 6.

1.1 Current Design

Users residing in a C-IV county with a Customer Service Center have access to detailed inbound Interactive Voice Response (IVR) data through EGain. Summary reports containing inbound and outbound IVR information are manually generated and sent to the Regional Project Managers via the project status report on a bi-monthly basis.

1.2 Requests

1. Migrate the C-IV IVR Inbound/Outbound Report, report logic and Report Parameters to CalSAWS.
2. Enable the report for C-IV counties only.

Note: It is also currently planned that future considerations will be made for accommodation of LRS / Region 6 IVR Inbound/Outbound Reports.

1.3 Overview of Recommendations

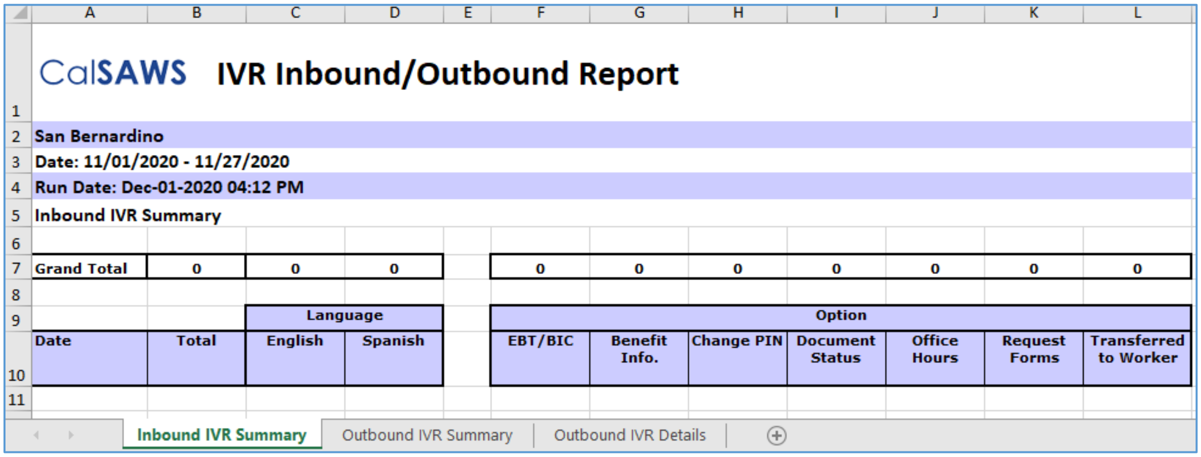
1. Migrate the C-IV IVR Inbound/Outbound Report, report logic and Report Parameters to CalSAWS.
2. Enable the report for C-IV counties only.

1.4 Assumptions

1. No Impact to other reports.
2. It is currently planned that future considerations will be made for accommodation of LRS / Region 6 IVR Inbound/Outbound Reporting.
3. Reports shall be updated and formatted under existing tools and current Excel version Workbook (*.xlsx).

2 RECOMMENDATIONS

2.1 IVR Inbound/Outbound Report Mockup



CalSAWS IVR Inbound/Outbound Report

San Bernardino

Date: 11/01/2020 - 11/27/2020

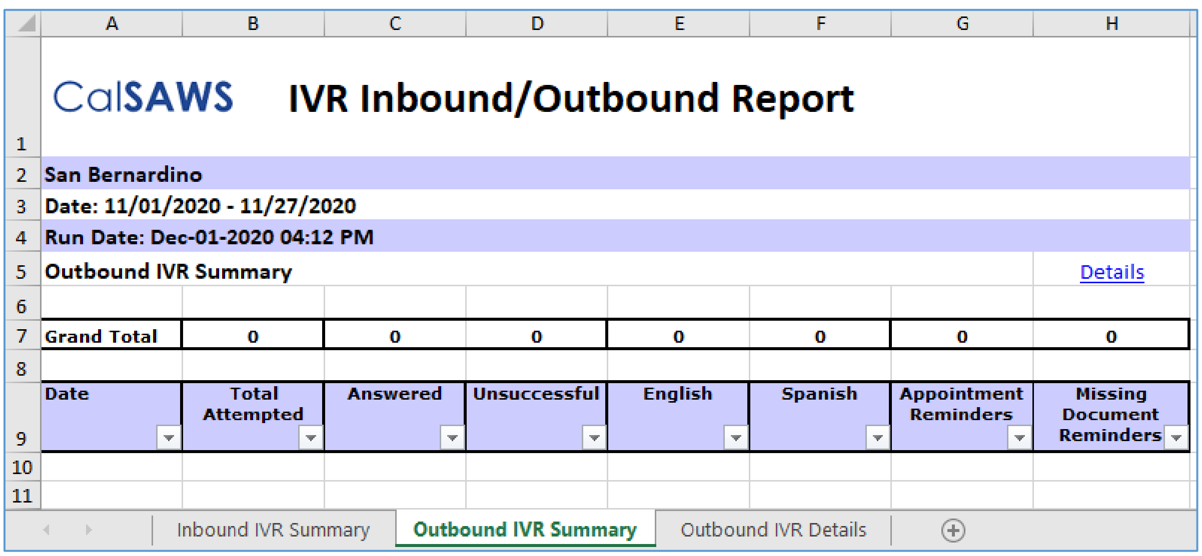
Run Date: Dec-01-2020 04:12 PM

Inbound IVR Summary

Grand Total	0	0	0		0	0	0	0	0	0	0
		Language			Option						
Date	Total	English	Spanish		EBT/BIC	Benefit Info.	Change PIN	Document Status	Office Hours	Request Forms	Transferred to Worker

Inbound IVR Summary | Outbound IVR Summary | Outbound IVR Details

Figure 2.1.1 – Inbound IVR Summary



CalSAWS IVR Inbound/Outbound Report

San Bernardino

Date: 11/01/2020 - 11/27/2020

Run Date: Dec-01-2020 04:12 PM

Outbound IVR Summary | Details

Grand Total	0	0	0	0	0	0	0
Date	Total Attempted	Answered	Unsuccessful	English	Spanish	Appointment Reminders	Missing Document Reminders

Inbound IVR Summary | Outbound IVR Summary | Outbound IVR Details

Figure 2.1.2 – Outbound IVR Summary

CalSAWS **IVR Inbound/Outbound Report**

San Bernardino

Date: 11/01/2020 - 11/27/2020

Run Date: Dec-01-2020 04:12 PM

Outbound IVR Details Summary

Total:	0

Date	Case Number	Case Name	Person Name	Language	Worker	Answered/ Unsuccessful	Type

Inbound IVR Summary | Outbound IVR Summary | Outbound IVR Details

Figure 2.1.3 – Outbound IVR Details

2.1.1 Description of Change

Changes are not required to the IVR Inbound/Outbound Report itself with the exception of CalSAWS Logo update – there are no logic modification required.

1. Migrate the C-IV IVR Inbound/Outbound Report to CalSAWS
2. Migrate C-IV IVR Inbound/Outbound Report logic to CalSAWS
3. Enable reporting for C-IV counties only

All Report columns are defined as below:

Inbound IVR Summary Columns

Column Header	Description
Date	The date of the IVR inbound call within selected Report Parameters formatted as MM/DD/YYYY.
Total	The total number of IVR inbound calls for the specified Date value.
Language: English	The total number of IVR inbound calls for the specified Date value in English.
Language: Spanish	The total number of IVR inbound calls for the specified Date value in Spanish.
Option: EBT/BIC	The total number of times an IVR inbound call for the specified Date went through the EBT/BIC option.
Option: Benefit Info.	The total number of times an IVR inbound call for the specified Date went through the Benefit Information option.
Option: Change PIN	The total number of times an IVR inbound call for the specified Date went through the Change PIN option.
Option: Document Status	The total number of times an IVR inbound call for the specified Date

	went through the Document Status option.
Option: Office Hours	The total number of times an IVR inbound call for the specified Date went through the Office Hours option.
Option: Request Forms	The total number of times an IVR inbound call for the specified Date went through the Request Forms option.
Option: Transferred to Worker	The total number of times an IVR inbound call for the specified Date went through the Transferred to Worker option.

Outbound IVR Summary Columns

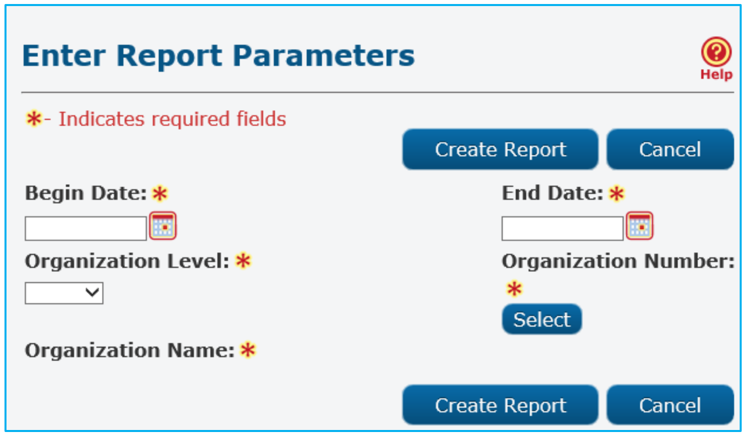
Column Header	Description
Date	The date of the IVR outbound call within selected Report Parameters formatted as MM/DD/YYYY.
Total Attempted	The total number of IVR outbound call attempts that were made on the specified Date.
Answered	The total number of IVR outbound calls for the specified Date that were answered.
Unsuccessful	The total number of IVR outbound calls for the specified Date that were not answered.
English	The total number of IVR outbound calls for the specified Date that were not in Spanish.
Spanish	The total number of IVR outbound calls for the specified Date that were in Spanish.
Appointment Reminders	The total number of IVR outbound calls for the specified Date that were regarding Appointment Reminders.

Missing Document Reminders	The total number of IVR outbound calls for the specified Date that were regarding Missing Document Reminders.

Outbound IVR Details Columns

Column Header	Description
Date	The Date that the IVR outbound call was placed within selected Report Parameters formatted as MM/DD/YYYY.
Case Number	The Case Number of the Case that the IVR outbound call was placed for.
Case Name	The Case Name of the Case that the IVR outbound call was placed for.
Person Name	The first and last name of the person that the IVR outbound call was placed for.
Language	The Language that the IVR outbound call was placed in. English or Spanish will populate in this column only.
Worker	The Worker Number of the worker associated to the Call Log record of the IVR outbound call.
Answered/Unsuccessful	This column will populate Answered if the IVR outbound call was recorded as being answered, otherwise, this column will populate with Unsuccessful. Possible values are: • Answered • Unsuccessful
Type	The Type of the IVR outbound call. Possible Values are: • Appointment/Activity • Missing Document

2.1.2 Report Parameters



1. Migrate C-IV IVR Inbound/Outbound Report Parameters and configuration to CalSAWS

   Report Parameter selections:

   - **Begin Date:** Restricts the base population of the report to include records where the IVR inbound and outbound call dates are on or after the Begin Date.
   - **End Date:** Restricts the base population of the report to include records where the IVR inbound and outbound call dates are on or before End Date.
   - **Organization Level:** County (one option)
   - **Organization Number:** Defaults to UserID County

2.1.3 Report Location

Global: Reports
Local: On Request
Task: Administrative
Title: IVR Inbound/Outbound Report
Description: Provides statistical summary information for IVR inbound and outbound calls as well as supporting details for IVR outbound calls.

2.1.4 Counties Impacted

No change to current county entitlement configuration.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Reports	IVR Inbound Outbound Report Mockup.xlsx	IVR Inbound_Outbounc

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.24.4.4	The LRS shall include ad hoc capabilities that allow COUNTY-specified Users to create multiple ad hoc reports simultaneously, as specified by COUNTY.	This SCR is migrating existing reports as needed by the counties.

5 OUTREACH

N/A

6 APPENDIX

N/A

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-204497

SB 1341 All County Solution

Phase 3 Mixed Action Medi-Cal NOAs

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Tiffany Huckaby
	Reviewed By	TBD

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
1/30/2020	0.1	Initial Design	Tiffany Huckaby
12/2/2020	0.2	Updated based on SB 1341 Phase 2 implementation and other system updates since first design	Tiffany Huckaby
2/9/2021	0.3	Updated Design with clarification around MC Footer generation	Tiffany Huckaby

Table of Contents

1 OVERVIEW

This is Phase 3 of the effort to update Mixed non-MAGI/MAGI noticing in CalSAWS. As part of this phase non-MAGI and MAGI NOA text will be merged into one NOA across differing Action types.

1.1 Current Design

Currently CalSAWS only merges non-MAGI and MAGI text onto the same NOA when generated for the same Action type (Approval, Change, Denial, Discontinuance).

1.2 Requests

NOAs for mixed Medi-Cal households (programs containing persons that have noticing for both non-MAGI and MAGI benefits) should merge regardless of Action type.

Note: This will not change the current functionality where NOAs only generate per month per Medi-Cal program. Currently, if there are two Medi-Cal programs on the same case both will be noticed separately.

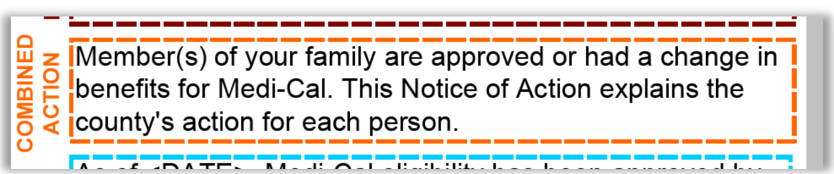
1.3 Overview of Recommendations

Listed below is a brief description of the recommendations required to create a mixed Action Medi-Cal NOA.

Note: This will not change non-MAGI only NOAs or MAGI only NOAs. The below only applies to the situation that a household contains persons that require noticing for both non-MAGI and MAGI benefits within the same month.

1. Add a new Combined Action Statement Fragment. This Fragment will generate at the beginning of the NOA and list all the action types listed on the NOA.

    For Example:

2. Update the existing Action Statement Fragment logic from the previous phase (SCR CA-204496). The existing Action Statements for the mixed non-

MAGI/MAGI NOA will be updated to generate on the same NOA. The NOA will generate these fragments for all actions that will be provided on the NOA.

For Example:

> ACTION LISTING
>
> As of <DATE>, Medi-Cal eligibility has been approved by the following member(s) of your family:
>
> Name(s):
> <LIST_OF_APPROVED_NONMAGI_MAGI_PERSONS>
>
> As of <DATE>, Medi-Cal eligibility or share of cost or premium will change for the following member(s) of your family:
>
> Name(s):
> <LIST_OF_CHANGE_NONMAGI_MAGI_PERSONS>

3. Update existing non-MAGI/MAGI NOAs to allow for merging across action type. This will allow an NOA to generate when there is noticing of both non-MAGI and MAGI benefits and there is more than one action taking place on the program.

4. Add logic to order the Action Fragments in the following hierarchy:

   - *Individual Approval fragments (both non-MAGI and MAGI)*

   For Example,

> APPROVAL ACTION
>
> As of <BEG_DATE>, <PERSON_NAME> will get <SCOPE_TYPE> Medi-Cal services under the MAGI program.
>
> **<NAME>**
>
> You qualify for Medi-Cal because your household income is below the Medi-Cal limit. Your eligibility for Medi-Cal begins <MonthDayYear1>. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes.

   - *Program level Message fragments tied to Approvals (both non-MAGI and MAGI)*

   For Example,

APPROVAL PROGRAM MESSAGE

If your family's income, property, or circumstances change, you must report this to your worker within ten (10) days. The name and phone number of your worker is listed above on this notice.

Note: Program level messages will only generate once on an NOA. The message will generate for the first applicable action type. For example, if the same message is generating for both the approval fragments and change fragments the message will only generate on the NOA in the section after the approval fragments.

- *Individual Change fragments (both non-MAGI and MAGI)*

For Example:

CHANGE ACTION

As of <BEG_DATE>, <PERSON_NAME> has a change in eligibility.

<NAME>

Good news! Your Medi-Cal is changing to full-scope on <MonthDayYear1> because your income and/or household size changed. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes.

We counted your household size and income to make our decision.

For Medi-Cal, your household size is <MagiSize> and your household income is <MagiIncome>. The Medi-Cal income limit for your household size is <MagiIncomeLimit>. Your income is below this limit, so you qualify for full-scope Medi-Cal.

<MagiRegulation> is the regulation or law we relied on for this decision.

- *Program level Message fragments tied to Changes (both non-MAGI and MAGI)*

For Example:

CHANGE PROGRAM MESSAGES

Ineligible members of your family may get Benefits Identification Cards (BICs) if your family has a share of cost. Take your plastic BIC with you each time you receive medical care. Your plastic card will show your medical provider if you have a share of cost.

Ineligible members of your family should present their plastic BICs to their medical provider to help pay for your family's share of cost. Keep your plastic card with you at all times.

Note: Program level messages will only generate once on an NOA. The message will generate for the first applicable action type. For example, if the same message is generating for both the approval fragments and change fragments the message will only generate on the NOA in the section after the approval fragments.

- *Individual Denial fragments (both non-MAGI and MAGI)*

  For Example:

DENIAL ACTION

Medi-Cal is being denied for:
<NON_MAGI_PERSONS>

The reason for this denial is because you have not provided us with proof of the following information:

<Verifications>

We asked you for the information, but we have not received it and it is essential in determining your Medi-Cal eligibility.

- *Program level Message fragments tied to Denials (both non-MAGI and MAGI)*

  For Example:

DENIAL PROGRAM MESSAGE

DO NOT THROW AWAY YOUR BENEFITS IDENTIFICATION CARD (BIC).

You can use it again if you become eligible or are eligible for another Medi-Cal program.

Note: Program level messages will only generate once on an NOA. The message will generate for the first applicable action type. For example, if the same message is generating for both the denial fragments and discontinuance fragments, the message will only generate on the NOA in the section after the denial fragments.

- *Individual Discontinuance fragments (both non-MAGI and MAGI)*

For Example:

DISCONTINUANCE ACTION

Your eligibility to receive Medi-Cal will be discontinued effective <EffectiveDiscontinuanceDate>.

Medi-Cal benefits will be discontinued for:
<NON_MAGI_PERSONS>

Here's why:

You requested that Medi-Cal benefits be stopped.

- *Program level Message fragments tied to Discontinuances*

For Example:

DISCONTINAUNCE PROGRAM MESSAGE

DO NOT THROW AWAY YOUR BENEFITS IDENTIFICATION CARD (BIC).

You can use it again if you become eligible or are eligible for another Medi-Cal program.

Note: Program level messages will only generate once on an NOA. The message will generate for the first applicable action type. For example, if the same message is generating for both the denial fragments and discontinuance fragments, the message will only generate on the NOA in the section after the denial fragments.

- *Medi-Cal Footer*

The Footer that generates will be based on the Action types of the NOA.

For Approval/Change NOA and there does not exist a Denial or Discontinuance Action:

Do you have any changes?

MAGI FOOTER

Over the next year, you must report any life changes that affect your eligibility for Medi-Cal. You must report within **10** days after the change happened. For example, you must contact us if:

- Your income changes.
- Your household changes, such as you marry, divorce, become pregnant, or have or adopt a child; a person moves into or out of your home; or you change who will be on your tax return.
- You qualify for other health insurance.
- You move. If you move to a new county, you can report your change to your old or new county.

You may report changes to your local county office in person or by mail, fax, phone, or electronically. The contact information is on the first page of this notice.

For a NOA containing at least one Denial/Discontinuance Action:

Do you have any changes? Over the next year, you are obligated to report any changes that would affect your health insurance within 10 days of such a change. You are obligated to contact us if:

- You move.
- Your income changes; or
- Your household changes, for example, you marry/divorce, become pregnant, or have a child(ren)
- You become qualified for other health insurance

To report changes, please contact your county office using one of the following ways:

- Telephone:
- In person:
- Fax:
- Office Hours:

To report changes, please contact your county office using one of the following ways:

- County Worker:
- County Worker ID:

If you already have a Benefits Identification Card (BIC), do not throw it away.
You should keep using that card. If you have never received a BIC, one will be mailed to you soon. If you previously received a BIC but no longer have that BIC, contact your worker for a replacement. The BIC has the information your provider needs to check your Medi-Cal eligibility. You should bring the BIC to your medical provider whenever you need care.

Questions? If you have questions or need assistance please contact (989) 456-3221

This notice is required by the Affordable Care Act per regulation 42 C.

5. Update the NOA Title that generates on non-MAGI/MAGI NOAs when generating with more than one action type. The NOA title will generate the following:

   a. The NOA has both Approval and Change Actions:

NOTICE OF ACTION
MEDI-CAL APPROVAL
AND CHANGE

b. The NOA has both Approval and Denial Actions:

NOTICE OF ACTION
MEDI-CAL APPROVAL
AND DENIAL

c. The NOA has both Approval and Discontinuance Actions:

NOTICE OF ACTION
MEDI-CAL APPROVAL
AND DISCONTINUANCE

d. The NOA has both Change and Denial Actions:

NOTICE OF ACTION
MEDI-CAL CHANGE
AND DENIAL

e. The NOA has both Change and Discontinuance Actions:

NOTICE OF ACTION
MEDI-CAL CHANGE
AND DISCONTINAUNCE

f. The NOA has both Denial and Discontinuance Actions:

NOTICE OF ACTION
MEDI-CAL DENIAL
AND DISCONTINUANCE

g. The NOA has an Approval, Change, and Denial Action:

NOTICE OF ACTION
MEDI-CAL APPROVAL,
CHANGE, AND DENIAL

h. The NOA has an Approval, Change, and Discontinuance Action:

NOTICE OF ACTION
MEDI-CAL APPROVAL, CHANGE,
AND DISCONTINUANCE

i. The NOA has an Approval, Denial, and Discontinuance Action:

NOTICE OF ACTION
MEDI-CAL APPROVAL, DENIAL,
AND DISCONTINUANCE

j. The NOA has a Change, Denial and Discontinuance Action:

NOTICE OF ACTION
MEDI-CAL CHANGE, DENIAL,
AND DISCONTINUANCE

k. The NOA has an Approval, Change, Denial, and Discontinuance Action:

NOTICE OF ACTION
MEDI-CAL APPROVAL, CHANGE, DENIAL, AND DISCONTINUANCE

1.4 Assumptions

1. MSP, CMSP, Non-MAGI only and MAGI only NOAs will continue to generate with the same order of fragments as they did prior to this update.
2. No changes to NOA regulations are required.
3. No changes to the text, generation, or population of existing NOA fragments will be required outside of those listed specifically in this design.
4. No changes to the logic that generates MAGI or non-MAGI NOAs (household being notified of only MAGI or non-MAGI benefits) will be made with this effort.
5. The mixed non-MAGI/MAGI NOAs will continue to generate in a columned NOA format.
6. The same fragments that generate on a mixed non-MAGI/MAGI NOA from the previous phase (Phase 2: CA-204496) will continue to generate on the NOA in this phase and no new fragments will generate on the mixed NOA with the exception of the ones added with Recommendation 2.1 and 2.5.
7. No updates are required to the Document Name (hyperlink) populated on the Document List page. The Document Name will continue to populate as it does today with only an update to allow for the population of multiple Actions (See Recommendation 2.5). The NOA titles being added in this phase are only applicable to the title provided on the top of the Notice.
8. Existing NOA fragments will continue to generate in all currently available languages. No new translations will be added with this effort for existing fragments.
9. The No Change NOA (added in 19.09 with CA-202724) will not be impacted with this change. This NOA will generate separately from the NOAs in this effort.
10. Medi-Cal mixed non-MAGI/MAGI NOAs will continue to generate the non-MAGI budgets immediately following the applicable reasons as was updated in the prior phase (Phase 2: CA-204496).
11. When there is more than one Medi-Cal program in a case, there will be one mixed MAGI/Non-MAGI NOA per program block per saved EDBC.
12. There will be no updates to the number of pages for envelopes or any restrictions on NOA length with this SCR. Phase 5 (CA-204499) of this effort will review and add, if necessary, a batch skip report for "Over page limitation".

2 RECOMMENDATIONS

2.1 Adding a New Combined Action NOA Fragment

2.1.1 Overview

This effort is adding a new Combined Action fragment. This fragment will generate to notify the household of the different actions taking place on the individuals on the program.

State Form/NOA: N/A, Committee provided language
Program(s): Medi-Cal (only for Mixed non-MAGI/MAGI NOAs)
Action Type: Approval, Change, Denial, Discontinuance
Fragment Level: Program
Repeatable: No, generates once per NOA

Languages:

Armenian, Cambodian, Chinese, English, Korean, Russian, Spanish, Tagalog, Vietnamese

Note: Other Threshold Languages supported by the system are not included above due to missing supporting Medi-Cal Fragments that are not currently also translated in the system.

2.1.2 Description of Change

To add the new Combined Action NOA fragment into the system, the following recommendations will provide the details around adding the text, variable population, and fragment generation conditions.

2.1.2.1 Create Combined Action NOA Fragment XDP

Create a new XDP to add the new NOA Fragment into the system.

NOA Mockups/Examples: See Supporting Documents #1-4

Description	Text	Formatting*
Main Fragment (Static)	Member(s) of your family <LIST_OF_ACTIONS> for Medi-Cal. This Notice of Action explains the county's action for each person.	Arial Font Size 10

*English only, Spanish and threshold will generate based on project standards for that language.

2.1.2.2 Add Combined Action NOA Fragment Generation

This fragment will generate when the following is true:

- Both MAGI and non-MAGI fragments are generating on an NOA.
- There are at least two action types (Approval, Change, Denial, Discontinuance) generating:
  - The MAGI and non-MAGI person-level fragments have differing action types.

  or
  - The MAGI person-level fragments have differing action types.

  or
  - The non-MAGI person-level fragments have differing action types.

Ordering on NOA: This will generate as the second fragment on the NOA. This will follow the MAGI Header fragment. See mockup in Supporting Documents #1-4.

2.1.2.3 Add Combined Action NOA Fragment Variable Population

There will be one variable that will be populated in this new NOA fragment.

Variable Name	Population	Formatting*
LIST_OF_ACTIONS	When one of the following person-level actions are generating on the NOA populate with the following: • At least one person is being approved (not RE): "have been approved" • At least one person is being denied: "have been denied" • At least one person is being discontinued: "have been discontinued" • At least one person has a change in benefits: "had a change in benefits" • At least one person has a change in benefits at RE: "have been renewed" Note: the text 'or' will be concatenated between each different action verbiage Example of variable in NOA fragment: "Member(s) of your family have been approved or had a change in benefits for Medi-Cal. This Notice of Action explains the county's action for each person." The variable population will be in the following order: • Approval (not RE) • Re-Approval (at RE) • Change	Arial Font Size 10

	• Denial • Discontinuance	

*English only, Spanish and threshold will generate based on project standards for that language.

Variables Requiring Translations: LIST_OF_ACTIONS

2.2 Update NOA Individual non-MAGI/MAGI Action Statements

2.2.1 Overview

Update the existing NOA Individual non-MAGI/MAGI Action Statement logic to generate for each type of action generating on the NOA. These fragments and logic were added in the previous phase (SCR CA-204496). See Supporting Documents #5 for existing fragment text.

Action Fragment Name and ID:
Approval Fragment: MC_H_AP_COMBINED_ACTION, ID: 4143
Change Fragment: MC_H_CH_COMBINED_ACTION, ID: 4149
Denial Fragment: MC_H_DN_COMBINED_ACTION, ID: 4148
Discontinuance Fragment: MC_H_TN_COMBINED_ACTION, ID: 4150
State Form/NOA: N/A, Committee Created
Current Program(s): Medi-Cal (non-MAGI and MAGI)
Current Action Type: Approvals, Changes, Denials, Discontinuances
Current Fragment Level: Program
Currently Repeatable: No (see Recommendation 2.2.2.1 for updates)

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

2.2.2 Description of Changes

The existing Individual non-MAGI/MAGI Action Statements will be updated for the mixed non-MAGI/MAGI NOAs to generate per action type.

2.2.2.1 Updates to Fragment Generation

Update the existing fragment generation logic to now generate this language once for each action type (approval, change, denial, discontinuance) on the generated mixed non-MAGI/MAGI NOAs.

New Program Generation: No, this will continue to generate only for mixed non-MAGI/MAGI program NOAs.
New Action Type: No, this will continue to generate for the same action types.

Update to Fragment Level: No, this will continue to generate at the program level.
Repeatable: Yes, this will be updated to repeat per action type (only once per Fragment). Currently the Individual non-MAGI/MAGI Action Statement language will only generate once on an NOA. The logic will be updated to repeat the statement for each action type that will be noticed on the NOA. See Supporting Documents #1-4 for mockup examples.

Ordering on NOA: This language will generate after the new Combined Action NOA fragment from Recommendation 2.1. The Individual non-MAGI/MAGI Action Statements will generate in the following order:

- Approval Fragment: MC_H_AP_COMBINED_ACTION, ID: 4143
- Change Fragment: MC_H_CH_COMBINED_ACTION, ID: 4149
- Denial Fragment: MC_H_DN_COMBINED_ACTION, ID: 4148
- Discontinuance Fragment: MC_H_TN_COMBINED_ACTION, ID: 4150

2.3 Updates to existing Medi-Cal mixed non-MAGI/MAGI generation logic

2.3.1 Overview

This effort is updating the mixed non-MAGI/MAGI NOAs to generate more than one action type on the same NOA. For this to happen the existing NOA generation logic needs to be updated to allow the different action types to merge onto the same NOA.

2.3.2 Description of Change

Remove the mixed non-MAGI/MAGI NOA logic that separates NOAs based on action type. Update the existing mixed non-MAGI/MAGI NOA logic to add merging logic for differing actions on the same NOA. (See Recommendation 2.4 for NOA fragment hierarchy)

2.4 Adding Action Hierarchy to Medi-Cal mixed non-MAGI/MAGI NOAs

2.4.1 Overview

Section 2.3 will update the existing mixed non-MAGI/MAGI NOA logic to allow for more than one type of action to generate on the same NOA. This effort will add logic to order the existing action fragments on the NOA.

2.4.2 Description of Change

Add logic to order the mixed non-MAGI/MAGI NOA fragments in the below hierarchy: (Note: This will not change the generation of fragments that are not listed below, for example headers and budgets. This will also not change the order of the non-MAGI/MAGI fragments based off the previous Phase SCR CA-204496 Section 2.11.) See Supporting Documents #1-4 for example NOAs.

1. ***Individual Approval type fragments (both non-MAGI and MAGI)***
   See Supporting Documents #7 and 8 for Fragment Text.

Non-MAGI Approval Action Fragments

ID	Fragment Name	Available Languages*
4044	MC_AP_ACTION2	EN, SP, AE, CA, CH, KO, RU, TG, VI
4045	MC_AP_ACTION3	EN, SP, AE, CA, CH, KO, RU, TG, VI
4046	MC_AP_ACTION8	EN, SP
4048	MC_AP_ACTION5	EN, SP, AE, CA, CH, KO, RU, TG, VI
4050	MC_AP_ACTION4	EN, SP, AE, CA, CH, KO, RU, TG, VI

Non-MAGI Approval Reason Fragments

ID	Fragment Name	Available Languages*
6504	MC_AP_MC_PARTIAL_APP_DEN_NOA_M024	EN, SP
6544	MC_AP_INDIV_OVER_21_IN_MENTAL_HLTH_M092	EN, SP
6558	MC_AP_PASS_PICKLE_INCOME_M127	EN
6559	MC_AP_RESTRICT_MC_NO_SOC_M129	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6560	MC_AP_RESTRICT_MC_WITH_SOC_M130	EN, SP, AE, CA, CH, KO, RU, TG, VI
6561	MC_AP_MC_FULL_SCOPE_APP_NOSOC_M131	EN, SP, AE, CA, CH, KO, RU, TG, VI
6562	MC_AP_MC_FULL_SCOPE_APP_WITH_SOC_M132	EN, SP, AE, CA, CH, KO, RU, TG, VI
6563	MC_AP_RETRO_MC_APPROVED_FULL_SCOPE_M133	EN, SP, AE, CA, CH, KO, RU, TG, VI
6564	MC_AP_RESTRICT_RETRO_MC_M134	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6565	MC_AP_APPROVED_PRUCOL_M140	EN, SP
6584	MC_AP_A_AND_D_FPL_FULL_SCOPE_M175	EN, SP, AE, CA, CH,

		KO, RU, TG, VI
6585	MC_AP_A_AND_D_FPL_RESTRICTED_M176	EN, SP
6589	MC_AP_ICT_RESTRICT_AID_WITH_SOC_M183	EN, SP
6590	MC_AP_ICT_RESTRICT_AID_NO_SOC_M184	EN, SP
6591	MC_AP_ICT_FULL_AID_NO_SOC_M185	EN, SP
6592	MC_AP_ICT_FULL_AID_WITH_SOC_M186	EN, SP
6596	MC_AP_DRA_RESTRICT_WITH_SOC_M193	EN, SP
6597	MC_AP_DRA_2_RESTRICT_WITH_SOC_M194	EN, SP
7629	MC_AP_RESTRICT_MC_NO_SOC_M224	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7630	MC_AP_RESTRICT_RETRO_MC_M225	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI

Non-MAGI Approval Person-Level Message Fragments:

ID	Fragment Name	Available Languages*
5053	MC_AP_MESSAGE9	EN, SP, AE, CA, CH, KO, RU, TG, VI

MAGI Approval Action Fragments:

ID	Fragment Name	Available Languages*
4144	H_AP_ACTION1	EN, SP, AE, CA, CH, KO, RU, TG, VI

MAGI Approval Reason Fragments:

ID	Fragment Name	Available Languages*
7003	H_AP_FULL_SCOPE_RETRO_H901	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7004	H_AP_FULL_SCOPE_APP_H902	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7005	H_AP_RENEWAL_NO_CHANGE_H903	EN, SP, AE, AR, CA, CH,

ID	Fragment Name	Available Languages*
		FA, HM, KO, RU, TG, VI
7006	H_AP_LIMITED_SCOPE_RETRO_H904	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7007	H_AP_LIMITED_SCOPE_APP_H905	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7008	H_AP_RESTRICTED_SCOPE_RETRO_H906	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7009	H_AP_RESTRICTED_SCOPE_APP_H907	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7010	H_AP_ACCELERATED_ENROLLMENT_APP_H908	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7011	H_AP_FULL_SCOPE_APPROVAL_WITH_PREMIUM _APP_H909	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7026	H_AP_RESTRICTED_SCOPE_APPROVAL_W_PREMIUM _APP_H910	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7453	H_AP_PREG_TEEN_INC_DISREGARD_H406	EN, SP
7626	H_AP_RESTRICTED_SCOPE_APP_H912	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7625	H_AP_RESTRICTED_SCOPE_RETRO_H911	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI

2. ***Program level Message fragments tied to Approvals (both non-MAGI and MAGI)***
   See Supporting Documents #7 for Fragment Text.

<u>Non-MAGI Approval Program level Message Fragments:</u>

ID	Fragment Name	Available Languages*

5121	MC_AP_CH_DEEMED_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5122	MC_AP_TEN_DAYS_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5123	MC_AP_CH_INELIGIBLE_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5124	MC_AP_CHILD_BIC_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5125	MC_AP_CH_BIC_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5127	MC_AP_CH_MCAP_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI

Note: At the time of this Design there are no existing MAGI Program Level type Messages. At which time a MAGI Program Level Message fragment is added it will also generate at this tier of the hierarchy. The existing MAGI footers will continue to generate at the end of the NOA as Designed in the previous Phase (SCR CA-204496 Section 2.11).

3. ***Individual Change fragments (both non-MAGI and MAGI)***
See Supporting Documents #8 and 9 for Fragment Text.

Non-MAGI Change Action Fragments:

ID	Fragment Name	Available Languages*
4039	MC_CH_ACTION2	EN, SP, AE, CA, CH, KO, RU, TG, VI
4042	MC_CH_ACTION3	EN, SP, AE, CA, CH, KO, RU, TG, VI
4078	MC_CH_ACTION4	EN, SP

Non-MAGI Change Reason Fragments:

ID	Fragment Name	Available Languages*
6598	MC_CH_DRA_RESTRICT_NO_SOC_M195	EN, SP
6599	MC_CH_DRA_RESTRICT_WITH_SOC_M196	EN
6664	MC_CH_INCR_NONEXEMPT_INCOME_M750	EN, SP, AE, CA, CH, KO, RU, TG, VI
6665	MC_CH_DECR_NONEXEMPT_INCOME_M751	EN, SP, AE, CA, CH, KO, RU, TG, VI
6670	MC_CH_SOC_SEC_BENFT_INCR_SOC_CHANGED_M761	EN, SP, AE, CA, CH, KO, RU, TG, VI
6674	MC_CH_HH_DECR_SOC_CHNG_LTC_M765	EN
6675	MC_CH_SOC_CHANGE_M766	EN, SP
6325	MC_CH_RESTR_TO_FULL_M160	EN, SP, AE, CA, CH, FA,

		KO, RU, TG, VI
6573	MC_CH_ALIEN_STATUS_VERIF_FAIL_M159	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7631	MC_CH_ALIEN_STATUS_VERIF_FAIL_M780	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7632	MC_CH_RESTR_TO_FULL_M781	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI

Non-MAGI Change Person-Level Message Fragments:

ID	Fragment Name	Available Languages*
5054	MC_CH_MESSAGE4	EN, SP
5056	MC_CH_MESSAGE6	EN, SP

MAGI Change Action Fragments:

ID	Fragment Name	Available Languages*
4145	H_CH_ACTION1	EN, SP, AE, CA, CH, KO, RU, TG, VI

MAGI Change Reason Fragments:

ID	Fragment Name	Available Languages*
7027	H_CH_FULL_SCOPE_TO_RESTRICTED_SCOPE_H801	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7028	H_CH_RESTRICTED_SCOPE_TO_FULL_SCOPE_H802	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7029	H_CH_FULL_SCOPE_TO_LIMITED_SCOPE_H803	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7031	H_CH_LIMITED_SCOPE_TO_FULLED_SCOPE_H804	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI

ID	Fragment Name	Available Languages*
7032	H_CH_PREMIUME_TO_NO_PREMIUM_H805	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7033	H_CH_NO_PREMIUME_TO_PREMIUM_H806	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7628	H_CH_RESTRICTED_SCOPE_TO_FULL_SCOPE_H808	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7627	H_CH_FULL_SCOPE_TO_RESTRICTED_SCOPE_H807	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI

4. ***Program level Message fragments tied to Changes (both non-MAGI and MAGI)***

   See Supporting Documents #8 for Fragment Text.

   Only Program level Message fragments that have not generated in the Approval Program level Message section of the NOA. (See #2 of the hierarchy) Program level Message fragments will not generate more than once on an NOA.

<u>Non-MAGI Change Program level Message Fragments:</u>

ID	Fragment Name	Available Languages*
5121	MC_AP_CH_DEEMED_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5123	MC_AP_CH_INELIGIBLE_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5125	MC_AP_CH_BIC_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5127	MC_AP_CH_MCAP_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5128	MC_CH_MMCHP_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5129	MC_CH_TITLE_TWO_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI

Note: At the time of this Design there are no existing MAGI Program Level type Messages. At which time a MAGI Program Level Message fragment is added it will also generate at this tier of the hierarchy. The existing MAGI footers will continue to generate at the end of the NOA as Designed in the previous Phase (SCR CA-204496 Section 2.11).

5. ***Individual Denial fragments (both non-MAGI and MAGI)***
See Supporting Documents #10 and 11 for Fragment Text.

Non-MAGI Denial Action Fragments:

ID	Fragment Name	Available Languages*
4034	MC_DN_ACTION1	EN, SP, AE, CA, CH, KO, RU, TG, VI
4037	MC_DN_ACTION2	EN, SP
4038	MC_DN_ACTION3	EN, SP, AE, CA, CH, KO, RU, TG, VI
4041	MC_DN_ACTION4	EN, SP
4053	MC_DN_ACTION7	EN, SP
4095	MC_DN_ACTION9	EN
4108	MC_DN_ACTION10	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI

Non-MAGI Denial Reason Fragments:

ID	Fragment Name	Available Languages*
6314	MC_DN_RETRO_FAIL_DETER_VERIF_M411	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6503	MC_DN_RCA_RECIPIENT_M023	EN, SP, AE, CA, CH, KO, RU, TG, VI
6505	MC_DN_MC_SSI_DEN_NOA_M024	EN, SP
6511	MC_DN_INDIV_APP_NOT_IN_HOME_M030	EN, SP
6512	MC_DN_CLIENT_REQ_FOR_DEN_M031	EN, SP, AE, CA, CH, KO, RU, TG, VI
6513	MC_DN_WHRABTS_UNKNWN_M032	EN, SP
6522	MC_DN_PERS_AGE_VIOL_M041	EN, SP
6526	MC_DN_RSRCS_EXCEED_LIMIT_M052	EN, SP, AE, CA, CH, KO, RU, TG, VI
6608	MC_DN_HIC_NUM_VERIF_M301	EN, SP
6620	MC_DN_MC_SUPP_COOP_FAIL_M320	EN, AE, CA, CH, KO, RU, TG, VI
6621	MC_DN_NO_LINKAGE_M325	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6622	MC_DN_NOT_MEET_BLINDNESS_RULES_M327	EN, SP, CA, CH, KO, VI
6626	MC_DN_OVERLAP_AID_M333	EN, SP, AE, CA, CH, KO, RU, TG, VI
6631	MC_DN_NOT_A_CTZN_M345	EN, SP

ID	Fragment Name	Available Languages*
6634	MC_DN_PICKLE_NOT_CITIZEN_M349	EN, SP
6895	MC_DN_FAIL_DETER_VERIF_M410	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7590	MC_DN_NON_COOP_CHILD_NON_COMP_M424	EN, SP
7589	MC_DN_NAME_IDENTITY_NON_COMP_M423	EN, SP
7580	MC_DN_REFUSED_DIB_NON_COMP_M414	EN, SP
7583	MC_DN_REFUSED_SDI_NON_COMP_M417	EN, SP
7584	MC_DN_REFUSED_UIB_NON_COMP_M418	EN, SP

Non-MAGI Denial Person-Level Message Fragments:

ID	Fragment Name	Available Languages*
5084	MC_DN_MESSAGE6	EN

MAGI Denial Action Fragments:

ID	Fragment Name	Available Languages*
4090	H_DN_ACTION1	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
4091	H_DN_ACTION2	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
4146	H_DN_ACTION3	EN, SP, AE, CA, CH, KO, RU, TG, VI

MAGI Denial Reason Fragments:

ID	Fragment Name	Available Languages*
6890	H_DN_FAIL_REDETER_VERIF_H410	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6891	H_DN_RETRO_FAIL_DETER_VERIF_H411	EN, SP
7034	H_DN_NOT_CA_RESIDENT_H101	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7035	H_DN_RETRO_NOT_CA_RESIDENT_H201	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7036	H_DN_WRITTEN_WITHDRAWAL_H102	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI

ID	Fragment Name	Available Languages*
7037	H_DN_RETRO_WRITTEN_WITHDRAWAL_H202	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7038	H_DN_CHILD_APPLIED_FOR_SELF_H103	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7039	H_DN_RETRO_CHILD_APPLED_FOR_SELF_H203	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7040	H_DN_DUPLICATE_APPLICATION_H104	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7041	H_DN_RETRO_DUPLICATE_APPLICATION_H204	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7043	H_DN_ON_AID_ANOTHER_CASE_H105	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7044	H_DN_RETRO_ON_AID_ANOTHER_CASE_H205	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7045	H_DN_DECEASED_H106	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7046	H_DN_RETRO_DECEASED_H206	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7047	H_DN_WHEREABOUTS_UNKNOWN_H107	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7048	H_DN_RETRO_WHEREABOUTS_UNKNOWN_H207	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7049	H_DN_RECEIVES_SSI_H108	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7051	H_DN_RETRO_RECEIVES_SSI_H208	EN, SP, AE, AR, CA, CH,

ID	Fragment Name	Available Languages*
		FA, HM, KO, RU, TG, VI
7450	H_DN_CAT_INELIG_H403	EN, SP
7452	H_DN_RETRO_CAT_INELIG_H404	EN, SP
7566	H_DN_DID_NOT_APPLY_MEDICARE_NON_COMP_H422	EN, SP
7565	H_DN_FTP_THIRD_PARTY_LIABILITY_NON_COMP_H421	EN, SP
7567	H_DN_NAME_IDENTITY_NON_COMP_H423	EN, SP
7568	H_DN_NON_COOP_CHILD_NON_COMP_H424	EN, SP
7602	H_DN_REFUSED_DIB_NON_COMP_H414	EN, SP
7603	H_DN_REFUSED_MILITARY_BENEFITS_NON_COMP_H415	EN, SP
7560	H_DN_REFUSED_RETIREMENT_NON_COMP_H416	EN, SP
7561	H_DN_REFUSED_SDI_NON_COMP_H417	EN, SP
7562	H_DN_REFUSED_UIB_NON_COMP_H418	EN, SP
7563	H_DN_REFUSED_VA_NON_COMP_H419	EN, SP
7564	H_DN_REFUSED_WORKER_COMP_NON_COMP_H420	EN, SP
7737	H_DN_TN_MFJ_SPOUSE_INFO_H115	EN, SP

MAGI Denial Person-Level Message Fragments:

ID	Fragment Name	Available Languages*
5070	H_DN_MESSAGE1	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI

6. ***Program level Message fragments tied to Denials (both non-MAGI and MAGI)***

See Supporting Documents #10 for Fragment Text.

Only Program level Message fragments that have not generated in the Approval or Change Program level Message sections of the NOA. (See #2 and #4 of the hierarchy) Program level Message fragments will not generate more than once on an NOA.

Non-MAGI Denial Program level Message Fragments:

ID	Fragment Name	Available Languages*
5126	MC_DN_TN_BIC_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5130	MC_DN_TN_SEPARATE_NOA_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI

Note: At the time of this Design there are no existing MAGI Program Level type Messages. At which time a MAGI Program Level Message fragment is added it will also generate at this tier of the hierarchy. The existing MAGI footers will continue to generate at the end of the NOA as Designed in the previous Phase (SCR CA-204496 Section 2.11).

7. ***Individual Discontinuance fragments (both non-MAGI and MAGI)***
See Supporting Documents #12 and 13 for Fragment Text.

Non-MAGI Discontinuance Action Fragments:

ID	Fragment Name	Available Languages*
4035	MC_TN_ACTION1	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
4043	MC_TN_ACTION2	EN, SP, AE, CA, CH, KO, RU, TG, VI
4055	MC_TN_ACTION5	EN, SP, AE, CA, CH, KO, RU, TG, VI
4056	MC_TN_ACTION6	EN, SP
4057	MC_TN_ACTION7	EN, SP
4059	MC_TN_ACTION4	EN, SP, AE, CA, CH, KO, RU, TG, VI
4109	MC_TN_ACTION9	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI

Non-MAGI Discontinuance Reason Fragments:

ID	Fragment Name	Available Languages*
6502	MC_TN_DISCON_SENTENCED_JAIL_OR_INSTITUTION_M020	EN, SP
6506	MC_TN_SSI_RCPNT_M024	EN, SP, AE, CA, CH, KO, RU, TG, VI
6509	MC_TN_PERS_NOT_LNKD_PROG_M028	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6510	MC_TN_INDIV_DESCEASED_M029	EN, SP
6514	MC_TN_WHRABTS_UNKNWN_M032	EN, SP, AE, CA, CH, KO, RU, TG, VI
6515	MC_TN_ICT_OUT_TERM_M033	EN, SP
6525	MC_TN_RSRCS_EXCEED_LIMIT_M052	EN, SP, AE, CA, CH, KO, RU, TG, VI
6543	MC_TN_COUNTY_RES_VERIF_FAIL_M080	EN, SP
6569	MC_TN_SOC_TO_NO_SOC_INCOME_DECREASE_M154	EN, SP, AE, CA, CH, KO, RU, TG, VI
6578	MC_TN_TMC_NO_ELIG_CHILD_IN_HOME_M169	EN, SP
6579	MC_TN_TMC_GROSS_INC_EXD_LIMIT_M170	EN, SP
6586	MC_TN_A_AND_D_FPL_INCOME_OVER_LIMIT_M177	EN, SP
6619	MC_TN_MC_SUPP_COOP_FAIL_M320	EN, SP, AE, CA, CH, KO, RU, TG, VI
6624	MC_TN_NO_CHILD_UNDER_21_M331	EN
6627	MC_TN_OVERLAP_AID_M333	EN, SP
6636	MC_TN_CEC_CHILD_TURNED_19_M352	EN, SP, AE, CA, CH, KO, RU, TG, VI

ID	Fragment Name	Available Languages*
6637	MC_TN_CEC_WHREABTS_UNKNOWN_M353	EN, SP, AE, CA, CH, KO, RU, TG, VI
6642	MC_TN_CEC_ENDS_CHILD_MOVES_M358	EN, SP, AE, CA, CH, KO, RU, TG, VI
6643	MC_TN_CEC_OVERLAP_AID_M359	EN, SP, AE, CA, CH, KO, RU, TG, VI
6646	MC_TN_CEC_CLIENT_REQUEST_M362	EN, SP
6650	MC_TN_FAIL_IFDS_WITH_SOC_M367	EN, SP, AE, CA, CH, KO, RU, TG, VI
6651	MC_TN_FAIL_NHR_NO_SOC_M370	EN, SP, AE, CA, CH, KO, RU, TG, VI
6652	MC_TN_FAIL_NHR_WITH_SOC_M371	EN, SP, AE, CA, CH, KO, RU, TG, VI
6657	MC_TN_IC_MINOR_IN_JUVI_M395	EN, SP
6660	MC_TN_JUVI_MINOR_OVER_21_M398	EN, SP
6661	MC_TN_MINOR_JUVI_OVER_12_MONTHS_M399	EN, SP
6662	MC_TN_FAIL_PICKLE_REQUIREMENTS_M702	EN
6663	MC_TN_CLIENT-REQ_TERMINATION_M706	EN, SP, AE, CA, CH, KO, RU, TG, VI
6896	MC_TN_FAIL_VERIF_DETERM_M410	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6897	MC_TN_FAIL_REDETER_RESPONSE_M400	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6898	MC_TN_FAIL_REDETER_VERIF_M401	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7608	MC_TN_MC355_VERIF_NOT_RECEIVED_M425	EN, SP
7599	MC_TN_DID_NOT_APPLY_MEDICARE_NON_COMP_M422	EN, SP
7598	MC_TN_FTP_THIRD_PARTY_LIABILITY_NON_COMP_M421	EN, SP
7600	MC_TN_NAME_IDENTITY_NON_COMP_M423	EN, SP
7601	MC_TN_NON_COOP_CHILD_NON_COMP_M424	EN, SP
7591	MC_TN_REFUSED_DIB_NON_COMP_M414	EN, SP
7592	MC_TN_REFUSED_MILITARY_BENEFITS_NON_COMP_M415	EN, SP
7593	MC_TN_REFUSED_RETIREMENT_NON_COMP_M416	EN, SP
7594	MC_TN_REFUSED_SDI_NON_COMP_M417	EN, SP
7595	MC_TN_REFUSED_UIB_NON_COMP_M418	EN, SP
7596	MC_TN_REFUSED_VA_NON_COMP_M419	EN, SP
7597	MC_TN_REFUSED_WORKER_COMP_NON_COMP_M420	EN, SP

Non-MAGI Discontinuance Person-Level Message Fragments:

ID	Fragment Name	Available Languages*
5037	MC_TN_MESSAGE1	EN, SP, AE, CA, CH, KO, RU, TG, VI
5058	MC_TN_MESSAGE5	EN, SP, AE, CA, CH, KO, RU, TG, VI

MAGI Discontinuance Action Fragments:

ID	Fragment Name	Available Languages*
4092	H_TN_ACTION1	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
4147	H_TN_ACTION2	EN, SP, AE, CA, CH, KO, RU, TG, VI
7609	H_TN_MC355_VERIF_NOT _RECEIVED_H425	EN, SP

MAGI Discontinuance Reason Fragments:

ID	Fragment Name	Available Languages*
6322	H_TN_DECEASED_H106	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6323	H_TN_WHEREABOUTS_UNKNOWN_H107	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6324	H_TN_RECEIVES_SSI_H108	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6893	H_TN_FAIL_REDETERM_RESPONSE_H400	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
6894	H_TN_FAIL_REDETER_VERIF_H401	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7052	H_TN_NOT_CA_RESIDENT_H101	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI

ID	Fragment Name	Available Languages*
7053	H_TN_WRITTEN_DISCONTINUANCE_H102	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7054	H_TN_ON_AID_ANOTHER_CASE_H105	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7055	H_TN_STOP_AID_FOR_OPTIONAL_MEMBER_H109	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7057	H_TN_TMC_REPORT_INCOMPLETE_H110	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7059	H_TN_TMC_REPORT_NOT_RECVD_H111	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7067	H_TN_OVER_MAGI_INCOME_H113	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7068	H_TN_NON_PAYMENT_OF_PREMIUM_H112	EN, SP, AE, AR, CA, CH, FA, HM, KO, RU, TG, VI
7474	H_TN_MCAP_DISCONTINUANCE_H114	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI
7577	H_TN_DID_NOT_APPLY_MEDICARE_NON_COMP_H422	EN, SP
6892	H_TN_FAIL_DETER_VERIF_H410	EN
7576	H_TN_FTP_THIRD_PARTY_LIABILITY_NON_COMP_H421	EN, SP
7578	H_TN_NAME_IDENTITY_NON_COMP_H423	EN, SP
7579	H_TN_NON_COOP_CHILD_NON_COMP_H424	EN, SP
7569	H_TN_REFUSED_DIB_NON_COMP_H414	EN, SP
7570	H_TN_REFUSED_MILITARY_BENEFITS_NON_COMP_H415	EN, SP
7571	H_TN_REFUSED_RETIREMENT_NON_COMP_H416	EN, SP
7572	H_TN_REFUSED_SDI_NON_COMP_H417	EN, SP
7573	H_TN_REFUSED_UIB_NON_COMP_H418	EN, SP
7574	H_TN_REFUSED_VA_NON_COMP_H419	EN, SP
7575	H_TN_REFUSED_WORKER_COMP_NON_COMP_H420	EN, SP
7738	H_DN_TN_MFJ_SPOUSE_INFO_H115	EN, SP

MAGI Discontinuance Person-Level Message Fragments:

ID	Fragment Name	Available Languages*
5072	H_TN_MESSAGE1	EN, SP, AE, CA, CH, FA, KO, RU, TG, VI

8. ***Program level Message fragments tied to Discontinuances (both non-MAGI and MAGI)***

   See Supporting Documents #12 for Fragment Text.

   Only Program level Message fragments that have not generated in the Approval, Change, or Denial Program level Message sections of the NOA. (See #2, #4, and #6 of the hierarchy) Program level Message fragments will not generate more than once on an NOA.

Non-MAGI Discontinuance Program level Message Fragments:

ID	Fragment Name	Available Languages*
5126	MC_DN_TN_BIC_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5130	MC_DN_TN_SEPARATE_NOA_MESSAGE	EN, SP, AE, CA, CH, KO, RU, TG, VI
5096	MC_TN_MESSAGE7	EN,SP

Note: At the time of this Design there are no existing MAGI Program Level type Messages. At which time a MAGI Program Level Message fragment is added it will also generate at this tier of the hierarchy. The existing MAGI footers will continue to generate at the end of the NOA as Designed in the previous Phase (SCR CA-204496 Section 2.11).

9. ***MAGI Footer logic***

   See Supporting Documents #14 for Fragment Text.

   Currently there are two Footers that generate for Medi-Cal. There exists a Footer for Approval and Change NOAs and one that exists for Denial and Discontinuance NOAs. For this effort we will be including the following footer for the below scenario:

NOA Actions	NOA Footer
Approval and Change	Approval/Change Footer Name: MC_H_AP_CH_STATIC_FOOTER ID: 5104

Approval and Denial	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Approval and Discontinuance	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Change and Denial	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Change and Discontinuance	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Denial and Discontinuance	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Approval, Change, and Denial	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Approval, Change, and Discontinuance	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Approval, Denial and Discontinuance	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083
Change, Denial, and Discontinuance	Denial/Discontinuance Footer

	Name: H_STATIC_FOOTER ID: 5083
Approval, Change, Denial, and Discontinuance	Denial/Discontinuance Footer Name: H_STATIC_FOOTER ID: 5083

2.5 Updates to Medi-Cal mixed non-MAGI/MAGI NOA Titles/Document Name

2.5.1 Overview

Section 2.3 is updating the mixed non-MAGI/MAGI NOA logic to allow for more than one action to populate on an NOA. This section will update the NOA Title that generates on non-MAGI/MAGI NOAs when generating with more than one action type.

Currently the Distributed Documents page populates the Document Name (hyperlink) with 'NOA', the program name 'MC', the Action type, and the applicable Reason. This effort will not change those standards and only update to allow for more than one Action type. (Note: Phase 5 SCR CA-204499 will look into potential updates to this population overall for mixed NOAs)

2.5.2 Description of Change

Below are the updates for NOA titles and the Document Name on the Distributed Documents page.

1. **Updates to NOA Titles**

   See Supporting Documents #1-4 for NOA Examples with new NOA titles.

   Add the following NOA titles to the mixed non-MAGI/MAGI NOA for the following scenarios (Note: all NOA Titles and Translations will follow the current text wrapping in the NOA Templates):

NOA Actions	NOA Title	Formatting*
Approval Change	NOTICE OF ACTION MEDI-CAL APPROVAL AND CHANGE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10

NOA Actions	NOA Title	Formatting*
Approval Denial	NOTICE OF ACTION MEDI-CAL APPROVAL AND DENIAL	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Approval Discontinuance	NOTICE OF ACTION MEDI-CAL APPROVAL AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Change Denial	NOTICE OF ACTION MEDI-CAL CHANGE AND DENIAL	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Change Discontinuance	NOTICE OF ACTION MEDI-CAL CHANGE AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Denial Discontinuance	NOTICE OF ACTION MEDI-CAL DENIAL AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Approval Change Denial	NOTICE OF ACTION MEDI-CAL APPROVAL, CHANGE, AND DENIAL	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Approval Change Discontinuance	NOTICE OF ACTION MEDI-CAL APPROVAL, CHANGE, AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Approval Denial Discontinuance	NOTICE OF ACTION MEDI-CAL APPROVAL, DENIAL, AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Change Denial Discontinuance	NOTICE OF ACTION MEDI-CAL CHANGE, DENIAL, AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10
Approval Change Denial Discontinuance	NOTICE OF ACTION MEDI-CAL APPROVAL, CHANGE, DENIAL, AND DISCONTINUANCE	First Line: Arial Font Bold Size 12 Second and Third Line: Arial Font Bold Size 10

*English only, Spanish and threshold will generate based on project standards for that language.

Note: NOA titles above will be added in the following languages that are currently supported for mixed non-MAGI/MAGI NOAs: English, Spanish, Armenian, Cambodian, Chinese, Korean, Russian, Tagalog, Vietnamese

2. Updates to Document Name on Distributed Documents

Update the Document Name on Distributed Documents to allow for population of all applicable Actions listed on the NOA.

Note: No change to the population of the Program or Reason for the Document Name.

NOA Actions	Distributed Documents Actions Listed
Approval Change	MAGI Approval and Change: HA HC
Approval Denial	MAGI Approval and Denial: HA HD
Approval Discontinuance	MAGI Approval and Discontinuance: HA HT
Change Denial	MAGI Change and Denial: HC HD
Change Discontinuance	MAGI Change and Discontinuance: HC HT
Denial Discontinuance	MAGI Denial and Discontinuance: HD HT
Approval Change Denial	MAGI Approval, Change, and Denial: HA HC HD
Approval Change Discontinuance	MAGI Approval, Change, and Discontinuance: HA HC HT
Approval Denial Discontinuance	MAGI Approval, Denial, and Discontinuance: HA HD HT
Change Denial Discontinuance	MAGI Change, Denial, and Discontinuance: HC HD HT
Approval Change Denial Discontinuance	MAGI Approval, Change, Denial, and Discontinuance: HA HC HD HT

3 SUPPORTING DOCUMENTS

Note: All Dynamic NOA Examples are provided for a visual idea of positioning, population formatting, and possible surrounding Fragments. They may include test data (fake names, dates, etc.) for population that may not be true values in production (addresses, income limits, etc.) or Variable placeholders. Any SCRs that are in progress or being completed after the Examples were created are not included within the Examples.

Number	Functional Area	Description	Attachment
1	NOA	Mixed Action Non-MAGI/MAGI NOA Examples (differing non-MAGI and MAGI Action types on an NOA) Note: Examples exclude the NA Back 9 that will generate on the back of the first page. Marked Section Examples are included to provide a visual of the hierarchy added with Recommendation 2.4.	Example NOAs: • Phase3_Two_Actions_Approvals.zip • Phase3_Two_Actions_Changes.zip • Phase3_Two_Actions_Denials.zip • Phase3_Two_Actions_Disc.zip Example NOAs with Marked Sections: • Phase3_M_Two_Actions_Approvals.zip • Phase3_M_Two_Actions_Changes.zip • Phase3_M_Two_Actions_Denials.zip • Phase3_M_Two_Actions_Disc.zip
2	NOA	Mixed Action Non-MAGI/MAGI NOA Examples (two types of non-MAGI Actions and one MAGI Action type on an NOA). Note: Examples exclude the NA Back 9 that will generate on the back of the first page. Marked Section Examples are included to provide a visual of the hierarchy added with Recommendation 2.4.	Example NOAs: Phase3_NonMagi_Three_Actions.zip Example NOAs with Marked Sections: Phase3_M_NonMagi_Three_Actions.zip
3	NOA	Mixed Action Non-MAGI/MAGI NOA Examples (one type of	Example NOAs: Phase3_Magi_Three_Actions.zip

Number	Functional Area	Description	Attachment
		non-MAGI Actions and two types of MAGI Actions on an NOA) Note: examples exclude the NA Back 9 that will generate on the back of the first page	Example NOAs with Marked Sections: Phase3_Magi_Thee_Actions.zip
4	NOA	Mixed Action Non-MAGI/MAGI NOA Examples (all four Action types on an NOA) Note: example excludes the NA Back 9 that will generate on the back of the first page	Example NOA: Phase 3 Non-MAGI AP&DN MAGI CH&TN Example v1.pdf Example NOA with Marked Sections: Phase 3 M Non-MAGI AP&DN MAGI CH&TN Example v2.pdf
5	NOA	MC Individual non-MAGI/MAGI Action Statement Text	See Phase 3 MC Individ Action Statement Fragments.pdf
6	NOA	MC Approval Fragment Text	See • Phase 3 MC Approval Action Fragments.pdf • Phase 3 MC Approval Reason Fragments.pdf • Phase 3 MC Approval Message Fragments.pdf
7	NOA	MAGI Approval Fragment Text	See Phase 3 MAGI Approval Fragments.pdf
8	NOA	MC Change Fragment Text	See • Phase 3 MC Change Action Fragments.pdf • Phase 3 MC Change Reason Fragments.pdf • Phase 3 MC Change Message Fragments.pdf

Number	Functional Area	Description	Attachment
9	NOA	MAGI Change Fragment Text	See Phase 3 MAGI Change Fragments.pdf
10	NOA	MC Denial Fragment Text	See • Phase 3 MC Denial Action Fragments.pdf • Phase 3 MC Denial Reason Fragments.pdf • Phase 3 MC Denial Message Fragments.pdf
11	NOA	MAGI Denial Fragment Text	See Phase 3 MAGI Denial Fragments.pdf
12	NOA	MC Discontinuance Fragment Text	See • Phase 3 MC Discontinuance Action Fragments.pdf • Phase 3 MC Discontinuance Reason Fragments.pdf • Phase 3 MC Discontinuance Message Fragments.pdf
13	NOA	MAGI Discontinuance Fragment Text	See Phase 3 MAGI Discontinuance Fragments.pdf
14	NOA	Medi-Cal Footer Fragment Text	See Phase 3 MC Footer Fragments.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.1.6	The LRS shall combine multiple actions within a single NOA, including all appropriate reasons for each proposed action taken, and shall include a single consolidated calculations/computations showing the net result(s) of all changes made by program or combination of programs, as specified by COUNTY.	This effort will be combining the Medi-Cal Action types onto one flowed document to show combined results of the Medi-Cal program.

5 OUTREACH

N/A

6 APPENDIX

N/A

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207312 | DDID 1476, 1775, 2303

Consolidate Central Print Process for all 58 Counties

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/25/2021	1.0	Initial Revision	Rainier Dela Cruz

Table of Contents

1 OVERVIEW

1.1 Current Design

Currently in C-IV, there are three mailing priorities: 0, 1, or 4. Priority 0 is used for the SAR7/SAR2 form, priority 4 is used for the redetermination (RE) packets, and other forms and Notices of Action (NOAs) are assigned priority 1. There is a batch process for each of the mailing priority to bundle forms and NOAs together.

In CalSAWS, there are ten mailing priorities, from 0 to 9. Priority 0 is used for the SAR7/SAR2 form, priority 2 is used for the PA 6049 form, and priority 3 is used for the PA 320 form. Priority 4 is used for the redetermination (RE) packets and priority 5 are used for the MC 176 TMC form. For priorities 6 and 7, they are used for controlled forms. A prepaid envelope is included with priority 6 forms and a non-prepaid envelope is included with priority 7 forms. Priority 8 is used for MAGI NOAs and priority 9 is used for Department of Family and Children Services (DCFS) Blue Voucher. Other forms and NOAs are assigned priority 1. Like C-IV, there is a batch process for each of the mailing priority to bundle the forms and NOAs together. However, they currently only run for Los Angeles County.

1.2 Requests

Consolidate the Central Print process for all 58 counties by consolidating the mailing priorities and replicating the existing bundling batch processes in CalSAWS for the migration counties.

1.3 Overview of Recommendations

1. Update the mailing priority for forms and NOAs.
2. Schedule the bundling and print file batch processes for the C-IV Counties.
3. Create new bundling and print file batch processes for the CalWIN Counties.
4. Update the bundling batch property to increase the maximum page limit for the flat mail and standard mail envelopes.
5. Update the naming convention for the bundles to not include the agency code for the migration counties.
6. Conduct central print testing with the new CalSAWS print vendor.

1.4 Assumptions

1. The bundle name for Los Angeles County will continue to include the agency code (DC for DCFS, DP for DPSS).

2. The only form with a mail priority of 2 is the PA 6049 (Customer Service Center ID Card). Since this form is only for Los Angeles County, the bundling batch processes for mail priority 2 will not be created for the migration counties.

3. The only form with a mail priority of 3 is the PA 320 (Vendor Service Order and Invoice). Since this form is only for Los Angeles County, the bundling batch processes for mail priority 3 will not be created for the migration counties.

4. The only form with a mail priority of 5 is the MC 176 TMC (Transitional Medi-Cal Quarterly Status Report). As part of SCR **CA-213514**, BRM will be added to the form and the mailing priority will be updated to 1. As a result, mail priority 5 will no longer be in use.

5. All the forms with a mail priority of 6 will be updated to include a BRM and the priority updated to 1 as part of SCR **CA-224183**. As a result, mail priority 6 will no longer be in use.

6. Forms with mailing priority of 7 and are for all counties will be updated to include a BRM and the priority updated to 1 as part of SCR **CA-224183**. SCR **CA-225229** will update the CW 86 to the 9/11 version, make it available to all counties, include a BRM and set the mailing priority to 1. Los Angeles County only forms will continue to be priority 7 and a non-prepaid envelope included at the print center. Since these forms are only for Los Angeles County, the bundling batch processes for mail priority 7 will not be created for the migration counties.

7. The MAGI NOAs are currently mail priority 8. These NOAs will be moved to mail priority 1. As a result, mail priority 8 will no longer be in use.

8. The only form with a mail priority of 9 is the DFCS 1800 (Blue Payment Voucher). Since this form is only for Los Angeles County, the bundling batch processes for mail priority 9 will not be created for the migration counties.

2 RECOMMENDATIONS

2.1 Update the Mailing Priority

2.1.1 Overview

Update the mailing priority of the MAGI NOAs and SAR 7 Addendum/SAR 2/SAR 7.

2.1.2 Description of Change

1. Update the print dynamic NOA logic to set the mail priority to 1 for MAGI NOAs.

2. Update the mailing priority for the SAR 7 Addendum/SAR 2/SAR 7 form to priority 0.

2.2 Schedule the Bundling Batch Jobs for the C-IV Counties

2.2.1 Overview

The bundling batch jobs for the C-IV Counties currently exist in CalSAWS but are not scheduled to run. Update the scheduling of these jobs to run daily.

2.2.2 Description of Change

1. Schedule the following batch jobs for the C-IV Counties:
   a. PBXXP400 – Priority 0 Bundling Job
   b. PBXXP401 – Priority 1 Bundling Job
   c. PBXXP404 – Priority 4 Bundling Job

   Note: *The 'XX' denotes the county code. For example, PB36P400 is the priority 0 bundling job for San Bernardino.*

2.2.3 Execution Frequency

These batch jobs run daily.

2.2.4 Key Scheduling Dependencies

These batch jobs have the same predecessor and successor as the Los Angeles County jobs.

2.2.5 Counties Impacted

C-IV Migration Counties.

2.2.6 Data Volume/Performance

Approximately 60,000 records are processed monthly by the PBXXP400 job. Approximately 1,620,000 records are processed monthly by the PBXXP401 job. Approximately 134,000 records are processed monthly by the PBXXP404 job. Please note that the number of records processed by each job is an approximation, and this number may vary.

2.2.7 Failure Procedure/Operational Instructions

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

2.3 Schedule the Print File Batch Jobs for the C-IV Migration Counties

2.3.1 Overview

The print file batch jobs scan the generate document table to find forms and NOAs that are printed centrally. It creates an entry in the print file table with information such as mailing priority, customer name, document name, outgoing envelope type, etc. for each document. This information is used by the bundling jobs. These batch jobs for the C-IV Migration Counties currently exist in CalSAWS but are not scheduled to run. Update the scheduling of these jobs to run daily

2.3.2 Description of Change

1. Schedule the following batch jobs for the C-IV Migration Counties:
    a. PBXXP200 – Print File Job for Forms
    b. PBXXP300 – Print File Job for NOAs

2.3.3 Execution Frequency

These batch jobs run daily.

2.3.4 Key Scheduling Dependencies

These batch jobs have the same predecessor and successor as the Los Angeles County jobs.

2.3.5 Counties Impacted

C-IV Migration Counties.

2.3.6 Data Volume/Performance

Approximately 977,000 records are processed monthly by the PBXXP200 job. Approximately 832,000 records are processed monthly by the PBXXP300 job. Please note that the number of records processed by each job is an approximation, and this number may vary.

2.3.7 Failure Procedure/Operational Instructions

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

2.4 Create the Bundling Batch Jobs for the CalWIN Migration Counties

2.4.1 Overview

The bundling batch jobs do not exist for the CalWIN Migration Counties in CalSAWS. Create the batch jobs for the CalWIN Migration Counties.

2.4.2 Description of Change

1. Create the following batch jobs for the CalWIN Migration Counties.
    a. PBXXP400 – Priority 0 Bundling Job
    b. PBXXP401 – Priority 1 Bundling Job
    c. PBXXP404 – Priority 4 Bundling Job

2.4.3 Execution Frequency

These batch jobs run daily.

2.4.4 Key Scheduling Dependencies

These batch jobs have the same predecessor and successor as the Los Angeles County jobs.

2.4.5 Counties Impacted

CalWIN Migration Counties.

2.4.6 Data Volume/Performance

The information for the CalWIN Migration Counties is not currently available, however, it is expected to approximately process the same number of records as the C-IV Migration Counties.

2.4.7 Failure Procedure/Operational Instructions

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

2.5 Create the Print File Batch Jobs for the CalWIN Migration Counties

2.5.1 Overview

The print file batch jobs do not exist for the CalWIN Migration Counties in CalSAWS. Create the batch jobs for the CalWIN Migration Counties.

2.5.2 Description of Change

1. Create the following batch jobs for the CalWIN Migration Counties:
    a. PBXXP200 – Print File Job for Forms
    b. PBXXP300 – Print File Job for NOAs

2.5.3 Execution Frequency

These batch jobs run daily.

2.5.4 Key Scheduling Dependencies

These batch jobs have the same predecessor and successor as the Los Angeles County jobs.

2.5.5 Counties Impacted

CalWIN Migration Counties.

2.5.6 Data Volume/Performance

The information for the CalWIN Migration Counties is not currently available, however, it is expected to approximately process the same number of records as the C-IV Counties.

2.5.7 Failure Procedure/Operational Instructions

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

2.6 Update the Bundling Batch Job Property

2.6.1 Overview

Update the bundling batch properties to increase the maximum number of pages for the flat mail and standard mail envelopes.

2.6.2 Description of Change

1. Update the batch property to increase the maximum page limit to 24 physical pages for flat mail envelopes.

2. Update the batch property to increase the maximum page limit to 9 physical pages for standard mail envelopes.

2.7 Update the Bundle Naming Convention

2.7.1 Overview

Currently, the bundle name includes the following information: Date (MMddyyyy_HHmmss format), the county code, the agency code, priority, outgoing envelope, return envelope, language code, and the bundler index. Update the logic that constructs the bundle name to **not** include the agency code for the bundles generated for the Migration Counties.

2.7.2 Description of Change

1. Update the column in the Print File table that stores the Agency Code to be nullable.

2. Update the name construction logic to include the agency code in the bundle name for only the bundles created for Los Angeles County. An example of a Los Angeles County bundle name is '**01272021_102401_19_DP_4_FM_PP_EN_001.pdf**'. An example of a bundle name for a Migration County is '**01282021_102401_36_4_FM_PP_EN_001.pdf**'.

2.8 Central Print Testing

2.8.1 Overview

Conduct central print testing with the new CalSAWS print vendor by generating test bundles for each mailing priority and sending the bundles to the print vendor to be printed.

2.8.2 Description of Change

1. Create a test bundle for mailing priority 0 for Los Angeles County and Migration Counties.
    a. Generate a test bundle that consists of forms with mailing priority 0 for Los Angeles County.
    b. Generate a test bundle that consists of forms with mailing priority 0 for the Migration Counties.
    c. When creating the test bundle for the Migration Counties, include the SAR 7 Addendum/SAR 7/SAR 2 form.

2. Create a test bundle for mailing priority 1 for Los Angeles County and Migration Counties.
    a. Generate a test bundle that consists of forms with mailing priority 1 and NOAs generated through EDBC for Los Angeles County.
    b. Generate a test bundle that consists of forms with mailing priority 1 and NOAs generated through EDBC for the Migration Counties.
    c. When creating the test bundles, include the following forms and NOAs:
        i. MC 176 TMC (Transitional Medi-Cal Quarterly Status Report)
        ii. MAGI NOAs (dynamic NOAs generated through EDBC)
        iii. MC 355 (Medi-Cal Request for Information)
        iv. MC 355 Reminder (Medi-Cal Request for Information Reminder Notice)
        v. CW 2200 (Request for Verification)
        vi. TNB 4 Packet (TNB 4 Recertification Packet)
        vii. TEXT 100 (Text Notification Agreement)
        viii. TEXT 101 (Text Notification Cancellation Notice)
        ix. MC 4604 (Supplemental Medi-Cal / Medicare Application)
        x. MC 4605 (Important Information on Medi-Cal and Medicare Savings Programs)
        xi. CSF 141 (Child Care Reimbursement Request) – Migration Counties test bundle only
        xii. CSF 124 (Welfare-to-Work Program Attendance and Progress Report) – Migration Counties test bundle only
        xiii. CSF 125 (Welfare-to-Work School Attendance Report) – Migration Counties test bundle only
        xiv. CSF 126 (Travel Assistance Claim) – Migration Counties test bundle only
        xv. CSF 127 (Return Travel Claim) – Migration Counties test bundle only
        xvi. CSF 128 (Subsidized WEX Time and Attendance Report) – Migration Counties test bundle only

3. Create a test bundle for mailing priority 2 for Los Angeles County.

    a. Generate a test bundle that consists of the PA 6049 (Customer Service Center ID Card form).

4. Create a test bundle for mailing priority 3 for Los Angeles County.
    a. Generate a test bundle that consists of the PA 320 (Vendor Service Order and Invoice) form.

5. Create a test bundle for mailing priority 4 for Los Angeles County and Migration Counties.
    a. Generate a test bundle that consists of Los Angeles County only packets with mailing priority 4.
    b. Generate a test bundle that consists of Migration Counties only packets with mailing priority 4.
    c. When generating the test bundles, include the following packets:
        i. MAGI Redetermination Packet
        ii. Non-MAGI Redetermination Packet
        iii. Mixed Redetermination Packet
        iv. CF Recertification Packet – Migration Counties test bundle only
        v. CW Recertification Packet – Migration Counties test bundle only
        vi. CW/CF Recertification Packet – Migration Counties test bundle only

6. Create a test bundle for mailing priority 7 for Los Angeles County.
    a. Generate a test bundle that consists of forms with mailing priority 7 for Los Angeles County.

7. Create a test bundle for mailing priority 9 for Los Angeles County.
    a. Generate a test bundle that consists of the DCFS 1800 (Blue Payment Voucher) form.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	List of forms with the associated mailing priority.	ListOfFormsWithMailPriorities.xlsx

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1476	The CONTRACTOR shall consolidate the Central Print processes, Form and NOA bundling batch Jobs into one process for use by all 58 Counties in the CalSAWS Software. The CONTRACTOR shall support the ability for the 58 Counties to submit county requests for special mailings, and these would be funded directly by the requesting county.	- Performance/capacity testing with the central print vendor will be completed with each wave.	Consolidated the mailing priorities in CalSAWS and replicated the print file and bundling batch processes currently in CalSAWS for the Migration Counties.
1775	The CONTRACTOR shall update the technical architecture to support consolidation of the bundling jobs and bar codes (Stuffing, Intelligent mail, Imaging and Tracking) for one central print vendor.	- A single central print vendor is identified and is in place to handle the print jobs. This estimate and assumption may change when we receive further information about printing and print vendor. - The consolidated CalSAWS Imaging solution and requirements are pending the outcome of the Functional Design Sessions. Once the requirements are finalized this requirement will be revisited to determine if there are any impacts to the scope, estimate or migration timeline.	Conducted central print testing with the print vendor to validate the updates to the technical architecture for bundling jobs and barcodes.

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2303	The CONTRACTOR shall standardize a set of barcodes to allow automatic printing, folding, and mailing of materials and add those barcodes to all forms before they are sent to printing.	- Barcode type and data inserted into the barcode will be determined based on the selected print vendor's needs for automated printing, folding, and mailing.	Conducted central print testing with the print vendor to validate the placement of the barcodes.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214161

Phase 2 ACL 11-80 - CalWORKs New & Revised Overpayment Notice of Action Messages

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Phong Xiong
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/25/2020	1.0	Original Draft	Phong Xiong
1/25/2021	1.1	Updates based on Committee Review	Phong Xiong
1/27/2021	1.2	Additional updates based on Committee Review	Phong Xiong
1/28/2021	1.3	Updates based on Committee Review Meeting	Phong Xiong
2/5/2021	1.4	Design Clarification – Clarified "Mailed-To" section for each form	Phong Xiong

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1 OVERVIEW

This SCR is to create the following overpayment notices: M44-352C / M44-352D / M44-352G from the latest state version and ACL 11-80.

1.1 Current Design

ACL 11-80 created and revised state overpayment and adjustment notices for CalWORKs. This effort was split into 3 phases:

- Phase 1 – CA-50293
    - M44-350I
    - M44-352H
    - M44-352A
- Phase 2 – CA-214161
    - M44-352C
    - M44-352D
    - M44-352G
- Phase 3 – CA-214165
    - M44-350E
    - M44-350F
    - M44-350G
    - M44-350H

Currently, only the Phase 1 NOAs exist in CalSAWS (Fix Version 20.11) and the M44-350A form which exists in fragments of a dynamically generated NOA. In addition, several Overpayment and adjustment NOAs contain information that is unclear and incorrect.

The NOAs addressed in this Phase 2 SCR were revised with the release of ACL 11-80 and are not yet available in LRS. The prior versions (01/98) of these Phase 2 NOAs also does not exist in LRS.

1.2 Requests

1. Phase 2: Revised/create text and templates for the NOAs below:
    a. M44-352C – Overpayment Recovery – Change
    b. M44-352D – Overpayment Recovery – Change
    c. M44-352G – Demand Overpayment – Change

1.3 Overview of Recommendations

1. Create and add the following NOAs to the template repository in English, Spanish, Chinese, Russian, Vietnamese, and Cambodian:
    d. M44-352C – Overpayment Recovery
    e. M44-352D – Overpayment Recovery
    f. M44-352G – Demand Overpayment
        i. The Cambodian version will not be available for M44-352G.

1.4 Assumptions

1. These NOAs (M44-352C, M44-352D, and M44-352G) are only added to the template repository with this effort. Future SCR CA-222902 has been created to automate these forms.
2. M44-350A NOA was originally to be implemented with this SCR; however, it has been removed from this SCR since CalSAWS currently generates a dynamic NOA with similar verbiage with the same trigger conditions. M44-350A fragments will updated in a future SCR to match the State version.
3. The state has provided only the specified languages for the forms; therefore, only those languages will be implemented with this SCR.
4. This effort is only for CalSAWS; the other counties will inherit the forms upon migration.

2 RECOMMENDATIONS

Create the new NOAs below (1-3) and add them to template repository:

1. M44-352C – Overpayment Recovery
2. M44-352D – Overpayment Recovery
3. M44-352G – Demand Overpayment

2.1 Creating New Form M44-352C – Overpayment Recovery – Change

2.1.1 Overview

M44-352C (11/11) - Overpayment Recovery is an informational NOA when the CalWORKs grant will be reduced due to an overpayment from another case.

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

Programs: CalWORKs

Attached Forms: None

Forms Category: NOA

Template Repository Visibility: All counties

Languages:

English, Spanish, Chinese, Russian, Cambodian, & Vietnamese

2.1.2 Create M44-352C – Overpayment Recovery Form XDP

A new XDP will be created for the M44-352C – Overpayment Recovery form.

Form Header: CalSAWS Standard Header (Header_1_EN)

Form Title: Overpayment Recovery

Form Number: M44-352C

Include NA Back 9: Yes

Imaging Form Name: M44-352C Overpayment Recovery

Imaging Document Type: Notification/NOA

Form Mockups/Examples: See Supporting Documents #1

2.1.3 Add Form Control for the M44-352C

Add an Imaging Barcode for the M44-352C form.

Tracking Barcode	BRM Barcode	Imaging Barcode
No	No	Yes

2.1.4 Add the M44-352C Form to the Template Repository

Add the M44-352C – Overpayment Recovery NOA to the template repository.

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

2.1.5 Add M44-352C Form Print Options and Mailing Requirements

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

BLANK TEMPLATE	PRINT LOCAL WITHOUT SAVE	PRINT LOCAL AND SAVE	PRINT CENTRAL AND SAVE	REPRINT LOCAL	REPRINT CENTRAL
Y	Y	Y	Y	Y	Y

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

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

Mailing Requirements:

Mail-To (Recipient): Person selected on parameter page dropdown

Mailed From (Return): Sending Office

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: N/A

Additional Requirements:

Special Paper Stock: N/A

Enclosures: None

Electronic Signature: No

Post to SSP: Yes

2.2 Creating New Form M44-352D – Overpayment Recovery – Change

2.2.1 Overview

M44-352D (11/11) - Overpayment Recovery is an informational NOA when there's a CalWORKs overpayment on an existing caretaker relative case and is no longer in the Assistance Unit.

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

Programs: CalWORKs

Attached Forms: None

Forms Category: NOA

Template Repository Visibility: All counties

Languages:

English, Spanish, Chinese, Russian, Cambodian, & Vietnamese

2.2.2 Create M44-352D – Overpayment Recovery XDP

A new XDP will be created for the M44-352D – Overpayment Recovery form.

Form Header: CalSAWS Standard Header (Header_1_EN)

Form Title: Overpayment Recovery

Form Number: M44-352D

Include NA Back 9: Yes

Imaging Form Name: M44-352D Overpayment Recovery

Imaging Document Type: Notification/NOA

Form Mockups/Examples: See Supporting Documents #2

2.2.3 Add Form Control for the M44-352D Form

Add an Imaging Barcode for the M44-352D form.

Tracking Barcode	BRM Barcode	Imaging Barcode
No	No	Yes

2.2.4 Add the M44-352D Form to the Template Repository

Add the M44-352D – Overpayment Recovery NOA to the template repository.

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

2.2.5 Add M44-352D Form Print Options and Mailing Requirements

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

BLANK TEMPLATE	PRINT LOCAL WITHOUT SAVE	PRINT LOCAL AND SAVE	PRINT CENTRAL AND SAVE	REPRINT LOCAL	REPRINT CENTRAL
Y	Y	Y	Y	Y	Y

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

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

Mailing Requirements:

Mail-To (Recipient): Person selected on parameter page dropdown

Mailed From (Return): Sending Office

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: N/A

Additional Requirements:

Special Paper Stock: N/A

Enclosures: None

Electronic Signature: No

Post to SSP: Yes

2.3 Create New Form M44-352G – Demand Overpayment – Change

2.3.1 Overview

M44-352G (11/11) – Demand Overpayment is an informational NOA for the CalWORKs participant that the balance is due in full or they need to submit a plan for repayment.

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

Programs: CalWORKs

Attached Forms: None

Forms Category: NOA

Template Repository Visibility: All counties

Languages:

English, Spanish, Chinese, Russian, & Vietnamese

2.3.2 Create M44-352G – Demand Overpayment XDP

A new XDP will be created for the M44-352G – Demand Overpayment form.

Form Header: CalSAWS Standard Header (Header_1_EN)

Form Title: Demand Overpayment

Form Number: M44-352G

Include NA Back 9: Yes

Imaging Form Name: Demand Overpayment

Imaging Document Type: Notification/NOA

Form Mockups/Examples: See Supporting Documents #3

2.3.3 Add Form Control for the M44-352G Form

Add an Imaging Barcode for the M44-352G form.

Tracking Barcode	BRM Barcode	Imaging Barcode
No	No	Yes

2.3.4 Add the M44-352G Form to the Template Repository

Add the M44-352G – Demand Overpayment NOA to the template repository.

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

2.3.5 Add M44-352G Form Print Options and Mailing Requirements

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

BLANK TEMPLATE	PRINT LOCAL WITHOUT SAVE	PRINT LOCAL AND SAVE	PRINT CENTRAL AND SAVE	REPRINT LOCAL	REPRINT CENTRAL
Y	Y	Y	Y	Y	Y

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

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

Mailing Requirements:

Mail-To (Recipient): Person selected on parameter page dropdown

Mailed From (Return): Sending Office

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: N/A

Additional Requirements:

Special Paper Stock: N/A

Enclosures: None

Electronic Signature: No

Post to SSP: Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Form	M44-352C Mockup	M44-352C_EN.pdf M44-352C_SP.pdf M44-352C_CH.pdf M44-352C_RU.pdf M44-352C_VI.pdf M44-352C_CA.pdf
2	Form	M44-352D Mockup	M44-352D_EN.pdf

			M44-352D_SP.pdf M44-352D_CH.pdf M44-352D_RU.pdf M44-352D_VI.pdf M44-352D_CA.pdf
3	Form	M44-352G Mockup	M44-352G_EN.pdf M44-352G_SP.pdf M44-352G_CH.pdf M44-352G_RU.pdf M44-352G_VI.pdf

4 REQUIREMENTS

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.	Create overpayment forms in English, Spanish, Chinese, Russian, Vietnamese, & Cambodian

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214896

DDID 1629

Task Management

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Justin Dobbs
	Reviewed By	Sarah Cox, Dymas Pena, Carlos Albances, Pandu Gupta

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/14/2020	1.0	Initial Revision	Justin Dobbs

Table of Contents

1 OVERVIEW

This design outlines modifications to a population of existing CalSAWS automated tasks to function per the Automated Action framework introduced with CA-214928 (DDID 34 – Unified Task Management).

1.1 Current Design

The CalSAWS System includes functionality to create tasks in an automated fashion via the nightly batch processes or by specific worker actions. SCR CA-214928 for DDID 34 includes recommendations to introduce Automated Action functionality as part of the Unified Task Management solution. This framework allows a level of configuration for automated tasks that can be maintained by the counties.

1.2 Requests

Update a population of automated CalSAWS tasks to function within the Automated Action framework.

1.3 Overview of Recommendations

Update a population of automated CalSAWS tasks to function within the Automated Action framework.

1.4 Assumptions

1. SCRs CA-214927 and CA-214928 related to DDID 34 have set up the underlying data model and front-end Automated Action pages to support Automated Action processing.
2. The Clearance YBN Task will be re-evaluated for the Automated Action framework with the implementation of the statewide portal.
3. Not all batch processes require modifications to be configured to run for 58 counties. The Automated Actions defined in this document that do not have a recommendation to modify the batch process to be 58 county friendly will function for 58 counties natively, they are Los Angeles specific, or DDID 1787 has already accounted for the migration of C-IV System specific batch processes into the CalSAWS System.

2 RECOMMENDATIONS

This section will outline recommendations to adjust a population of CalSAWS automated tasks to function within the Automated Action framework.

2.1 Update CalSAWS Automated Tasks Per Automated Action Framework

2.1.1 Overview

The Automated Action framework allows county users a level of configurability for automated task generation. For example, the county can choose to deactivate a specific automated task within their county outside of the project enhancement process. They also can define attributes such as Task Type, Task Sub-Type, the due dates and initial assignment information for the resulting tasks through the Automated Action Detail page. (Reference CA-214928 – DDID 34 for the specifics of the Automated Action pages).

This section outlines the modifications required to support a population of CalSAWS automated tasks in the Automated Action framework.

2.1.2 Automated Action Detail – Reference Example

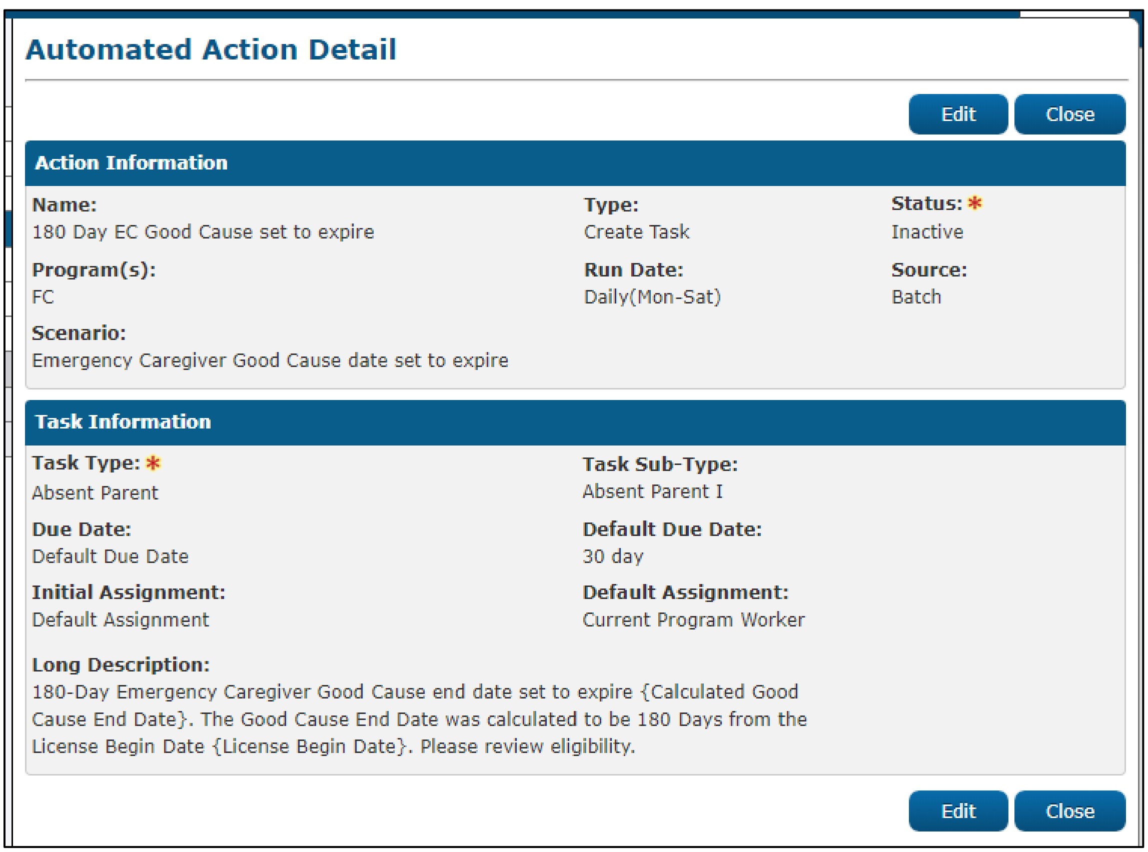


Figure 2.1.1 – Automated Action Detail

2.1.3 Description of Changes

Update the following CalSAWS automated tasks to define the required Automated Action attributes in order to function with the Automated Action Framework. (Please reference the Automated Action Detail page in Figure 2.1.1 for display of the attributes.)

Technical: Unless specifically stated otherwise, the below Automated Actions will be available and Active for LA county as the automated Tasks currently exist within the CalSAWS System. For the C-IV and CalWIN counties, the Status will initially be Inactive with a blank Task Type and Task Sub-Type. This is because each county can set a custom Task Type for each Automated Action. If a C-IV or a CalWIN county decides to Activate one of these Automated Actions, the page validation will require that the county also select a Task Type to be used. The subset of Automated Actions defined below that currently exist in the C-IV System will have a status of Inactive and a blank Task-Type and Sub-Type. The conversion processes that will bring the C-IV counties to the CalSAWS System will bring over the county specific configurations for these Automated Actions that exist in the C-IV System at the time of cutover.

Attribute values such as "Program(s)" and "Run Date" are based on the existing logic of the automated Task in the CalSAWS System. The current processing was evaluated to determine which programs the Task is applicable to, how the due date is calculated and when the automated Task creation runs.

1. AAP Program: Placement Removal Date Received
   This Automated Action is specific to Los Angeles, it will only be configured and available for Los Angeles county.
   a. Action Information
      i. Name: AAP Program: Placement Removal Date Received
      ii. Type: Create Task
      iii. Status: Active
      iv. Program(s): AAP
      v. Run Date: Daily(Mon-Fri)
      vi. Source: Batch
      vii. Scenario: An Adoption Assistance Program Placement Removal Date has been received. Review and take appropriate action.

   b. Task Information
      i. Task Type: Received DCFS AAP record for case modification for Placement Removal Date.
      ii. Task Sub-Type: N/A

iii. Due Date: Default Due Date
iv. Default Due Date: 10 days
v. Initial Assignment: Default Assignment
vi. Default Assignment: Current Program Worker
vii. Long Description: Adoption case information has been received for modification of PLACEMENT REMOVAL DATE as {PLACEMENT_REMOVAL_DATE}.

2. e-ICT Request: Received
This Automated Action is specific to Los Angeles, it will only be configured and available for Los Angeles county.
   a. Action Information
      i. Name: e-ICT Request: Received
      ii. Type: Create Task
      iii. Status: Active
      iv. Program(s): All Programs
      v. Run Date: Daily(Mon-Sat)
      vi. Source: Batch
      vii. Scenario: An e-ICT request has been received for a Case. Please review and take appropriate action.

   b. Task Information
      i. Task Type: E-ICT Request Record Received
      ii. Task Sub-Type: N/A
      iii. Due Date: Default Due Date
      iv. Default Due Date: 10 days
      v. Initial Assignment: Default Assignment
      vi. Default Assignment: Current Program Worker
      vii. Long Description: An e-ICT Request record was received from {county Name} County on {fileDate} for case {caseNumber} . Please update new address and transfer case.

3. e-ICT Disposition: Received
This Automated Action is specific to Los Angeles, it will only be configured and available for Los Angeles county.
   a. Action Information
      i. Name: e-ICT Disposition: Received
      ii. Type: Create Task
      iii. Status: Active
      iv. Program(s): All Programs
      v. Run Date: Daily(Mon-Sat)
      vi. Source: Batch

vii. Scenario: An e-ICT disposition has been received for a Case. Please review and take appropriate action.

b. Task Information
   i. Task Type: E-ICT Disposition record received
   ii. Task Sub-Type: N/A
   iii. Due Date: Default Due Date
   iv. Default Due Date: 10 days
   v. Initial Assignment: Default Assignment
   vi. Default Assignment: Current Program Worker
   vii. Long Description: An e-ICT Disposition record was received from {county Name} County on {fileDate} for case {caseNumber} . Please review disposition record and take appropriate action on the case.

4. e-ICT Disposition: Not Received
   This Automated Action is specific to Los Angeles, it will only be configured and available for Los Angeles county.
   a. Action Information
      i. Name: e-ICT Disposition: Not Received
      ii. Type: Create Task
      iii. Status: Active
      iv. Program(s): All Programs
      v. Run Date: Daily(Mon-Sat)
      vi. Source: Batch
      vii. Scenario: An e-ICT disposition has not been received from the sending county and it has been 20 days since the e-ICT was initiated. Please review and take appropriate action.

   b. Task Information
      i. Task Type: Pending eICT Disposition
      ii. Task Sub-Type: N/A
      iii. Due Date: Default Due Date
      iv. Default Due Date: 10 days
      v. Initial Assignment: Default Assignment
      vi. Default Assignment: Current Program Worker
      vii. Long Description: A Disposition record has not been received from {countyName} County after 20 days from the ICT initiated date {fileDate}. Please review and take appropriate action.

5. e-ICT Cancellation: Received
   This Automated Action is specific to Los Angeles, it will only be configured and available for Los Angeles county.
   a. Action Information
      i. Name: e-ICT Cancellation: Received
      ii. Type: Create Task

iii. Status: Active
iv. Program(s): All Programs
v. Run Date: Daily(Mon-Sat)
vi. Source: Batch
vii. Scenario: An e-ICT cancellation record was received from the sending county.

b. Task Information
i. Task Type: E-ICT Cancellation record Received
ii. Task Sub-Type: N/A
iii. Due Date: Default Due Date
iv. Default Due Date: 10 days
v. Initial Assignment: Default Assignment
vi. Default Assignment: Current Program Worker
vii. Long Description: An e-ICT Cancellation record was received from {county Name} County on {fileDate} for case {caseNumber} . Please cancel the case.

6. e-ICT: Document Request Received
This Automated Action is specific to Los Angeles, it will only be configured and available for Los Angeles county.
a. Action Information
i. Name: e-ICT: Document Request Received
ii. Type: Create Task
iii. Status: Active
iv. Program(s): CW, MC, CF, RC
v. Run Date: Daily(Mon-Sat)
vi. Source: Batch
vii. Scenario: An ICT document request has been received.

b. Task Information
i. Task Type: ICT Document Request Received
ii. Task Sub-Type: N/A
iii. Due Date: Default Due Date
iv. Default Due Date: 10 days
v. Initial Assignment: Default Assignment
vi. Default Assignment: Current Program Worker
vii. Long Description: A new Image Document Request with document type(s) {Document Type List} was received for e-ICT {eICT ID}.

7. ICT Documents(s) Not Found
a. Action Information
i. Name: ICT Documents(s) Not Found
ii. Type: Create Task
iii. Status: Active

iv. Program(s): CW, MC, CF, RC
v. Run Date: Daily(Mon-Sat)
vi. Source: Batch
vii. Scenario: ICT document(s) could not be sent to the receiving county. Take appropriate action.

b. Task Information
   i. Task Type: ICT Documents(s) Not Found
   ii. Task Sub-Type: N/A
   iii. Due Date: Default Due Date
   iv. Default Due Date: 1 day
   v. Initial Assignment: Default Assignment
   vi. Default Assignment: Current Program Worker
   vii. Long Description: Image or Document with document type(s) {Document Types List} could not be sent to receiving county for e-ICT {eICT ID}. Documents were not found in the imaging system for these document type(s).

8. Batch EDBC SSI/SSP Reversal Skip

   a. Action Information
      i. Name: Batch EDBC SSI/SSP Reversal Skip
      ii. Type: Create Task
      iii. Status: Active
      iv. Program(s): CF
      v. Run Date: Daily(Mon-Sat)
      vi. Source: Batch
      vii. Scenario: Batch EDBC has skipped due to reversing an SSI/SSP recipient and the Batch EDBC is running for CalFresh when a SAR 7 is received with no changes.

   b. Task Information
      i. Task Type: Batch EDBC Skipped No Touch SAR 7 - SSI Reversal
      ii. Task Sub-Type: N/A
      iii. Due Date: Default Due Date
      iv. Default Due Date: 3 days
      v. Initial Assignment: Default Assignment
      vi. Default Assignment: Current Program Worker
      vii. Long Description: Review data and run EDBC for {Benefit Month}. Batch Eligibility did not process this because CalFresh EDBC attempted to reverse an excluded SSI/SSP recipient.

9. Clearance/Intake Tasks

   Clearance and Intake Tasks are tied to additional processing in the CalSAWS System outside of simply Task generation. For example, if an application is received, CalSAWS processing will create a Clearance

Task associated to the application. When a worker takes action to work this Task and create a Case/Program, the system will automatically close the Clearance Task and create an Intake Task assigned to the program worker. This process is orchestrated with very specific logic within the CalSAWS System. As a result, Clearance and Intake Tasks will be moved into the Automated Action framework as described in this section. The Task Types for each automated action will be configured for each of the 58 counties.

a. <u>Automated Actions</u>

i. Clearance
   1. Action Information
      a. Name: Clearance
      b. Type: Create Task
      c. Status: Active
      d. Program(s): All Programs
      e. Run Date: Real Time
      f. Source: Online
      g. Scenario: A new application has been received. Please review and take appropriate action.

   2. Task Information
      a. Task Type: Clearance
      b. Task Sub-Type: N/A
      c. Due Date: Default Due Date
      d. Default Due Date: 1 day
      e. Initial Assignment: Default Assignment
      f. Default Assignment: Office Distribution
      g. Long Description: Clearance

ii. Clearance: ICT
   1. Action Information
      a. Name: Clearance: ICT
      b. Type: Create Task
      c. Status: Active
      d. Program(s): All Programs
      e. Run Date: Daily(Mon-Sat)
      f. Source: Batch
      g. Scenario: An e-ICT request has been received for the clearance process. Please review and take appropriate action.

   2. Task Information
      a. Task Type: Clearance ICT
      b. Task Sub-Type: N/A

c. Due Date: Default Due Date
d. Default Due Date: 1 day
e. Initial Assignment: Default Assignment
f. Default Assignment: ICT Bank
g. Long Description: Clearance ICT

3. The current assignment logic for this automated Task selects a Bank that is associated to the recipient's closest office and the Bank can receive Tasks of Category "e-ICT". The Default Assignment value of "ICT Bank" replicates this same assignment processing.

iii. Clearance: e-Application
1. Action Information
   a. Name: Clearance: e-Application
   b. Type: Create Task
   c. Status: Active
   d. Program(s): CF, CF, GR, MC
   e. Run Date: Real Time
   f. Source: Online
   g. Scenario: An e-Application has been received for the clearance process. Please review and take appropriate action.

2. Task Information
   a. Task Type: Clearance e-Application
   b. Task Sub-Type: N/A
   c. Due Date: Default Due Date
   d. Default Due Date: 1 day
   e. Initial Assignment: Default Assignment
   f. Default Assignment: e-Application Bank
   g. Long Description: Clearance e-Application

3. Rename the "Clearance YBN" Task Type for Los Angeles County to be "Clearance e-Application".

4. Rename the "YBN" Task Category to be "e-Application". This adjustment is strictly cosmetic and does not impact underlying functionality.

5. The current assignment logic for this automated Task selects a Bank that is associated to the recipient's closest office and the Bank can receive Tasks of Category "e-Application". The Default Assignment value of "e-Application Bank" replicates this same assignment processing.

iv. Intake
   1. Action Information
      a. Name: Intake
      b. Type: Create Task
      c. Status: Active
      d. Program(s): All Programs
      e. Run Date: Real Time
      f. Source: Online
      g. Scenario: A new application has been processed resulting in a program assignment. Please review and take appropriate action.

   2. Task Information
      a. Task Type: Intake
      b. Task Sub-Type: N/A
      c. Due Date: Default Due Date
      d. Default Due Date: 20 days
      e. Initial Assignment: Default Assignment
      f. Default Assignment: Current Program Worker
      g. Long Description: Intake

v. CMIPS II: Clearance

   This task was moved to the Automated Action framework with CA-214898. For consistency, update the Automated Action name to be "Clearance: CMIPSII".

b. <u>Web Pages</u>

   The Clearance and Intake Automated Actions will be read only except for the Status field allowing activation/deactivation of the Automated Action. Similarly, the existing Clearance and Intake Task Types will be read only. This is to maintain current functionality that supports Clearance and Intake tasks.

   i. Automated Action Detail Page

      1. Update the Automated Action Detail page to only allow editing of the Status field for the Clearance and Intake Automated Actions described in this recommendation (2.1.3.9).

   ii. Task Type List Page

1. Update the Task Type List Page to not display the remove checkbox or the Edit button for the following Clearance and Intake Task Types:
    a. Clearance
    b. Clearance ICT
    c. Clearance CMIPSII
    d. Clearance e-Application (formerly Clearance YBN)
    e. Intake

iii. Task Type Detail Page

1. Update the Task Type Detail page to not display the Edit button for the following Clearance and Intake Task Types:
    a. Clearance
    b. Clearance ICT
    c. Clearance CMIPSII
    d. Clearance e-Application (formerly Clearance YBN)
    e. Intake

10. Living Arrangement: Homeless Ended
    This Automated Action was previously introduced with CA-214897.

    a. Update the Default Assignment attribute for this Automated Action to “WTW Services Worker”. The underlying logic for assignment is not being modified. This is a cosmetic update only to align with current processing.

11. CalWORKs Program: New Child Added
    This Automated Action was previously introduced with CA-214897.

    a. Update the Program(s) attribute for this Automated Action to “CC, CW”.
    b. Update the Scenario attribute for this Automated Action to “A new child has been added to a Child Care program associated to a Case with a CalWORKs program.”

    Note: These modifications are purely cosmetic and does not affect underlying functionality.

12. Generated Document Failed: Review
    This Automated Action was previously introduced with CA-214895.

    a. Update the Scenario attribute for this Automated Action to “A NOA or form was not produced as part of the Generated

Document Batch process. Review the case for missing Primary Applicant (PA) and/or Primary Applicant Mailing Address."
   b. Update the Long Description attribute for this Automated Action to "Form/NOA generation failed for either no Primary Applicant (PA) and/or No PA Mailing Address."

   Note: The above recommendations apply to both the Online and Batch instances of the "Generated Document Failed: Review" Automated Action.

13. Authorization Task Types

    Update Authorization Task Types to be read only. Authorization functionality is imbedded within the logic of the CalSAWS System and will not be configurable outside of the County Authorizations page.

    a. Update the Task Type List Page to not display the remove checkbox or the Edit button for Authorization Task Types. Reference Appendix 7.1for the specific list of Task Types.
    b. Update the Task Detail Page to not display the Edit button for Authorization Task Types. Reference Appendix 7.1 for the specific list of Task Types. These Task Types will be view only.

    Note: The Authorization Task Types in Appendix 7.1 will be available for each of the 58 counties.

14. Remove the following Task Types from CalSAWS. These Task Types are not tied to any automated CalSAWS System functionality. These Task Types are also not available for manual Task creation. Remove the following Task Type entries:
    a. Clearance CalHEERS
    b. Intake CalHEERS
    c. Intake CMIPSII
    d. Intake ICT
    e. Intake YBN

    Technical: End date the associated code table entries in category 399 for the 5 referenced Task Types.

3 SUPPORTING DOCUMENTS

N/A

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
1629	The CONTRACTOR shall update the existing LRS automated tasks, as specified in the "Task Management LRS Automated Task Inventory" appendix, into the CalSAWS Software for all 58 Counties; as well as update current task configurations for Los Angeles County into the CalSAWS Software as default settings for Los Angeles County.	- Existing thresholds for authorization based tasks will remain the same, and threshold amounts will not be configurable by county. - Support for mapping CalWIN automated tasks to LRS automated tasks is not included. - Automated tasks included in this DDID would be set to "Inactive" at cutover for CalWIN counties. - Please refer to CalSAWS Agreement Exhibit U Schedule 1 – Attachment 1 Contractor Assumptions Inventory List, worksheet 'LRS Automated Tasks'	A fourth population of automated Tasks in LRS/CalSAWS are being converted into the Automated Action framework with this enhancement. This is the fourth phase of DDID 1629.

5 MIGRATION IMPACTS

N/A

6 OUTREACH

N/A

7 APPENDIX

7.1 Authorization Task Types

- Computation Request Rejected
- Deputy Authorization - Invoice
- Deputy Authorization - Issuance Replacement/Reissue
- Deputy Authorization - Payment Request (Lvl 1)
- Deputy Authorization - Payment Request (Lvl 2)
- Deputy Authorization - Transaction Refund
- Deputy Authorization - Valuable (Lvl 1)
- Deputy Authorization - Valuable (Lvl 2)
- Deputy Authorization EDBC
- External Recovery Account Disapproved
- Fraud Supervisor Authorization - Computation Request
- Generate Manual NOAs
- Interest Allocation Rejected
- Issuance Method Disapproved
- Issuance Replacement/Reissue Disapproved
- Payment Request Disapproved
- ReRun EDBC
- Supervising Clerk Authorization - Computation Request
- Supervisor Approval - Interest Allocation
- Supervisor Authorization - External Recovery Account
- Supervisor Authorization - Invoice
- Supervisor Authorization - Issuance Method
- Supervisor Authorization - Issuance Replacement/Reissue
- Supervisor Authorization - Payment Request
- Supervisor Authorization - Transaction Refund
- Supervisor Authorization - Valuable
- Supervisor Authorization EDBC
- Transaction Refund Disapproved

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214904

DDID 2228

Task Management

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/28/2020	1.0	Initial Revision	Mayuri Srinivas

Table of Contents

1 OVERVIEW

This design outlines modifications to the CalSAWS System that will allow configuration of an Automated Action to create and maintain Tasks associated to a Customer Appointment.

1.1 Current Design

The CalSAWS System includes functionality to create and maintain Customer Appointments. The CalSAWS System also includes functionality allowing users to configure Task creation attributes via the Automated Action pages.

1.2 Requests

Update Customer Appointment functionality in the CalSAWS system to create associated Tasks when an appointment is created. Resulting Tasks will be assigned to the same worker assigned to the appointment. The Long Description of the Task will include general appointment information. When an appointment or Task is reassigned, the corresponding Task or appointment will also be reassigned.

1.3 Overview of Recommendations

1. Add a configurable Automated Action that will trigger to create a Task based on Customer Appointment creation or assignment modification. The resulting Task Long Description will include general appointment information.
2. Add processing to maintain Customer Appointment Task information when a Customer Appointment is modified. This processing will maintain Task assignments based on changes to appointment assignments/reassignments.

1.4 Assumptions

1. Customer Appointments cannot be deleted.
2. If a Task that that is associated to a Customer Appointment is Completed, Voided or Expired, there will be no updates or interaction with the Customer Appointment.
3. Once a Customer Appointment becomes Completed or Cancelled and any associated Tasks are Completed or Voided, the Task Status will not change.
4. Customer Appointment creation logic via online pages or batch processing will not be modified other than invoking the new Automated Action as described in Section 2.2.
5. Counties will create corresponding Tasks as necessary via API for Customer Appointments created via API.
6. Batch processes referenced in Appendix 7.1 will not be updated beyond triggering the Automated Action described in Section 2.2.
7. CalSAWS System Customer Appointment functionality allows one or more workers to be associated to an appointment.

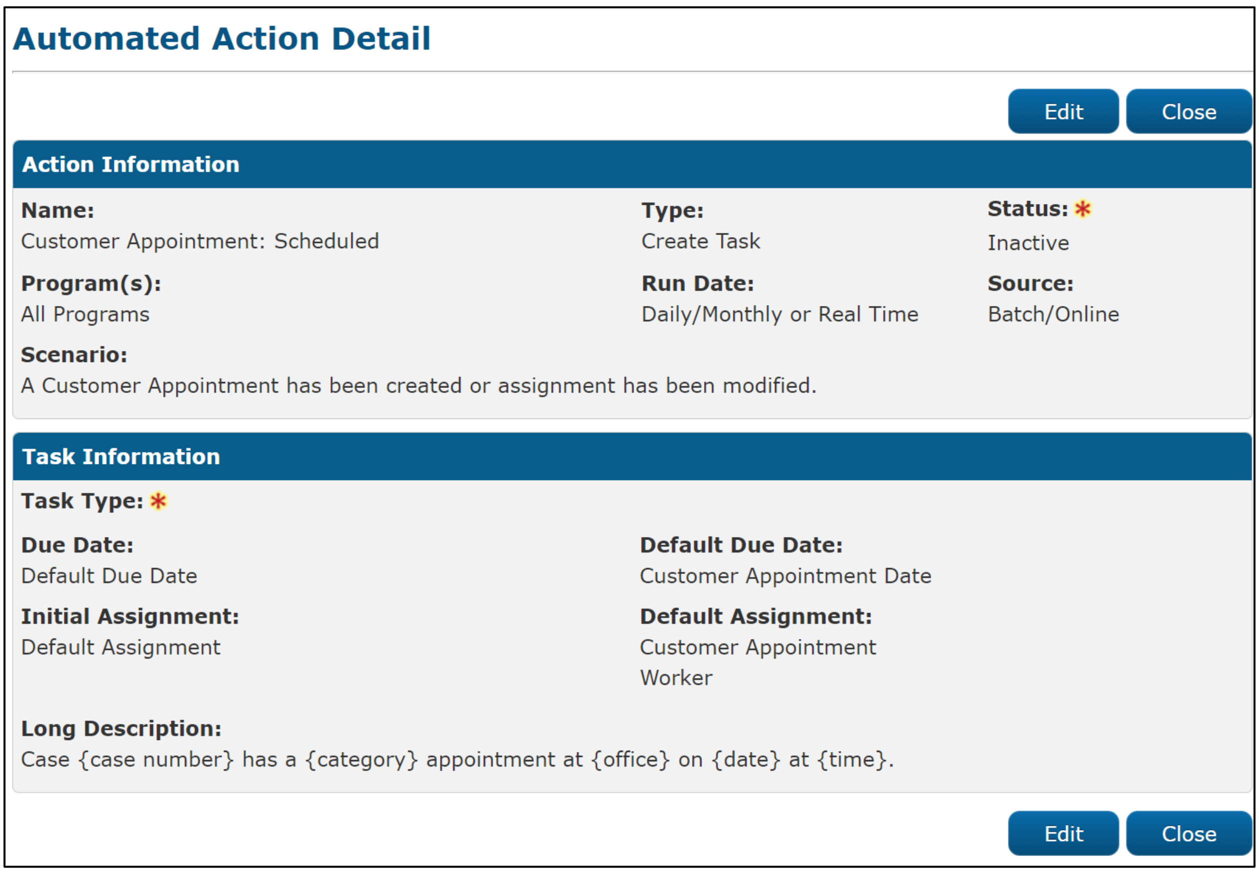
2 RECOMMENDATIONS

2.1 Automated Action Detail Page

2.1.1 Overview

The Automated Action Detail page is accessible from the Automated Action List page. This section will outline the specifics of the Automated Action that will allow counties to enable and configure attributes for a Task that will be logged when a Customer Appointment is created, or assignment information is modified.

2.1.2 Automated Action Detail Page Reference Example



Automated Action Detail

Edit Close

Action Information

Name: Customer Appointment: Scheduled

Type: Create Task

Status: * Inactive

Program(s): All Programs

Run Date: Daily/Monthly or Real Time

Source: Batch/Online

Scenario: A Customer Appointment has been created or assignment has been modified.

Task Information

Task Type: *

Due Date: Default Due Date

Default Due Date: Customer Appointment Date

Initial Assignment: Default Assignment

Default Assignment: Customer Appointment Worker

Long Description: Case {case number} has a {category} appointment at {office} on {date} at {time}.

Edit Close

Figure 2.1.2-1 – Automated Action Detail Page Reference Example

2.1.3 Description of Changes

1. Introduce the following Automated Action that will be triggered when a Customer Appointment is created. This Automated Action will be configured for each of the 58 counties.

The Automated Action Status will initially be Inactive with a blank Task Type and Task Sub-Type. This is because each county can set a custom Task Type for the Automated Action. If a county decides to activate the Automated Action, the page validation will require that the county also select a Task Type to be used. Reference DDID 34 (CA-214928) for specifics of the Task Type pages.

a. Action Information
    i. Name: Customer Appointment: Scheduled
    ii. Type: Create Task
    iii. Status: Inactive
    iv. Program(s): All Programs
    v. Run Date: Daily/Monthly or Real Time
    vi. Source: Batch/Online
    vii. Scenario: A Customer Appointment has been created or assignment has been modified.
b. Task Information
    i. Task Type: BLANK
    ii. Task Sub-Type: BLANK
    iii. Due Date: Default Due Date
    iv. Default Due Date: Customer Appointment Date
    v. Initial Assignment: Default Assignment
    vi. Default Assignment: Customer Appointment Worker
    vii. Long Description: Case {case number} has a {category} appointment at {office} on {date} at {time}.

        Long Description Example: Case 1234567 has a Re-Evaluation Interview appointment at Main Office on 4/1/2021 at 1:30 pm.

2. Modify the Automated Action Detail page to restrict editing of the Initial Assignment field for this Automated Action. The requirement is that resulting Tasks will be assigned to the same Worker associated to the Customer Appointment, so this field will not allow alternative assignment configurations for this Automated Action.

2.1.4 Page Location

- **Global:** Tools
- **Local:** Admin
- **Task:** Automated Actions > Task Admin
    - Click on a hyperlink of the desired result displayed in the Automated Actions Search to navigate to the Automated Action Detail page.

2.1.5 Security Updates

N/A – Existing security for the Automated Action pages will grant access to view and edit the Automated Action.

2.1.6 Page Mapping

N/A.

2.1.7 Page Usage/Data Volume Impacts

N/A.

2.2 Customer Appointment/Task Processing

2.2.1 Overview

If a Task is created for a worker through the Automated Action in Section 2.1, the Task will have a direct association to the Customer Appointment. From this point forward Task reassignment actions will attempt to keep the Customer Appointment assignment in synch. Similarly, Customer Appointment reassignments will maintain associated Task assignments as described in this section. Task creation and subsequent processing of edits is described in this section.

2.2.2 Description of Change

The below recommendations speak to processing that will occur in specific scenarios such as appointment creation, assignment/reassignment, and Task reassignment.

In the scenarios below where a Task is assigned based on creation or modification of a Customer Appointment assignment, the Task Category configuration of the Workers Position will not be evaluated to confirm that the Worker can receive the Task. This is necessary to avoid the scenario in which the county has activated the Automated Action, and during Task creation, the processing determines that the assigned Worker cannot receive the Category of the Task Type meaning the worker will not receive the Task.

Task creation will only be evaluated at the time a Customer Appointment is created or the assignment information is modified.

1. Process Task Creation at Customer Appointment Creation

   When a Customer Appointment is created via intake processing, activity creation, the Customer Appointment Detail page or by a batch process (reference Appendix 7.1), the Automated Action described in Section 2.1, if activated for the county, will be invoked to process the creation of a Task for each Worker associated to the Customer Appointment. If a Customer Appointment is associated to a single Worker, a single Task will be created. If a Customer Appointment is associated to two or more Workers, one Task assigned to each Worker will be created. The Assign to Program Worker attribute of the Task will be set to ‘No’.

   The Automated Action Default Due Date value of “Customer Appointment Date” will set the Task Due date to be the same day that the Customer Appointment is scheduled on. Subsequent Customer Appointment date modifications will not modify the Task Due Date.

Technical: Resulting Tasks will NOT be associated directly to a specific Program in the TASK_PGM table as Customer Appointments are not associated directly to a specific program.

2. Process Customer Appointment Assignments

   A Customer Appointment can be associated to one or more Workers, but at a minimum, the appointment must be associated to one Worker. Reassigning a Customer Appointment is not accomplished by updating a single assigned Worker field from one Worker to another. Reassignment occurs by removing and/or adding a Worker to the Customer Appointment.

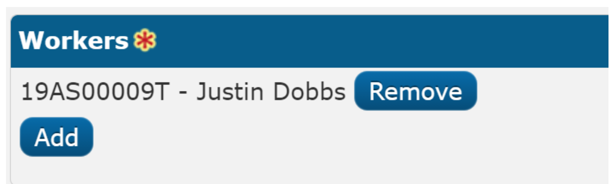


Figure 2.2.2-1 – Customer Appointment Detail – Workers Panel Example

   Example 1: If a Customer Appointment to be reassigned is associated to a single Worker (Worker A), Worker A will be removed, and a new Worker (Worker B) will be added to the Customer Appointment. These actions effectively reassign the Customer Appointment from Worker A to Worker B.

   Example 2: If a Customer Appointment is associated to a single Worker (Worker A), a second Worker (Worker B) may be added to the Customer Appointment. The result of this action is that both Worker A and Worker B are associated to the Customer Appointment.

   Given the above examples and assignment functionality of Customer Appointments, Tasks related to the Customer Appointment will be processed as follows:

   a. If a Worker is removed from a Customer Appointment and a Task is associated to the Customer Appointment and Worker with a Status of "Assigned", the Task Status will be updated to "Void". The Task is no longer valid for this worker as they have been removed from the Customer Appointment.

   b. If a Worker is added to a Customer Appointment, either during Customer Appointment creation or by editing the Customer Appointment to add additional Workers later, the Automated

Action described in Section 2.1 will be invoked to create an appropriate Task for each of the Worker(s) being added to the Customer Appointment. The Assign to Program Worker attribute of each Task will be set to 'No'.

The Automated Action Default Due Date value of "Customer Appointment Date" will set the Task Due date to be the same day that the Customer Appointment is scheduled on. Subsequent Customer Appointment date modifications will not modify the Task Due Date.

Technical: Resulting Tasks will NOT be associated directly to a specific Program in the TASK_PGM table as Customer Appointments are not associated directly to a specific program.

3. Process Reassignments of Tasks associated to a Customer Appointment

Tasks created by the Automated Action described in Section 2.1 will be directly associated to a Customer Appointment and assigned to a Worker on the Customer Appointment. If these Tasks are reassigned to another Worker, the appropriate Worker on the Customer Appointment will also be adjusted to be the same Worker that the Task is being reassigned to.

Example: A Customer Appointment is created and associated to Worker A. The creation of the Customer Appointment invoked the Automated Action described in Section 2.1 to create a Customer Appointment Task assigned to Worker A. If this Task is reassigned to Worker B, Worker A on the Customer Appointment will be updated to Worker B.

If a Customer Appointment Task is reassigned to a Bank, the Customer Appointment assignment cannot follow this reassignment because only Tasks can be assigned to Banks. In this instance, the original Worker will remain associated to the Customer Appointment because an appointment requires a Worker association. In this instance, if this Task is later reassigned from the Bank to a new Worker, the Worker of the Customer Appointment that the Task is associated to will be updated to reflect the newly assigned Worker to the Task.

Tasks can be reassigned via the following online pages, and will invoke the above Customer Appointment assignment logic:

- Worklist (including Get Next functionality)
- Task Reassignment Detail (including the supporting batch processes)
- Pop Up – Task Search (including Get Next functionality)
- Pop Up – Task Detail

4. Process Customer Appointment Modifications

    a. Recommendation 2.2.2.2 describes processing related to Customer Appointment assignment modifications. A Customer Appointment may be modified without changing Worker assignment information. For example, attributes such as the location and appointment time can be modified. In this instance, the Long Description of all Tasks related to the Customer appointment will be updated to append an updated Long Description as defined in Recommendation 2.1.3.b.vii. This Long Description will be preceded with "Customer Appointment Updated on mm/dd/yyyy: ".

        Example:

        A Counselor Meeting Customer Appointment is set up for Bob Jones on Case 1234567 at the "Main Office" with an appointment date/time of 4/1/2021 at 1:30 pm, the resulting Task Long Description will read:

        > Case 1234567 has a Counselor Meeting appointment at Main Office on 4/1/2021 at 1:30 pm.

        If the Customer Appointment is modified on 2/1/2021 to be scheduled at the "Secondary Office" on 4/16/2021 at 3:30 pm, the updated Long Description will be appended to the Task Long Description resulting in the following Long Description:

        > Case 1234567 has a Counselor Meeting appointment at Main Office on 4/1/2021 at 1:30 pm.
        >
        > Customer Appointment Updated on 2/1/2021:
        >
        > Case 1234567 has a Counselor Meeting appointment at Secondary Office on 4/16/2021 at 3:30 pm.

Note: The action of appending the updated Long Description information is not controlled by or related to the Task Append functionality defined in SCR CA-214913. This is a system action that will occur if a Customer Appointment is edited and one or more of the following fields are edited on the Customer Appointment Detail page:

- Category
- Office
- Begin Date
- Begin Time

b. If a Customer Appointment Status is updated to be 'Completed' or 'Showed', update the Status of all Tasks associated to the Customer Appointment to be 'Completed'.

c. If a Customer Appointment Status is updated to be 'Cancelled', update the Status of all Tasks associated to the Customer Appointment to be 'Void'.

Note: If a Customer Appointment is updated to one of the additional statuses not mentioned above such as Scheduled or Rescheduled and a Task is associated to the appointment, Task information or Task Status will not be modified.

3 SUPPORTING DOCUMENTS

N/A

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
3378	The CONTRACTOR shall update the Appointment Management solution to create a task whenever an appointment is created. The task should be assigned to the same worker to whom the appointment is assigned, and the description should include the basic appointment information. When the appointment or the task is reassigned, then the corresponding task or appointment is reassigned as well. This functionality must be configurable by county administrators.	- Appointments that are reassigned via the Appointment API will also result in task reassignment if the county has elected to use this functionality.	This enhancement introduces modifications allowing a county to opt into Task creation at both the creation and reassignment of Customer Appointments. Similarly, Tasks associated to a Customer Appointment that are reassigned will adjust the Customer Appointment assignments as needed.

5 MIGRATION IMPACTS

N/A

6 OUTREACH

N/A

7 APPENDIX

7.1 Customer Appointment Batch Processes

Customer Appointment creation during batch processing included in the following batch processes. Note: Some of the following processes are appointment specific and some of them have a primary process that may result in appointment creation.

Batch Job Number	Description
PB19C898	Schedules a Non-Compliance appointment for persons whose WTW/REP program status is Non-Compliant.
PB19C899	Schedules WTW/REP appointments for persons Active in a WTW/REP program whose current activity is ending within 10 calendar days.
PB19C902	Schedules Recertification/Redetermination appointments for CW and CF cases with a RE coming due in the following month.
PB19C903	Schedules SSI advocacy mandatory appointments for eligible GR participants.
PB19C904	Schedules SSI 2nd advocacy appointments for eligible GR participants who missed the SSI advocacy mandatory appointment.
PB19C905	Schedules GROW case manager appointments for eligible GROW participants.
PB19C906	Schedules SSIAP NSA appointments for eligible GR participants who are NSA and have missed the SSI 2nd advocacy appointment.
PB19C909	Schedules Recertification/Redetermination appointments for CW and CF cases with a RE coming due in the following month. This batch job processes cases for which an appointment was not scheduled by the recertification appointments day 1 batch job.
PB19M111	Schedules appraisal appointments for WTW/REP and Cal-Learn programs.
PB19M115	Schedules appraisal appointments for programs in the unassigned pool.
PI19F411	Schedules an Out of State EBT appointment.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214979

DDID 2572: Add WTW 6010 – WTW Appointment Letter

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Maria Jensen
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/25/2020	0.1	Initial Draft	Maria Jensen
12/02/2020	0.2	Peer Review fixes	Maria Jensen
12/10/2020	0.3	QA comments fixes	Maria Jensen
01/21/2021	0.4	Set Tracking Barcode, Imaging Barcode to Y	Maria Jensen
02/10/2021	0.5	Added Appointment location variable	Maria Jensen
02/24/2021	0.6	RM comments fixes: Added REP to list of programs Specified Appointment types for online trigger Specified programs for batch trigger	Maria Jensen

Table of Contents

1 OVERVIEW

This SCR will add the WTW 6010 – WTW Appointment Letter (10/20) state form to the CalSAWS system to be used to discuss several situations with the Welfare To Work participant and/or to decide the next WTW assignment.

1.1 Current Design

Currently the WTW 6010 state form does not exist in the CalSAWS system.

The form to be replaced is GN 6010 - GAIN/REP Appointment Letter and it exists in the CalSAWS system in English only. It can be generated from the Template Repository, or Online from the Customer Appointment Detail page. It can also be triggered via Batch along with a 'Next Activity' appointment for: an active program with a worker assigned and an activity with an End Date in 10 calendar days. It is triggered only for Activities under the following Service Types: Community Services, Education - Empl, Job Skills Training - Empl, Providing C/C - Comm Svc, Satisfactory School Attendance, Voc/Ed Training, WEX.

1.2 Requests

1. Implement new State form WTW 6010 – WTW Appointment Letter in the CalSAWS. (See Supporting Documents #1-2)
2. Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information.
3. This form replaces the existing GN 6010 - GAIN/REP Appointment Letter. Hide the GN 6010 in the Template Repository for all counties.
4. Update the online trigger for the GN 6010 on the Customer Appointment Detail page to trigger the WTW 6010 instead for all 58 counties.
5. Update the batch trigger for the GN 6010 to instead trigger the WTW 6010. This job runs for Los Angeles County only.

1.3 Overview of Recommendations

1. Add the WTW 6010 form in CalSAWS.
2. Make the form available via the Template Repository in English and Spanish.
3. Hide GN 6010 from Template Repository.
4. Update the online trigger to generate WTW 6010 instead of GN 6010 for all 58 counties.
5. Update the batch trigger to generate WTW 6010 instead of GN 6010. This job runs for LA County only.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add Form WTW 6010 - WTW Appointment Letter

2.1.1 Overview

This SCR will add the state form WTW 6010 – WTW Appointment Letter (revision 10/20) to the CalSAWS system. The form will be used to discuss several situations with the WTW participant and/or to decide the next WTW assignment.

State Form: WTW 6010 (10/20)

Programs: Welfare To Work, REP

Attached Forms: None

Forms Category: Appointment Letter

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Create Form WTW 6010 XDP

1. The new form will have a single impression which will consist of specific verbiage provided by the state, and several input fields. Please see the Supporting Documents #1-2 for details.

   Form Header: CalSAWS Standard Header #1
   Form Title (Document List Page Displayed Name): WTW Appointment Letter
   Template Description: This form is used to discuss any of the below situations with the WTW participant. To complete an appraisal.
   To decide the next WTW assignment and negotiate the next activity agreement. To discuss the WTW assignment. To discuss recent employment and its effect on WTW Services. To discuss a recent move and how it may affect the WTW assignment and supportive services.
   To discuss a situation which may result in an exemption from participation. To discuss a late or missing verification of good cause, exemption or employment. To complete a WTW Assessment/Reassessment.
   Form Number: WTW 6010
   Include NA Back 9: No
   Imaging Form Name: WTW Appointment Letter
   Imaging Document Type: Appointment Letter
   Form Mockups/Examples: See Supporting Documents #1-2 for PDF Mockups

2. Barcode options for the WTW 6010 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
Y	N	Y

3. Add Form WTW 6010 to the Template Repository in both English and Spanish for all 58 counties. Hide the GN 6010 in the Template Repository for all counties.

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

4. Include the following Print Options and Mailing Requirements for Form WTW 6010:

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): Participant selected on the document parameters page
   Mailed From (Return): Standard Population
   Mail-back-to Address: N/A
   Outgoing Envelope Type: Standard Outgoing Mail
   Return Envelope Type: N/A

   Additional Requirements:
   Special Paper Stock: N/A
   Enclosures: No
   Electronic Signature: No
   Post to SSP: Yes

5. **Form Variable Population**
   Four of the input fields coincide with standard header fields so they will automatically be populated when generated in the context of a case.

Dear: <CUSTOMER_NAME>

You are scheduled for an appointment on:

Date: <CUST_APPT_DATE Time: <CUST_APPT_START_TIME>

Location: <CUSTOMER_APPT_ADDR_ONE_LINE>

Whenever you have a meeting with a Welfare-to-Work worker, you are entitled to transportation and child care services. Please request these services in advance of your appointment if you need them.

Please call us to reschedule if you do not have transportation or child care, or are unable to attend this appointment.

The purpose of this appointment is to:

<DECIDE_CHECKBOX>

- ☐ Complete your WTW Appraisal/Orientation.
- ☐ Decide your next WTW assignment and negotiate your next WTW contract activity agreement.
- ☐ Discuss your WTW assignment.
- ☐ Discuss your recent employment and its effect on your WTW services.
- ☐ Discuss your recent move and how it may affect your WTW assignment and supportive services.
- ☐ Discuss your situation which may get you an exemption from participation.
- ☐ Discuss a late or missing verification of good cause, exemption or employment.
- ☐ Complete your WTW Assessment/Reassessment.
- ☐ Other: ______________________

This appointment is very important. Please contact us if you cannot meet at the suggested time and need to reschedule.

WTW Case Manager:	Worker ID:	Telephone Number:
<STAFF_NAME>	<WORKER_ID>	<STAFF_PHONE>

Figure 2.1.2.5 – Form WTW 6010 body

Form Body Variables:

Variable Name	Population	Formatting	Editable*	Template Repository Population	Online Population	Batch Population
CUSTOMER_NAME	Inherited from standard header population	Arial Font Size 10	Y	Y	Y	Y
CUST_APPT_DATE	Taken from Appointment Details page	Arial Font Size 10	Y	N	Y	Y
CUST_APPT_START_TIME	Taken from Appointment Details page	Arial Font Size 10	Y	N	Y	Y
CUSTOMER_APPT_ADDR_ONE_LINE	Taken from Appointment Details page	Arial Font Size 10	Y	N	Y	Y

DECIDE_CHECKBOX	Checked when triggered by batch upon creation of new Appointment	Arial Font Size 10	Y	N	N	Y
STAFF_NAME	Inherited from standard header population	Arial Font Size 10	Y	Y	Y	Y
WORKER_ID	Inherited from standard header population	Arial Font Size 10	Y	Y	Y	Y
STAFF_PHONE	Inherited from standard header population	Arial Font Size 10	Y	Y	Y	Y

* Note: The Editable column of the table above refers to if the variable will be editable when populated. When generating a Blank Form from Template Repository the field will be editable unless otherwise indicated.

6. **Update the Online trigger** via Customer Appointment Detail page to generate WTW 6010 instead of GN 6010, for all 58 counties. The form will be triggered for Appointment Category of WTW/REP, for the following Appointment Types:
   - General Appointment;
   - Non-Compliance Cause Determination (only when a Non-Compliance Cause Determination appointment is being scheduled when there is no WTW or CalWORKs REP Non-Compliance Program Status).

7. **Update the daily batch trigger** with job name PB19C899 to generate WTW 6010 instead of GN 6010, when a 'Next Activity' appointment is created for an active program with a worker assigned and an activity with an End Date in 10 calendar days. This job runs for LA County only, for both WTW and REP programs.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	WTW 6010 (English)	WTW6010_EN.pdf
2	Correspondence	WTW 6010 (Spanish)	WTW6010_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2572	The CONTRACTOR shall implement new State form WTW 6010 – WTW Appointment Letter in the CalSAWS Software as follows: 1) Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information. 2) This form replaces the existing GN 6010 - GAIN/REP Appointment Letter. Hide the GN 6010 in the Template Repository for all counties. The CONTRACTOR shall update the online trigger for the GN 6010 on the Customer Appointment Detail page to trigger the WTW 6010 instead for all 58 counties. The CONTRACTOR shall update the batch trigger for the GN 6010 to instead trigger the WTW 6010. This job runs for Los Angeles County only.	1. Estimate is for updating the form in English and Spanish along with updating the Batch and Online triggers. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With SCR CA-214979, form WTW 6010 – WTW Appointment Letter will be added to the CalSAWS system. The existing form GN 6010 will be hidden from the Template Repository for all counties. The online and batch triggers will be updated to generate WTW 6010 instead of GN 6010.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214984 | DDID 2575

Add WTW 246 – Employment Workshop & Job Search Notice (11/2020) Form to CalSAWS System

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/24/2020	1.0	Original	Pramukh Karla

Table of Contents

1 OVERVIEW

The purpose of this change is to add the WTW 246 – Employment Workshop & Job Search Notice (11/2020) form to CalSAWS System.

1.1 Current Design

The WTW 246 – Employment Workshop & Job Search Notice (11/2020) state form does not exist in CalSAWS System.

1.2 Requests

1. Add the WTW 246 – Employment Workshop & Job Search Notice (11/2020) state form to CalSAWS System in English and Spanish languages.

1.3 Overview of Recommendations

1. Add the WTW 246 – Employment Workshop & Job Search Notice (11/2020) state form to CalSAWS System.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable, but the header fields will remain read-only for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add WTW 246 – Employment Workshop & Job Search Notice (11/2020)

2.1.1 Overview

This section will cover the updates needed to add WTW 246 – Employment Workshop & Job Search Notice (11/2020) state form to CalSAWS.

State Form: WTW 246

Programs: WTW

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English and Spanish

2.1.2 Description of Change

1. Add WTW 246 – Employment Workshop & Job Search Notice (11/2020) state form to CalSAWS System.

   Form Header: CalSAWS Standard Header

   Form Title: Employment Workshop & Job Search Notice

   Form Template Description: This form is used by counties to notify customers about the employment workshop or job search session schedule.

   Form Number: WTW 246

   Include NA Back 9: No

   Imaging Form Name: Employment Workshop & Job Search Notice

   Imaging Document Type: Welfare to Work (WTW)

   Form Mockup/Example: See Supporting Document #1

2. Add the new WTW 246 to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

   WTW 246 form will be blank when generated from the Template Repository, but CalSAWS Standard Header will be populated with Customer and Worker Information.

3. Add the following barcode options to the WTW 246 form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

4. Add the following print options to the WTW 246 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): Person selected on the Documents Parameter Page
Mailed From (Return): Worker's Office Address
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Clock Indicator: N/A
Post to SSP (Self Service Portal): Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	WTW 246 Mockups	WTW246_EN.pdf WTW246_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2575	The CONTRACTOR shall add State form WTW 246 - Employment Workshop & Job Search Notice to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being	With SCR CA-21494, WTW 246 – Employment Workshop & Job Search Notice (11/2020) form is added to the CalSAWS System in English and Spanish languages.

		modified/migrated/created. Consortium staff will be modifying or creating FDDs.	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215000 | DDID 2583

Add WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice to CalSAWS System

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/13/2020	1.0	Original	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to add the WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice (09/2020) to CalSAWS System.

1.1 Current Design

The WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice (09/2020) state form does not exist in CalSAWS System.

1.2 Requests

Add the WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice (09/2020) to CalSAWS Template Repository in English and Spanish languages and generate the WTW 111 form from WEX/CS Worksheet Detail page.

1.3 Overview of Recommendations

1. Add the WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice (09/2020) to CalSAWS System.
2. Update 'Generate Form' button on WEX/CS Worksheet Detail page to generate WTW 11 form.

1.4 Assumptions

N/A

2 RECOMMENDATIONS

2.1 Add WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice

2.1.1 Overview

This section will cover the updates needed to add WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice (09/2020) form to CalSAWS System.

State Form: WTW 111

Programs: WTW/REP Programs only

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English and Spanish

2.1.2 Description of Change

1. Add WTW 111 – Work Experience And/Or Community Services Hours of Participation Notice (09/2020) to CalSAWS System Template Repository.

   Form Header: CalSAWS Standard Header

   Form Title: Work Experience And/Or Community Services Hours of Participation Notice

   Form Template Description: Notice to Customers that they are required to participate in unsubsidized employment and/or Community Services. This form can be generated from the WEX/Community Service Page.

   Form Number: WTW 111

   Include NA Back 9: No

   Imaging Form Name: WEX/Comm Service Hours of Partic. Notif

   Imaging Document Type: Welfare to Work (WTW)

   Form Mockup/Example: See Supporting Document #1

2. Add the new WTW 111 to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

   WTW 111 form will be blank when generated from the Template Repository, but LRS/CalSAWS Standard Header will be populated with Customer and Worker Information.

3. Add the following barcode options to the WTW 111 form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

4. Add the following print options to the WTW 111 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 selected on the Document Parameters page.
Mailed From (Return): Worker's Office Address
Mail-back-to Address: N/A
Outgoing Envelope Type: N/A
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Clock Indicator: N/A
Post to SSP (Self Service Portal): Yes

2.2 Update WEX/CS Worksheet Detail Page

2.2.1 Overview

With this effort 'Generate Form' button on WEX/CS Worksheet Detail page will be updated to generate WTW 111 form for all 58 counties.

2.2.2 WEX/CS Worksheet Detail Mockups

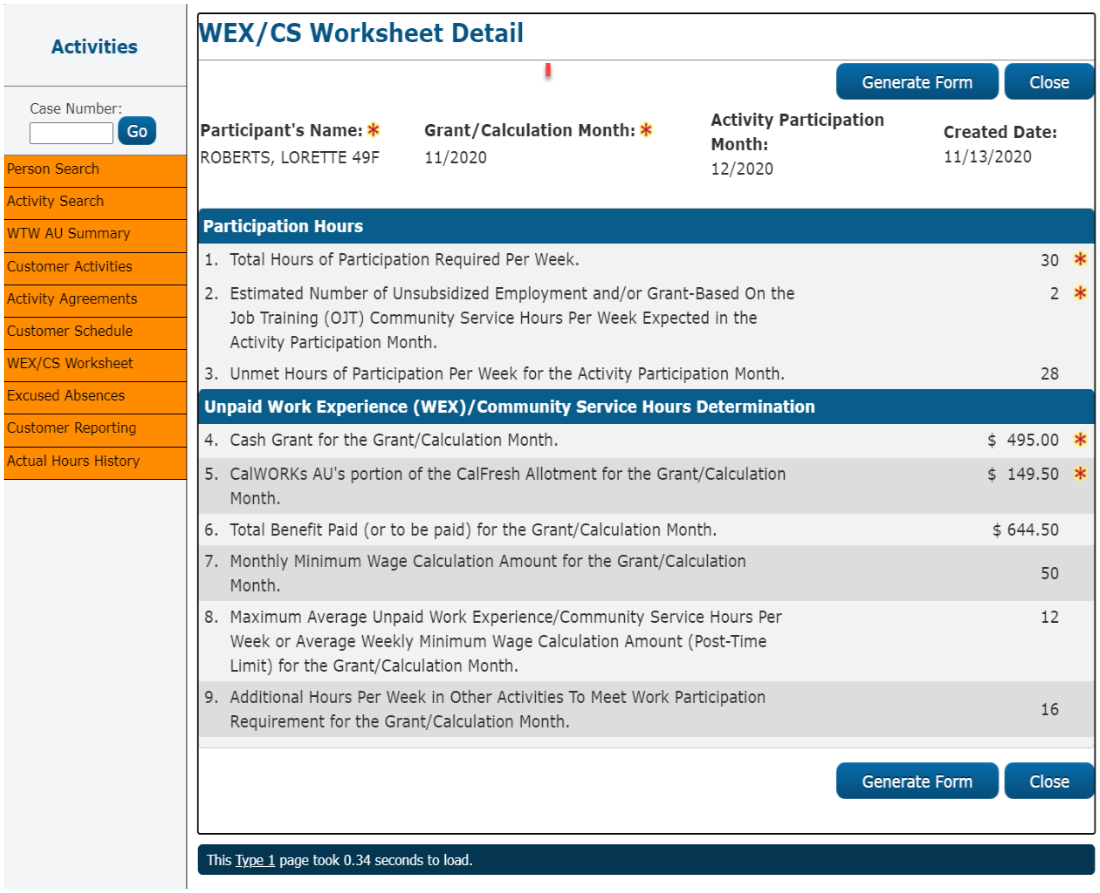

Figure 2.2.1 – Generate Form Button on WEX/CS Worksheet Detail Page

2.2.3 Description of Changes

1. Update WEX/CS Worksheet Detail page to update "Generate Form" button to generate WTW 111 for all 58 counties – See the mockup Figure 2.2.1 for Generate Form button reference.

2. Following fields will be prepopulated on the WTW 111 form when generated from WEX/CS Worksheet Detail page.

Section	Field	Description	Editable Y/N
<1>	Effective Month	Activity Participation Month field value from WEX/CS Worksheet Detail page. Format: MM/YYYY (09/2020)	Y
<2>	Weekly Hours	"Total Hours of Participation Required Per Week" field value	Y

		from WEX/CS Worksheet Detail page.	
<3>	WEX and/or Community Service Hours	"Maximum Average Unpaid Work Experience/Community Service Hours Per Week or Average Weekly Minimum Wage Calculation Amount (Post-Time Limit) for the Grant/Calculation Month." field value from WEX/CS Worksheet Detail page. **Technical Notes:** WEX_COMM_SERV_DETL. ASSIGN_HRS_WKLY	Y
<4>	Weekly Hours in Other Activities	"Additional Hours Per Week in Other Activities To Meet Work Participation Requirement for the Grant/Calculation Month." field value from WEX/CS Worksheet Detail Value	Y

2.2.4 Page Location

- **Global: Empl. Services**
- **Local: Activities**
- **Task: WEX/CS Worksheet**

2.2.5 Security Updates

1. Security Rights

   No impacts to this section.

2. Security Groups

   No impacts to this section.

2.2.6 Page Mapping

No impacts to this section.

2.2.7 Page Usage/Data Volume Impacts

No impacts to this section.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	WTW 111 Mockups	WTW111_EN.pdf WTW111_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2583	The CONTRACTOR shall add State Form WTW 111 - Work Experience And/Or Community Services Hours of Participation Notice to the CalSAWS Software.	1. Estimate is for migrating the form in English and Spanish along with adding an online trigger. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With SCR CA-215000, WTW 111 - Work Experience And/Or Community Services Hours of Participation Notice (09/2020) form is added to the CalSAWS System in English and Spanish languages and update WEX/CS Worksheet Detail page to generate WTW 111 form.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215010 | DDID 2588

Add WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) Form to CalSAWS System

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/30/2020	1.0	Original	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to add the WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) form to CalSAWS System.

1.1 Current Design

The WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) state form does not exist in CalSAWS System.

1.2 Requests

1. Add the WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) state form to CalSAWS System in English and Spanish languages.

1.3 Overview of Recommendations

1. Add the WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) state form to CalSAWS System.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable, but the header fields will remain read-only for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020)

2.1.1 Overview

This section will cover the updates needed to add WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) state form to CalSAWS.

State Form: WTW 2490

Programs: WTW

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English and Spanish

2.1.2 Description of Change

1. Add WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) state form to CalSAWS System.

   Form Header: CalSAWS Standard Header

   Form Title: Non-Receipt of WTW Attendance/Progress Report

   Form Template Description: This form is used by counties to notify customer about the WTW monthly attendance progress report.

   Form Number: WTW 2490

   Include NA Back 9: No

   Imaging Form Name: Non-Receipt WTW Attendance/Prog Report

   Imaging Document Type: Welfare to Work (WTW)

   Form Mockup/Example: See Supporting Document #1

2. Add the new WTW 2490 to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

   WTW 2490 form will be blank when generated from the Template Repository, but CalSAWS Standard Header will be populated with Customer and Worker Information.

3. Add the following barcode options to the WTW 2490 form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

4. Add the following print options to the WTW 2490 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): Person selected on the Documents Parameter Page

Mailed From (Return): Worker's Office Address
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Clock Indicator: N/A
Post to SSP (Self Service Portal): Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	WTW 2490 Mockups	WTW2490_EN.pdf WTW2490_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2588	The CONTRACTOR shall add State form WTW 2490 – Non-Receipt of WTW Attendance/Progress Report to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being modified/migrated/created.	With SCR CA-215010, WTW 2490 – Non-Receipt of WTW Attendance/Progress Report (11/2020) form is added to the CalSAWS System in English and Spanish languages.

		Consortium staff will be modifying or creating FDDs.	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215074 | DDID 2620

Add CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) Form to CalSAWS System

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/13/2020	1.0	Original	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to add the CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) form to CalSAWS System.

1.1 Current Design

The CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) state form does not exist in CalSAWS System.

1.2 Requests

1. Add the CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) state form to CalSAWS System in English and Spanish languages.

1.3 Overview of Recommendations

1. Add the CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) form to CalSAWS System.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable, but the header fields will remain read-only for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020)

2.1.1 Overview

This section will cover the updates needed to add CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) state form to CalSAWS.

State Form: CW 784

Programs: All

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English and Spanish

2.1.2 Description of Change

1. Add CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) state form to CalSAWS System.

   Form Header: CalSAWS Standard Header

   Form Title: Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant

   Form Template Description: This form is used by counties as an affidavit to obtain duplicate of lost/stolen/destroyed warrant for customers.

   Form Number: CW 784

   Include NA Back 9: No

   Imaging Form Name: Affidavit Obtain Duplicate Lost Warrant

   Imaging Document Type: Fiscal

   Form Mockup/Example: See Supporting Document #1

2. Add the new CW 784 to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

   CW 784 form will be blank when generated from the Template Repository, but CalSAWS Standard Header will be populated with Customer and Worker Information.

3. Add the following barcode options to the CW 784 form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

4. Add the following print options to the CW 784 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): Person selected on the Documents Parameter Page
Mailed From (Return): Worker's Office Address
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Clock Indicator: N/A
Post to SSP (Self Service Portal): Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 784 Mockups	CW784_EN.pdf CW784_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2620	The CONTRACTOR shall add State form CW 784 - Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being	With SCR CA-215074, CW 784 – Affidavit to Obtain Duplicate of Lost/Stolen/Destroyed Warrant (11/2020) form is added to the CalSAWS System in English and Spanish languages.

		modified/migrated/created. Consortium staff will be modifying or creating FDDs.	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215078 | DDID 2622

Add CW 787 – Income In-Kind/Housing Verification (11/2020) Form to CalSAWS System

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/16/2020	1.0	Original	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to add the CW 787 – Income In-Kind/Housing Verification (11/2020) form to CalSAWS System.

1.1 Current Design

The CW 787 – Income In-Kind/Housing Verification (11/2020) state form does not exist in CalSAWS System.

1.2 Requests

1. Add the CW 787 – Income In-Kind/Housing Verification (11/2020) state form to CalSAWS System in English and Spanish languages.

1.3 Overview of Recommendations

1. Add the CW 787 – Income In-Kind/Housing Verification (11/2020) form to CalSAWS System.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable, but the header fields will remain read-only for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add CW 787 – Income In-Kind/Housing Verification (11/2020)

2.1.1 Overview

This section will cover the updates needed to add CW 787 – Income In-Kind/Housing Verification (11/2020) state form to CalSAWS.

State Form: CW 787

Programs: All

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English and Spanish

2.1.2 Description of Change

1. Add CW 787 – Income In-Kind/Housing Verification (11/2020) state form to CalSAWS System.

   Form Header: CalSAWS Standard Header

   Form Title: Income In-Kind/Housing Verification

   Form Template Description: This form is used by counties to get the income in-kind or housing verifications from customers.

   Form Number: CW 787

   Include NA Back 9: No

   Imaging Form Name: Income In-Kind/Housing Verif

   Imaging Document Type: Customer Verification Forms

   Form Mockup/Example: See Supporting Document #1

2. Add the new CW 787 to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

   CW 787 form will be blank when generated from the Template Repository, but CalSAWS Standard Header will be populated with Customer and Worker Information.

3. Add the following barcode options to the CW 787 form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

4. Add the following print options to the CW 787 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): Person selected on the Documents Parameter Page

Mailed From (Return): Worker's Office Address
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Clock Indicator: N/A
Post to SSP (Self Service Portal): Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 787 Mockups	CW787_EN.pdf CW787_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2622	The CONTRACTOR shall add State form CW 787 - Income In-Kind/Housing Verification to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being modified/migrated/created.	With SCR CA-215078, CW 787 – Income In-Kind/Housing Verification (11/2020) form is added to the CalSAWS System in English and Spanish languages.

		Consortium staff will be modifying or creating FDDs.	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215080 | DDID 2623

FDS: Non-State Forms - Add New State Form

CW 790

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Harish Katragadda
	Reviewed By	Pramukh Karla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/17/2020	1.0	Original	Harish Katragadda
01/20/2021	2.0	Added Imaging Values	Harish Katragadda

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1 OVERVIEW

The purpose of this change is to add State form CW 790 (11/20) Statement of Relationship in CalSAWS system and make this form available for all 58 counties.

1.1 Current Design

State form CW 790 (11/20) Form is currently not available in LRS/CalSAWS Template Repository.

1.2 Requests

Add State form CW 790 (11/20) and make it available to all 58 counties.

1.3 Overview of Recommendations

1. Add CW 790 (11/20) Form to LRS/CalSAWS Template repository in English and Spanish.
2. Make the form available to all 58 counties with CalSAWS standard header information.

1.4 Assumptions

1. All Form Fields are editable unless specified.

2 CW 790 (11/20) – STATEMENT OF RELATIONSHIP

2.1.1 Overview

This section will cover the updates needed for CW 790 (11/20) form.

State Form: CW 790 (11/20)

Programs: CalWORKs, Refugee Cash Assistance

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Description of Change

1. Add CW 790 (11/20) in English and Spanish languages.

   a. Create CW 790 (11/20) Form XDPs in English and Spanish.

Form Header: Cover Page with CalSAWS Standard Header
Form Title: Statement of Relationship
Template Description: Supporting Form for documenting the Relationship.
Form Number: CW 790
Include NA Back 9: No
Imaging Form Name: Statement of Relationship
Imaging Document Type: Sworn Statements
Form Mockup/Example: See Supporting Documents #1

2. CalSAWS standard footer will be used for the form.

3. Add the CW 790 (11/20) – Statement of Relationship to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

4. Make the CW 790 (11/20) Form available to all 58 counties.

5. Add the following barcode options to the CW 790 (11/20) Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. Add the following print options to the CW 790 (11/20) 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): Case Person selected on the Document Parameters 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
Post to SSP (Self Service Portal): Y
Clock Indicator: N/A

7. Variable Population for CW 790 Form

Populate the variables on the CW 790.

STATEMENT OF RELATIONSHIP

Case Name:	Case Number:

PART 1

To be eligible for CalWORKs, a child must be living in the home of a close blood relative.
1. I, ______________________________ wish to apply for assistance on behalf of:

Child's Name	Parent 1 Name	Parent 2 Name

Section	Field	Description	EDITABLE
CW 790 - Page 1	Case Name	Case Name for which the Form is Generated	Y
CW 790 - Page 1	Case Number	Case Number for which the Form is Generated	Y

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 790 (11/20)	CW790_EN.pdf CW790_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2623	The CONTRACTOR shall add State form CW 790 - Statement of Relationship to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With CA-215080 State Form CW 790 will be added in English and Spanish to CalSAWS Template Repository. CW 790 will be available to all 58 counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215097 | DDID 2631

Update CW 63 – Income And Eligibility Verification Form to CalSAWS System

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Pramukh Karla
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/02/2020	1.0	Original	Pramukh Karla

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1 OVERVIEW

The purpose of this change is to update the CW 63 – Income and Eligibility Verification Form (04/2001) version with the newest CW 63 - Request for Income And/Or Resource Verification Form (11/2020) State version in CalSAWS System and remove PA 2494 – IEVS Applicant/Participant Contact Letter from CalSAWS System.

1.1 Current Design

Currently PA 2494 – IEVS Applicant/Participant Contact Letter exists in CalSAWS System and generated from Template Repository and IEVS Applicant Detail Page. The CW 63 – Income and Eligibility Verification Form (04/2001) exists in CalSAWS System which can only be generate from Template Repository.

1.2 Requests

Update the CW 63 - Income and Eligibility Verification Form (04/2001) to match the newest state form version CW 63 - Request for Income And/Or Resource Verification Form (11/2020) in English and Spanish languages.

1.3 Overview of Recommendations

1. Update the CW 63 - Income and Eligibility Verification Form (04/2001) to match the newest state form version CW 63 - Request for Income And/Or Resource Verification Form (11/2020) in CalSAWS System.
2. Remove PA 2494 – IEVS Applicant/Participant Contact Letter from CalSAWS Template Repository.
3. Update 'Generate PA 2494' button on IEVS Applicant Detail Page to 'Generate CW 63' and generate newly update CW 63 form.

1.4 Assumptions

CA-222325 defect will fix the IEVS Applicant Detail page view mode which will display the Generate Form button on the page.

2 RECOMMENDATIONS

2.1 Update CW 63 – Income and Eligibility Verification Form

2.1.1 Overview

This section will cover the updates needed to update the CW 63 - Income and Eligibility Verification Form (04/2001) to match the newest state form version CW 63 - Request for Income And/Or Resource Verification Form (11/2020) in CalSAWS System.

State Form: CW 63

Programs: All

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English and Spanish

2.1.2 Description of Change

1. Update CW 63 - Request for Income And/Or Resource Verification Form (11/2020) version in CalSAWS System.

   Form Header: CalSAWS Standard Header

   Form Title: Request for Income And/Or Resource Verification Form

   Form Template Description: This form is used by counties to notify Customers that facts were discovered to be different from those reported on the Cash Aid or CalFresh application and that actions may be taken to correct this misinformation if Customer does not prove the facts by a specific date.

   Form Number: CW 63

   Include NA Back 9: No

   Imaging Form Name: Request for Income/Resource Verification

   Imaging Document Type: Verification Requests

   Form Mockup/Example: See Supporting Document #1

2. Add the following barcode options to the CW 63 form:

Tracking Barcode	BRM Barcode	Imaging Barcode
Y	N	Y

3. Add the following print options to the CW 63 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 selected on the Document Parameters page.
Mailed From (Return): Worker's Office Address
Mail-back-to Address: N/A
Outgoing Envelope Type: N/A
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Clock Indicator: N/A
Post to SSP (Self Service Portal): Yes

2.2 Remove PA 2494 Form from Template Repository

2.2.1 Overview

This section will cover the updates needed to remove PA 2494 – IEVS Applicant/Participant Contact Letter from Template Repository.

2.2.2 Description of Changes

1. Remove PA 2494 – IEVS Applicant/Participant Contact Letter from Template Repository.

2.3 Update IEVS Applicant Detail Page

2.3.1 Overview

With this effort 'Generate PA 2494' button on IEVS Applicant Detail page will be updated to 'Generate CW 63' and CW 63 form will be triggered from IEVS Applicant Detail page when clicking the "Generate CW 63" button for all 58 counties.

2.3.2 Description of Changes

1. Update IEVS Applicant Detail page to rename "Generate PA 2494" button to "Generate CW 63" and generate CW 63 for all 58 counties when 'Generate CW 63' button is clicked.

2. Following fields will be prepopulated on the CW 63 form when generated from IEVS Applicant Detail page.

Section	Field	Description	Editable Y/N
<1>	Bank Accounts – Checkbox Field	Will be checked if EDD Employer and Wage Information exists on IEVS Applicant Detail page	Y
<1-1>	Bank Accounts – Name of the Person Text Field	Will be populated with Applicant Name from IEVS Applicant Detail page if Bank Accounts checkbox (<1>) is checked. Format: FirstName FirstLetterofMiddleName LastName	Y
<2>	Social Security Benefits – Checkbox Field	Will be checked if SSA Title II Benefits Information exists on IEVS Applicant Detail page	Y
<2-2>	Social Security Benefits – Name of the Person Text Field	Will be populated with Applicant Name from IEVS Applicant Detail page if Social Security Benefits checkbox (<2>) is checked. Format: FirstName FirstLetterofMiddleName LastName	Y
<3>	SSI Disability Insurance (DI) – Checkbox Field	Will be checked if EDD DI Information exists on IEVS Applicant Detail page	Y
<3-3>	SSI Disability Insurance (DI) – Name of the Person Text Field	Will be populated with Applicant Name from IEVS Applicant Detail page if SSI Disability Insurance checkbox (<3>) is checked, Format: FirstName FirstLetterofMiddleName LastName	Y
<4>	Unemployment Insurance – Checkbox Field	Will be checked if EDD UI Information exists on IEVS Applicant Detail page	Y

<4-4>	Unemployment Insurance – Name of the Person Text Field	Will be populated with Applicant Name from IEVS Applicant Detail page if Unemployment Insurance checkbox (<4>) is checked. Format: FirstName FirstLetterofMiddleName LastName	Y
<5>	Other – Checkbox Fields	Will be checked if <1>, <2>, <3>, and <4> fields are not checked.	Y
<5-5>	Other – Name of the Person Text Field	Will be populated with Applicant Name from IEVS Applicant Detail page if Other checkbox (<5>) is checked. Format: FirstName FirstLetterofMiddleName LastName	Y
<6>	Proof by – Date Field	Will be populated with 10 days from current date. Format: MM/DD/YYYY Example: Current Date = 01/01/2020, then populate Proof by Date as 01/10/2020	Y

2.3.3 Page Location

- **Global: Eligibility**
- **Local: Customer Information**
- **Task: IEVS Applicant**

2.3.4 Security Updates

1. Security Rights

   No impacts to this section.

2. Security Groups

   No impacts to this section.

2.3.5 Page Mapping

No impacts to this section.

2.3.6 Page Usage/Data Volume Impacts

No impacts to this section.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 63 Mockup	CW63_EN.pdf CW63_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2631	The CONTRACTOR shall update the PA 2494 - IEVS Applicant/Participant Contact Letter in the CalSAWS Software as follows: 1) Relabel the button and update the trigger on the IEVS Applicant Detail page to generate the CW 63 instead of the PA 2494. 2) Hide the PA 2494 in the Template Repository for all counties.	1. Estimate is for updating the form in English. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With SCR CA-215097, CW 63 - Income and Eligibility Verification Form (04/2001) is updated to (11/2020) version in CalSAWS System in English and Spanish languages which will replace PA 2494 and update IEVS Applicant Detail page to generate CW 63 form.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215108 | DDID 2637

FDS: Non-State Forms - Implement New State form CW 785

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Harish Katragadda
	Reviewed By	Pramukh Karla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/23/2020	1.0	Original	Harish Katragadda
01/20/2021	2.0	Adding Imaging Values	Harish Katragadda

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1 OVERVIEW

The purpose of this change is to add State form CW 785 (11/20) Request for Life Insurance Information Form in LRS/CalSAWS system and make this form available for all 58 counties.

1.1 Current Design

State form CW 785 (11/20) is currently not available in LRS/CalSAWS Template Repository.

1.2 Requests

1. Add State form CW 785 (11/20) Request for Life Insurance Information Form to CalSAWS Template Repository and make it available to all 58 counties.

1.3 Overview of Recommendations

1. Add CW 785 (11/20) Form to LRS/CalSAWS Template Repository in English and Spanish.
2. Make the CW 785 (11/20) Form available to all 58 counties.

1.4 Assumptions

1. All Form Fields are editable unless specified.
2. CW 785 is state form and will not use the Non-State form CSF XXX naming standard.

2 RECOMMENDATIONS

2.1 CW 785 (11/20) – Request for Life Insurance Information Form

2.1.1 Overview

This section will cover the updates needed for CW 785 (11/20) form.

State Form: CW 785 (11/20)

Programs: CalWORKs, Refugee Cash Assistance

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Description of Change

1. Add CW 785 (11/20) Request for Life Insurance Information Form in English and Spanish languages.

   a. Create CW 785 (11/20) Request for Life Insurance Information Form XDPs in English and Spanish.

   Form Header: Cover Page with CalSAWS Standard Header
   Form Title: Request for Life Insurance Information
   Template Description: CW 785 Form is used for verifying the Life Insurance information of the applicant.
   Form Number: CW 785
   Include NA Back 9: No
   Imaging Form Name: Request for Life Insurance Information
   Imaging Document Type: Customer Verification Forms
   Form Mockup/Example: See Supporting Documents #1

2. CalSAWS standard footer will be used for the form.

3. Add the CW 785 (11/20) – Request for Life Insurance Information Form to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language

4. Make the CW 785 (11/20) Form available to all 58 counties.

5. Add the following barcode options to the CW 785 (11/20) Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. Add the following print options to the CW 785 (11/20) 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): Case Person 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 SSP (Self Service Portal): Y
Clock Indicator: N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 785 (11/20)	CW785_EN.pdf CW785_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2637	The CONTRACTOR shall add State form CW 785 - Request for Life Insurance Information to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being	With CA-215108 State Form CW 785 will be added in English and Spanish to LRS/CalSAWS Template Repository. CW 785 will be

		modified/migrated/created. Consortium staff will be modifying or creating FDDs.	available to all 58 counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215110 | DDID 2638

FDS: Non-State Forms - Add New State form CW 788

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Harish Katragadda
	Reviewed By	Pramukh Karla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/30/2020	1.0	Original	Harish Katragadda
01/01/2021	2.0	Added Imaging Values	Harish Katragadda
02/01/2021	3.0	Updated Programs for the Forms	Harish Katragadda

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1 OVERVIEW

The purpose of this change is to add State form CW 788 (11/20) Request for Discontinuance Waiver Form in CalSAWS system and make this form available for all 58 counties.

1.1 Current Design

State form CW 788 (11/20) is currently not available in CalSAWS Template Repository.

1.2 Requests

1. Add State form CW 788 (11/20) Request for Discontinuance Waiver Form to CalSAWS Template Repository and make it available to all 58 counties.

1.3 Overview of Recommendations

1. Add CW 788 (11/20) Form to CalSAWS Template Repository in English and Spanish.
2. Make the CW 788 (11/20) Form available to all 58 counties.

1.4 Assumptions

1. All Form Fields are editable unless specified.
2. CW 788 is state form and will not use the Non-State form CSF XXX naming standard.

2 RECOMMENDATIONS

2.1 CW 788 (11/20) – Request for Discontinuance Waiver

2.1.1 Overview

This section will cover the updates needed for CW 788 (11/20) form.

State Form: CW 788 (11/20)

Programs: All

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Description of Change

1. Add CW 788 (11/20) Request for Discontinuance Waiver Form in English and Spanish languages.

   a. Create CW 788 (11/20) Request for Discontinuance Waiver Form XDPs in English and Spanish.

   Form Header: CalSAWS Standard Header

   Form Title: Request for Discontinuance Waiver

   Template Description: CW 788 Form is used for Requesting a discontinuance waiver by the applicant.

   Form Number: CW 788

   Include NA Back 9: No

   Imaging Form Name: Request for Discontinuance Waiver

   Imaging Document Type: Rights and Responsibilities

   Form Mockup/Example: See Supporting Documents #1

2. CalSAWS standard footer will be used for the form.

3. Add the CW 788 (11/20) – Request for Discontinuance Waiver Form to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language

4. Make the CW 788 (11/20) Form available to all 58 counties.

5. Add the following barcode options to the CW 788 (11/20) Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. Add the following print options to the CW 788 (11/20) 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): Case Person 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 SSP (Self Service Portal): Y
Clock Indicator: N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 788 (11/20)	CW788_EN.pdf CW788_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2638	The CONTRACTOR shall add State form CW 788 - Request for Discontinuance Waiver to the CalSAWS software. The form will be available in the Template	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new	With CA-215110 State Form CW 788 will be added in English and Spanish to CalSAWS Template Repository. CW 788 will be

	Repository for all 58 counties.	Functional Design Documents (FDDs) for forms being modified/migrated/created. Consortium staff will be modifying or creating FDDs.	available to all 58 counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215120

DDID 2643: Add GEN 100 – Examples of Verification (11/20)

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Maria Jensen
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/16/2020	0.1	Initial Draft	Maria Jensen
01/11/2021	0.2	Added Assumptions section	Maria Jensen

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1 OVERVIEW

This SCR will add the GEN 100 – Examples of Verification (11/20) state form to the CalSAWS system.

1.1 Current Design

Currently the GEN 100 state form does not exist in the CalSAWS system.

1.2 Requests

1. Implement State Form GEN 100 – Examples of Verification in the CalSAWS system. (See Supporting Documents #1-2)
2. Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information.

1.3 Overview of Recommendations

1. Add new State form GEN 100 - Examples of Verification.
2. Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable but the header fields will remain read-only for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add Form GEN 100 - Examples of Verification

2.1.1 Overview

This SCR will add the state form GEN 100 – Examples of Verification (revision 11/20) to the CalSAWS system.

State Form: GEN 100 (11/20)

Programs: All programs

Attached Forms: None

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Create Form GEN 100 XDP

1. The new form will have 2 impressions which will consist of static verbiage provided by the state. Please see the Supporting Documents #1-2 for details.

   Form Header: CalSAWS Standard Header #1
   Form Title (Document List Page Displayed Name): Examples of Verification
   Template Description: This form is used to give customers examples of verification.
   Form Number: GEN 100
   Include NA Back 9: No
   Imaging Form Name: N/A
   Imaging Document Type: N/A
   Form Mockups/Examples: See Supporting Documents #1-2 for PDF Mockups

2. Barcode options for the GEN 100 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	N

3. Add Form GEN 100 to the Template Repository in English and Spanish for all 58 counties.

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

4. Include the following Print Options and Mailing Requirements for Form GEN 100:

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): Participant selected on the document parameters page
Mailed From (Return): Standard Population
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Outgoing Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: No
Electronic Signature: No
Post to SSP: Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	GEN 100 (English)	GEN100_EN.pdf
2	Correspondence	GEN 100 (Spanish)	GEN100_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2633	The CONTRACTOR shall add State form GEN 100 - Examples of Verification to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With SCR CA-215120, form GEN 100 – Examples of Verification will be added to the CalSAWS system.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215130

DDID 2648: Add CW 786 – Expense Exceeds Income Letter (11/20)

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Maria Jensen
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/28/2020	0.1	Initial Draft	Maria Jensen
12/29/2020	0.2	Peer Review comment: Added RCA program	Maria Jensen
01/18/2021	0.3	QA comments fixes	Maria Jensen
02/22/2021	0.4	Corrected form title and Template Description	Maria Jensen

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1 OVERVIEW

This SCR will add the CW 786 – Expense Exceeds Income Letter (11/20) State form to the CalSAWS system.

1.1 Current Design

Currently the CW 786 State form does not exist in the CalSAWS system.

1.2 Requests

1. Add new State form CW 786 - Expense Exceeds Income Letter in the CalSAWS. (See Supporting Documents #1-2)
2. Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information.

1.3 Overview of Recommendations

1. Add new State form CW 786 - Expense Exceeds Income Letter.
2. Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information.

1.4 Assumptions

1. When generated in the context of a case, the body fields will be editable for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add Form CW 786 - Expense Exceeds Income Letter

2.1.1 Overview

This SCR will add the State form CW 786 – Expense Exceeds Income Letter (revision 11/20) to the CalSAWS system.

State Form: CW 786 (11/20)

Programs: CalWORKs, RCA

Attached Forms: None

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Create Form CW 786 XDP

1. The new form will have 1 impression which will consist of static verbiage provided by the State. Please see the Supporting Documents #1-2 for details.

   Form Header: CalSAWS Standard Header #1
   Form Title (Document List Page Displayed Name): Expense Exceeds Income Letter
   Template Description: This form is used to inform customers that their reported expenses exceed their reported income.
   Form Number: CW 786
   Include NA Back 9: No
   Imaging Form Name: N/A
   Imaging Document Type: N/A
   Form Mockups/Examples: See Supporting Documents #1-2 for PDF Mockups

2. Barcode options for the CW 786 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	N

3. Add Form CW 786 to the Template Repository in English and Spanish for all 58 counties.

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

4. Include the following Print Options and Mailing Requirements for Form CW 786:

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): Participant selected on the document parameters page
Mailed From (Return): Standard Population
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Outgoing Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: No
Electronic Signature: No
Post to SSP: Yes
Clock Indicator: N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 786 (English)	CW786_EN.pdf
2	Correspondence	CW 786 (Spanish)	CW786_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2648	The CONTRACTOR shall add State form CW 786 - Expense Exceeds Income Letter to the CalSAWS software. The form will be available in the Template Repository for all 58 counties.	1. Estimate is for implementing the new form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With SCR CA-215130, form CW 786 – Expense Exceeds Income Letter will be added to the CalSAWS system.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215134 | DDID 2650 FDS

Non State Forms - Add New State Form CW 789

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/28/2020	1.0	Initial Revision	Raj Devidi

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1 OVERVIEW

The purpose of this change is to add the CW 789 (11/20) - New Residence Requirements Form to CalSAWS and generate this form from the Template Repository.

1.1 Current Design

The purpose of this change is to add CW 789 (11/20) - New Residence Requirements form to the CalSAWS and make this form available for all 58 counties.

1.2 Requests

The CW 789 (11/20) - New Residence Requirements form will be available in English and Spanish languages.

- This form will be available in the Template Repository for all 58 counties.

1.3 Overview of Recommendations

Add CW 789 (11/20) - New Residence Requirements form to CalSAWS Template Repository in English and Spanish languages. Make the form available for 58 counties.

1.4 Assumptions

1. Page numbers will be added on the form.
2. CW 789 (11/20) - New Residence Requirements form will be available for all 58 counties.
3. All form fields are editable unless specified.
4. BRM barcode will be added on CW 789(11/20) - New Residence Requirements form with SCR CA-222353.

2 RECOMMENDATIONS

2.1 Add the CW 789 (11/20)- New Residence Requirements form to CalSAWS

2.1.1 Overview

Add the Form CW 789 (11/20) - New Residence Requirements form to CalSAWS.

State Form: CW 789 (11/20)
Programs: CalWORKs
Attached Forms: N/A
Forms Category: Form
Languages: English and Spanish.
Template Repository Visibility: All 58 counties

2.1.2 Description of Change

1. Add CW 789 (11/20) - New Residence Requirements form in English and Spanish languages to the CalSAWS Software.

   Form Header: Add CalSAWS State Standard Header
   Form Title/Name: New Residence Requirements
   Form Description: This form is sent to the Customer when verification of California residency is needed.
   Form Number: CW 789
   Include NA Back 9: N/A
   Imaging Form Name: New Residence Requirements
   Imaging Document Type: Address/Residency
   Form Mockups: Please refer to Section 3.0 – Supporting Document #1.

2. Add the CW 789 (11/20) - New Residence Requirements form to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

3. Populate fields as below when CW 789 (11/20) - New Residence Requirements form is generated from Template Repository.

   a. Header fields population

Field	Description
Section: Header (CalSAWS Standard Header), Page 1	

Field	Description
Worker Name	Name of Worker who is assigned to the Program
Worker ID	ID of Worker who is assigned to the Program
Worker Phone Number	Phone Number of Worker who is assigned to the Program
Case Name	Case Name on the Case
Date	Date on which CW 789 (11/20) form generated
Customer ID	Customer Id of the Participant
Case Number	Case Number on the Case

4. Footer requirements

   As mentioned in mockup.

5. Agency name requirements

   As mentioned in mockup.

6. Add the following barcode options to the CW 789 (11/20) - New Residence Requirements form

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

7. Add the following print options to the CW 789 (11/20) - New Residence Requirements 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 Program selected on the Document parameter page.
Mailed From (Return): Program Worker's Office Address
Mail-back-to Address: Program Worker's Office Address
Outgoing Envelope Type: Standard
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Clock Indicator: N
Electronic Signature: Yes
Post to Self Service Portal: Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	CW 789 (11/20) Form	CW789_EN.pdf CW789_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2650	Add State Form CW 789 (11/20) - New Residence Requirements to the Template Repository for all 58 Counties.	1. Estimate is for updating the form in English and Spanish along with updating the batch and online triggers. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	SCR CA-215134 updates CW 789 (11/20)- New Residence Requirements Form and implement in English and Spanish languages.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215143 | DDID 2654

FDS: Non-State Forms - Implement New State form CF 1725

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Harish Katragadda
	Reviewed By	Raj Devidi

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/08/2020	1.0	Original	Harish Katragadda
12/21/2020	2.0	Updated as per QA Review	Harish Katragadda
01/20/2021	3.0	Added Imaging Values	Harish Katragadda

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1 OVERVIEW

1. The purpose of this change is to add State form CW 1725 (10/20) School Attendance/Enrollment Verification Form in LRS/CalSAWS system and make this form available for all 58 counties.

1.1 Current Design

State form CW 1725 (10/20) is currently not available in LRS/CalSAWS Template Repository. Non-State form PA 1725 (05/17)– School Attendance/Enrollment Verification is currently available in CalSAWS. PB19R1928 Sweep job generates PA 1725 through batch. PB19E437 Batch EDBC sweeps runs EDBC for cases where PA 1725 Form is not received within the due date of the form.

1.2 Requests

1. Add State form CW 1725 (10/20) School Attendance/Enrollment Verification Form to CalSAWS Template Repository and make it available to all 58 counties.
2. Hide Non-State Form PA 1725 (05/17)– School Attendance/Enrollment Verification in Template Repository for all 58 counties.

1.3 Overview of Recommendations

2. Add CW 1725 (10/20) Form to LRS/CalSAWS Template repository in English and Spanish.
3. Make the CW 1725 (10/20) Form available to all 58 counties.
4. Hide Non-State Form PA 1725 (05/17)– School Attendance/Enrollment Verification from Template Repository.
5. Update the Batch Trigger for PB19R1928 batch job to generate CW 1725 instead of PA 1725 (05/17) and update the batch to run for all counties.
6. Update PB19E437 EDBC batch sweep job to use new CW 1725 form Values.

1.4 Assumptions

1. All Form Fields are editable unless specified.
2. CW 1725 is state form and will not use the Non-State form CSF XXX naming standard.

2 RECOMMENDATIONS

2.1 CW 1725 (10/20) – School Attendance/Enrollment Verification

2.1.1 Overview

This section will cover the updates needed for CW 1725 (10/20) form.

State Form: CW 1725 (10/20)

Programs: CalWORKs, Refugee Cash Assistance

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Description of Change

1. Add CW 1725 (10/20) School Attendance/Enrollment Verification Form in English and Spanish languages.

    a. Create CW 1725 (10/20) School Attendance/Enrollment Verification Form XDPs in English and Spanish.

    Form Header: CalSAWS Standard Header

    Form Title: School Attendance/Enrollment Verification

    Template Description: This form allows a parent/caregiver to a school-age child to authorize the school and the county to communicate regarding the child's attendance and/or enrollment.

    Form Number: CW 1725

    Include NA Back 9: No

    Imaging Form Name: School Attendance / Enrollment Verif

    Imaging Document Type: Education

    Form Mockup/Example: See Supporting Documents #1

1. Hide Non-State Form PA 1725 (05/17) – from Template Repository for all 58 counties.

2. CalSAWS standard footer will be used for the form.

3. Add the CW 1725 (10/20) – School Attendance/Enrollment Verification Form to Template Repository. The following parameters will be required:

    Required Form Input: Case Number, Customer Name, Customer Name – Student, Program and Language

4. Make the CW 1725 (10/20) Form available to all 58 counties.

5. Add the following barcode options to the CW 1725 (10/20) Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
Y	N	Y

6. Add the following print options to the CW 1725 (10/20) 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): Case Person selected on the Document Parameters page
Mailed From (Return): Worker's Office Address
Mail-back-to Address: Worker's Office Address
Outgoing Envelope Type: Standard
Return Envelope Type: N/A
Mailing Priority: 'Controlled Form with Non-paid Enveloped Same Day Priority (Priority 7)
Form Due Date: 30 Calendar Days

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Electronic Signature: N/A
Post to SSP (Self Service Portal): Y
Clock Indicator: N/A

7. Update Batch Trigger for **PB19R1928** Batch job to run for all counties.
    a. Create a new Batch Property Change Requests (BPCR) to add counties to the County Code List.
    b. Convert the job to a '00' job and update the batch job to run for the counties in the County Code list.
    c. Update the Batch Trigger and Code Detl record (942) to use the new CW 1725 values.

8. Update **PB19E437** Batch EDBC sweep trigger to use the new CW 1725 form values.

9. **Variable Population for CW 1725 Form**

SCHOOL ATTENDANCE/
ENROLLMENT VERIFICATION

Student Name: ____________

Date of Birth: ____________

This form may be used by parents/caretaker relatives to verify school attendance when a teen has been deemed a chronic truant, or is a CalLearn student, or is age 17 and older and must verify their school enrollment/completion date. This release is good for one year from the date of signature unless otherwise noted.

I hereby authorize:

1) ____________________ to release the attendance/enrollment
(School Name)
information required herein for above-name student and

2) the county to contact the school concerning attendance or enrollment.

Parent/Caretaker Relative/18 Year Old Signature: ____________________

Date: ____________

ATTENTION SCHOOL PERSONNEL: Please complete Part A or Part B as checked below and affix the

Section	Field	Description	EDITABLE
CW 1725 - Page 1	Student Name	Full Name of the Person Selected in Customer Name – Student drop down in Document Parameters page Format: **John A Doe** First Name: John Middle Name: Allen Last Name: Doe	Y
CW 1725 - Page 1	Date of Birth	Date of Birth of the Person Selected in Customer Name – Student drop down in Document Parameters page **Format: MM/DD/YYYY** **01/01/2020**	Y

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 1725 (10/20)	CW1725_EN.pdf CW1725_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2654	**Original:** The CONTRACTOR shall implement New State form CW 1725 - School Attendance/Enrollment in the CalSAWS Software as follows: 1) Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information. 2) This form replaces the existing PA 1725 – School Attendance Enrollment Verification form. Hide the PA 1725 in the Template Repository for all counties. The CONTRACTOR shall update the batch trigger for the PA 1725 to trigger the CW 1725 instead, and the batch will run for all counties. **Updated:** The CONTRACTOR shall implement New State form CW 1725 - School Attendance/Enrollment in the CalSAWS Software as follows: 1) Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information. 2) This form replaces the existing PA 1725 – School	1. Estimate is for updating the form in English and Spanish along with updating the batch trigger. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With CA-215143 State Form CW 1725 (10/20) will be added in English and Spanish to LRS/CalSAWS Template Repository. CW 1725 (10/20) will be available to all 58 counties. Non-State Form PA 1725 – School Attendance/Enrollment Verification will be hidden from Template Repository. PB19R1928 batch job will be converted to '00' series job to run for all the counties. PB19E437 Batch EDBC Sweep will use the new CW 1725 form values.

	Attendance Enrollment Verification form. Hide the PA 1725 in the Template Repository for all counties. 3) The CONTRACTOR shall update the batch trigger for the PA 1725 to trigger the CW 1725 instead, and the batch will run for all counties. 4) Update PB19E437 EDBC batch sweep to use the new CW 1725 form values.		

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-215148 | DDID 2657

FDS: Non-State Forms - Add State Form CW 107

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Harish Katragadda
	Reviewed By	Suresh Naidu Mullaguri

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/23/2020	1.0	Original	Harish Katragadda

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1 OVERVIEW

The purpose of this change is to add State form CW 107 (10/20) Immunization Verification in LRS/CalSAWS system and make this form available for all 58 counties.

1.1 Current Design

State form CW 107 (10/20) Form is currently not available in LRS/CalSAWS Template Repository.

1.2 Requests

Add State form CW 107 (10/20) and make it available to all 58 counties.

1.3 Overview of Recommendations

1. Add CW 107 (10/20) Form to LRS/CalSAWS Template repository in English and Spanish.
2. Make the form available to all 58 counties.

1.4 Assumptions

1. All Fields are editable unless specified.
2. CW 107 replaces VER 103 CIV - Immunization Verification from for C-IV migration counties.
3. CW 107 Form must be used with the CW 2209- Immunization Good Cause Request Form.

2 CW 107 (10/20) – IMMUNIZATION VERIFICATION

2.1.1 Overview

This section will cover the updates needed for CW 107 (10/20) form.

State Form: CW 107 (10/20)

Programs: CalWORKs

Attached Forms: N/A

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Description of Change

1. Add CW 107 (10/20) in English and Spanish languages.

   a. Create CW 107 (10/20) Form XDPs in English and Spanish.

   Form Header: LRS/CalSAWS Standard Header

   Form Title: Immunization Verification

   Template Description: Form for documenting the immunizations.

   Form Number: CW 107

   Include NA Back 9: No

   Imaging Form Name: Immunization Verif

   Imaging Document Type: Medical Reports/Records

   Form Mockup/Example: See Supporting Documents #1

2. CalSAWS standard footer will be used for the form.

3. Add the CW 107 (10/20) – Immunization Verification to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

4. Make the CW 107 (10/20) Form available to all 58 counties.

5. Add the following barcode options to the CW 107 (10/20) Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. Add the following print options to the CW 107 (10/20) 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): Case Person selected on the Document Parameters 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: Y
Post to SSP (Self Service Portal): Y
Clock Indicator: N/A

7. Variable Population for CW 107 Form

Populate the variables on the CW 107.

CHILD ONE	
Child's Name:	
Part A - To be completed by health care provider. Child meets age-appropriate immunizations requirements or has started, but not completed, a series of immunizations.	
Signature of Health Care Provider or Authorized Person:	Date:
Part B - To be completed by care provider. Child should not be immunized due to a medical reason.	
Condition and Duration of Condition:	
Signature of Health Care Provider or Authorized Person:	Date:
Part C - To be completed by parent/caretaker relative. I do not wish for my child to be immunized because immunization is contrary to my beliefs.	
Signature of Parent/Caretaker Relative:	Date:

Section	Field	Description	EDITABLE
CW 107 - Page 1,2,3	Child's Name – 5 instances	There are Five blocks like the above image which allows to list names of five children. List Full Names of five children matching the following criteria in the order of the age, with smallest Child first when form generated from Template Repository and within Case	Y

Section	Field	Description	EDITABLE
		Context. If there are more than 5 children, workers are expected to generate additional blank CW 107 form (Forms if required) from Template Repository and manually fill remaining children information. 1. Age is under 6 2. Has a Parent (Biological/Adoptive) relationship with the person (Parent) selected on the Document Parameters page or 3. The person selected on the Document Parameters page has Parental Control in the relationship and relationship is not Unrelated or Domestic Partner or Spouse Example: **John C Doe** First Name: John Middle Name: Campa Last Name: Doe	

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CW 107 (10/20)	CW107_EN.pdf CW107_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

2657	The CONTRACTOR shall implement the State form CW 107 – Immunization Verification in the CalSAWS Software with the CalSAWS standard header information.	1. Estimate is for migrating the form in English and Spanish. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	With CA-215148 State Form CW 107 will be added in English and Spanish to LRS/CalSAWS Template Repository. CW 107 will be available to all 58 counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-216641

Migrate MC 4605 – Supplemental Medi-Cal / Medicare Application

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Maria Jensen
	Reviewed By	Pramukh Karla

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/15/2020	0.1	Initial Draft	Maria Jensen
02/10/2021	0.2	Removed BRM address tables and barcode	Maria Jensen

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1 OVERVIEW

This SCR will migrate the C-IV MC 4605 – Supplemental Medi-Cal / Medicare Application (12/09) State form to the CalSAWS system to be used as a supplemental application for Medi-Cal and Medicare Savings Programs benefits.

1.1 Current Design

The MC 4605 - Supplemental Medi-Cal / Medicare Application does not exist in CalSAWS.

The C-IV implementation of the MC 4605 is a 6-impression form consisting of State verbiage and some variables prepopulated with case information. The form can be generated from the Template Repository in English and Spanish. It is structured as having a coversheet, BRM, form MC 4604 and form MC 4605.

1.2 Requests

1. Migrate the C-IV MC 4605 form to CalSAWS.

1.3 Overview of Recommendations

1. Migrate the C-IV MC 4605 form to CalSAWS. Add MC 4604 and MC 4605 separately to the Template Repository in English and Spanish.

1.4 Assumptions

1. BRM barcode will be added for MC 4604 and MC 4605 forms with SCR CA-222353.
2. When generated in the context of a case, the body fields will be editable for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add Form MC 4604 - Supplemental Medi-Cal / Medicare Application

2.1.1 Overview

This SCR will migrate the State form MC 4604 – Supplemental Medi-Cal / Medicare Application (revision 12/09) to the CalSAWS system to be used as a supplemental application for Medi-Cal and Medicare Savings Programs benefits. Please see the attached Supporting Documents #1-2 for details.

State Form: MC 4604 (12/09)

Programs: Medi-Cal

Attached Forms: None

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Create Form MC 4604 XDP

1. The new form will have 4 impressions with specific verbiage provided by the State, and some input fields. The first impression will consist of a coversheet with a standard header. The second impression will be empty and will act as a placeholder for the BRM. The third and fourth impressions will be the actual MC 4604 State form. Please see the Supporting Documents #1-2 for details.

   Form Header: CalSAWS Standard Header #1 (on the 1st page)
   Form Title (Document List Page Displayed Name): Supplemental Medi-Cal / Medicare Application
   Template Description: This form is used as a supplemental application for Medi-Cal and Medicare Savings Programs benefits.
   Form Number: MC 4604
   Include NA Back 9: No
   Imaging Form Name: Supp MC / Medicare Application
   Imaging Document Type: Application, Intake, or Screening
   Form Mockups/Examples: See Supporting Documents #1-2 for PDF Mockups

2. Barcode options for the MC 4604 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

3. Add Form MC 4604 to the Template Repository in English and Spanish for all 58 counties.

   Required Document Parameters: Case Number, Customer Name, Receiving County, Language

4. Include the following Print Options and Mailing Requirements for Form MC 4604:

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): Participant selected on the document parameters page
   Mailed From (Return): Standard Population
   Mail-back-to Address: N/A
   Outgoing Envelope Type: Standard Outgoing Mail
   Return Envelope Type: N/A

   Additional Requirements:
   Special Paper Stock: N/A
   Enclosures: No
   Electronic Signature: No
   Post to SSP: Yes
   Clock Indicator: N/A

5. **Form Variable Population**
   Some of the input fields will be prepopulated when generated via the Template Repository in the context of a case.

State of California Health and Human Services Agency — Department of Health Care Services

Case Name: <CASE_NAME>

Case Number: <CASE_NUMBER>

SUPPLEMENTAL QUESTIONS FOR MEDI-CAL/MEDICARE SAVINGS PROGRAM APPLICATION

If you want the county to see if you are eligible for a Medicare Savings Program such as Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), or Qualifying Individual 1 (QI 1), answer the questions in the first part. If you want the county to see if you can get regular Medi-Cal answer all the questions. After you are done, return this form to the county in the pre-addressed, postage paid envelope provided, or to the address on your letter.

1 Did you have medical expenses in the three months before you applied for Low Income Subsidy/

Figure 2.1.2.5 – Form MC 4604 body

Form Body Variables:

Variable Name	Population	Formatting	Editable*	Template Repository Population
CASE_NAME	Populated using case information	Arial Font Size 10	Y	Y
CASE_NUMBER	Populated using case information	Arial Font Size 10	Y	Y

* Note: The Editable column of the table above refers to if the variable will be editable when populated. When generating a Blank Form from Template Repository the field will be editable unless otherwise indicated.

2.2 Add Form MC 4605 - Important Information on Medi-Cal and Medicare Savings Programs

2.2.1 Overview

This SCR will migrate the State form MC 4605 – Important Information on Medi-Cal and Medicare Savings Programs (revision 12/09) to the CalSAWS system to be used to inform the customer about Medi-Cal and Medicare Savings Programs benefits, and to allow the customer to opt out of Medi-Cal / MSP benefits. Please see the attached Supporting Documents #3-4 for details.

State Form: MC 4605 (12/09)

Programs: Medi-Cal

Attached Forms: None

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.2.2 Create Form MC 4605 XDP

1. The new form will have 4 impressions with specific verbiage provided by the State, and some input fields. The first impression will consist of a coversheet with a standard header. The second impression will be empty and will act as a placeholder for the BRM. The third and fourth impressions will be the actual MC 4605 State form. Please see the Supporting Documents #3-4 for details.

   Form Header: CalSAWS Standard Header #1 (on the 1st page)
   Form Title (Document List Page Displayed Name): Important Information on Medi-Cal and Medicare Savings Programs
   Template Description: This form is used to inform the customer about Medi-Cal / MSP benefits and to allow the customer to opt out of Medi-Cal / MSP benefits.
   Form Number: MC 4605
   Include NA Back 9: No
   Imaging Form Name: Important Info on MC and MSP
   Imaging Document Type: Application, Intake, or Screening
   Form Mockups/Examples: See Supporting Documents #3-4 for PDF Mockups

2. Barcode options for the MC 4605 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

3. Add Form MC 4605 to the Template Repository in English and Spanish for all 58 counties.

   Required Document Parameters: Case Number, Customer Name, Receiving County, Language

4. Include the following Print Options and Mailing Requirements for Form MC 4605:

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): Participant selected on the document parameters page
Mailed From (Return): Standard Population
Mail-back-to Address: N/A
Outgoing Envelope Type: Standard Outgoing Mail
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: No
Electronic Signature: No
Post to SSP: Yes
Clock Indicator: N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	MC 4604 (English)	MC4604_EN.pdf
2	Correspondence	MC 4604 (Spanish)	MC4604_SP.pdf
3	Correspondence	MC 4605 (English)	MC4605_EN.pdf
4	Correspondence	MC 4605 (Spanish)	MC4605_SP.pdf

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-218918 - CalHEERS eHIT: Enable Outbound Information Update Transaction

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Maria Feliciano-Nelson
	Reviewed By	Derek Goering, Prashant Goel, Geetha Ramalingam, William Baretsky

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/23/2020	.01	Draft Design	M. Feliciano
01/14/2021	.02	Reviewed draft	Renee Gustafson
01/21/2021	.03	Reviewed draft with Build and Test Team	M. Feliciano
01/27/2021	.04	Added recommendation for handling first run with LA county and again upon migration of C-IV counties	Renee Gustafson
01/29/2021	1.0	Confirmed assumption for C-IV migration and prepared for committee review	M. Feliciano

Table of Contents

1 OVERVIEW

This document describes the changes needed in CalSAWS to enable the outbound Information Update Transaction. The outbound Information Update Transaction is comprised of two batches which identify, and stage changed data collection in a case to send to CalHEERS.

This SCR updates CalSAWS to use the current C-IV implementation of the Outbound Information Update transaction batch jobs and enables the Outbound Information Update Transaction from CalSAWS. The C-IV system already has the transactions enabled.

1.1 Current Design

The Information Update transaction in eHIT is a small transaction intended to communicate data collection changes that do not impact Medi-Cal eligibility so an Eligibility Determination Request (EDR) or Determination of Eligibility Response (DER) is not required. The Information Update transaction is both an Inbound and Outbound transaction, meaning, data collection changes made in CalSAWS are sent outbound to CalHEERS and data collection changes made in CalHEERS are received inbound to CalSAWS.

The Information Update transaction communicates changes to the following data points:

- Ethnicity/Race
- Preferred Spoken and Written Language
- Mailing Address
- Email Address
- Phone Number(s)
- Optional Sexual Orientation and Gender Identity (SOGI)
- Authorized Representative (Inbound only)
- Other Program Information Requests (Inbound only)
    - Information for Child Health Disability Prevention
    - Information for Women, Infants and Children Nutrition Program
    - Information for Family Planning Access Care Treatment
    - Information for SHOP
    - Information for Early and Periodic Screening Diagnosis and Treatment
    - Information for Voter Registration
    - Personal Care Services Program

The inbound Information Update transaction is received from CalHEERS and displays on the *Information Update Detail page.* C-IV has daily batch jobs to send the outbound Information Update transaction to CalHEERS; however, CalSAWS does not send the outbound Information Update transaction to CalHEERS.

The C-IV outbound Information Transaction functionality is divided into two batch jobs.

The first C-IV batch job is the "CalHEERS Update Transaction Tables Sweep" job. The first step in the batch job is to remove all records that have a 'Sent' status because those were identified to send in a prior run and the next job successfully sent them. The next step in the batch job is to detect cases with data collection updates since the last successful batch run, not yet communicated to CalHEERS with an EDR, that meet the following criteria:

a. There is a case link to CalHEERS
b. At least one active Medi-Cal individual (not hidden or duplicate) had data changed in one of the following:
    - Is this person Hispanic or Latino?
    - Race/Ethnic Origin
    - Spoken Language
    - Written Language
    - Mailing Address
    - Email Address
    - Phone Number
    - Gender Identity
    - Birth Certificate Gender
    - Sexual Orientation
c. An EDR was not sent since the last successful batch date and the scheduled batch date

The last step in the batch job is to populate the identified records into the CalHEERS Update Transaction Tables and mark them as 'Not Sent'.

The second C-IV batch job is the "CalHEERS Update Transaction Sweep" job. The first step in the batch job is to check the CalHEERS Update Transaction Tables for all records 'Not Sent' and then stage the Information Update transaction data to send to CalHEERS. The eHIT poller recognizes the staged Information Update transaction data and creates and sends the actual transaction to CalHEERS. The next step in the batch job is to update the records in the CalHEERS Update Transaction Tables from 'Not Sent' to 'Sent' so they are removed the following day.

To keep CalHEERS updated with the latest data collection from CalSAWS, the user must send an EDR to communicate this updated information, wait for a DER and then run Medi-Cal EDBC to complete the process.

CalSAWS has two automated batch jobs to detect the data collection changes and send the Information Update transactions overnight, but they are turned off, outdated and have never been run in production.

1.2 Requests

The EDR transaction is not necessary when the data collection changes do not impact eligibility and requiring the user to send an EDR for non-eligibility impacted data collection updates causes extra work for the user.

Import the C-IV outbound Information Update Transaction batch functionality to CalSAWS; this includes the CalHEERS Update Transaction Tables Sweep job (PB00CH201) to detect changes that do not impact eligibility and the CalHEERS Update Transaction Sweep job (PB00CH200) to send the Information Update transaction to CalHEERS.

Pre-populate the comparison data tables as required, prior to the first time the batch jobs will run in CalSAWS for LA County, so that only changes from the day prior are detected as a change. This is to prevent the CalHEERS Update Transaction Tables Sweep job comparison from detecting everything as a change since there is no prior successful batch run.

1.3 Overview of Recommendations

1. Update CalSAWS to use the current C-IV implementation of the Outbound Information Update transaction batch jobs and enable the Outbound Information Update Transaction from CalSAWS.
2. Pre-populate the comparison data tables as required.

1.4 Assumptions

1. The C-IV data in the PERS_CONTACT table will be migrated to CalSAWS as a part of CCC-3030. That will prepare the comparison tables to process C-IV changes on day1 of migration. This will prevent the system from seeing all C-IV data as 'new' and attempting to send an information update transaction for every case linked to CalHEERS. PERS_CONTACT_MV, AUTH_REP and AUTH_REP_MV tables will not be migrated because they are temporary tables.

2 RECOMMENDATIONS

2.1 CalHEERS Information Update Transaction Batch jobs

2.1.1 Overview

1. Update CalSAWS to use the current C-IV implementation of the Outbound Information Update transaction batch jobs and enable the Outbound Information Update Transaction from CalSAWS.
2. Pre-populate the comparison data tables as required.

2.1.2 Description of Change

1. Deprecate the existing PB00CH201 and PB00CH200 batch jobs in CalSAWS.
2. Import the C-IV CalHEERS Update Transaction Tables Sweep job (PB00CH201) functionality to CalSAWS.
3. Import the C-IV CalHEERS Update Transaction Sweep job (PB00CH200) functionality to CalSAWS.
4. Pre-Populate the PERS_CONTACT table to prep the data for the comparison the first time the PB0CH201 job runs.

2.1.3 Execution Frequency

Daily

2.1.4 Key Scheduling Dependencies

PB00CH201 is a predecessor to PB00CH200.

Execute PB00CH201 after Batch MAGI completes and the ‘Stop Listener’ job (PB00CH103) is executed.

2.1.5 Counties Impacted

All counties

2.1.6 Data Volume/Performance

C-IV currently sends approximately 130,000 transactions a month. LA County is expected to send approximately the same number of transactions for a total of approximately 260,000 per month after C-IV migration. No expected impact to batch performance.

2.1.7 Failure Procedure/Operational Instructions

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

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
3.5.2.1	The LRS shall enable the sharing of information across multiple agencies.	CalSAWS will begin sending outbound updates to CalHEERS for non-eligibility related changes in data collection pages.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-219391 | DDID 2629

Migrate CSF 142 IVR Functionality

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nithya Chereddy
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/04/2021	1.0	Original	Nithya Chereddy
02/08/2021	1.1	Added Spanish translation for updated IVR call flow	Nithya Chereddy

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1 OVERVIEW

The purpose of this change is to migrate the Interactive Voice Recognition (IVR) functionality for the CSF 142 form.

1.1 Current Design

CSF 142 is the Verification of Benefits form which was formerly the GEN 2000 - Passport to Services form. The existing functionality in the C-IV system allows the participant to request the CSF 142 form through IVR.

1.2 Requests

Migrate the IVR functionality for CSF 142 form to CalSAWS.

1.3 Overview of Recommendations

1. Add a CalSAWS IVR Client endpoint.
2. Update the IVR call flow to update the GEN 2000 - Passport to Services to CSF 142 - Verification of Benefits.
3. Implement the Business logic to generate the GEN 2000 form from CalSAWS System.

1.4 Assumptions

1. CSF 142 form will not be posted to the Self-Service Portal with this SCR.
2. SCR CA-215092 migrated CSF 142 form to CalSAWS.
3. The IVR functionality that is currently migrated with this SCR will only be available to C-IV migration counties. Los Angeles County and the CalWIN Migration Counties will inherit this functionality when they transition to the new CalSAWS IVR solution.

2 RECOMMENDATIONS

2.1 CalSAWS IVR Client endpoint

2.1.1 Overview

The following IVR Client endpoint will be added to the CalSAWS to support the generation of the CSF 142 form.

2.1.2 Description of Change

1. Add a new IVR Client endpoint to generate the CSF 142 form when requested from the IVR call flow.

   Request Parameters:

CalSAWS Field Name	Type	Comments	Required
personId	Long	Person's unique ID	Y
caseId	Long	Case unique ID	Y
formType	String	CSF 142	Y
begDate	String	Form begin date Format: MM/DD/YYYY	Y
endDate	String	Form end date Format: MM/DD/YYYY	Y

2.1.3 Counties Impacted

39 C-IV Migration Counties.

2.2 Update the IVR Call Flow

2.2.1 Overview

Existing IVR call flow has the form name for CSF 142 as 'Passport to Services'. See Figure 2.2.1 Existing IVR Call Flow for old form name.

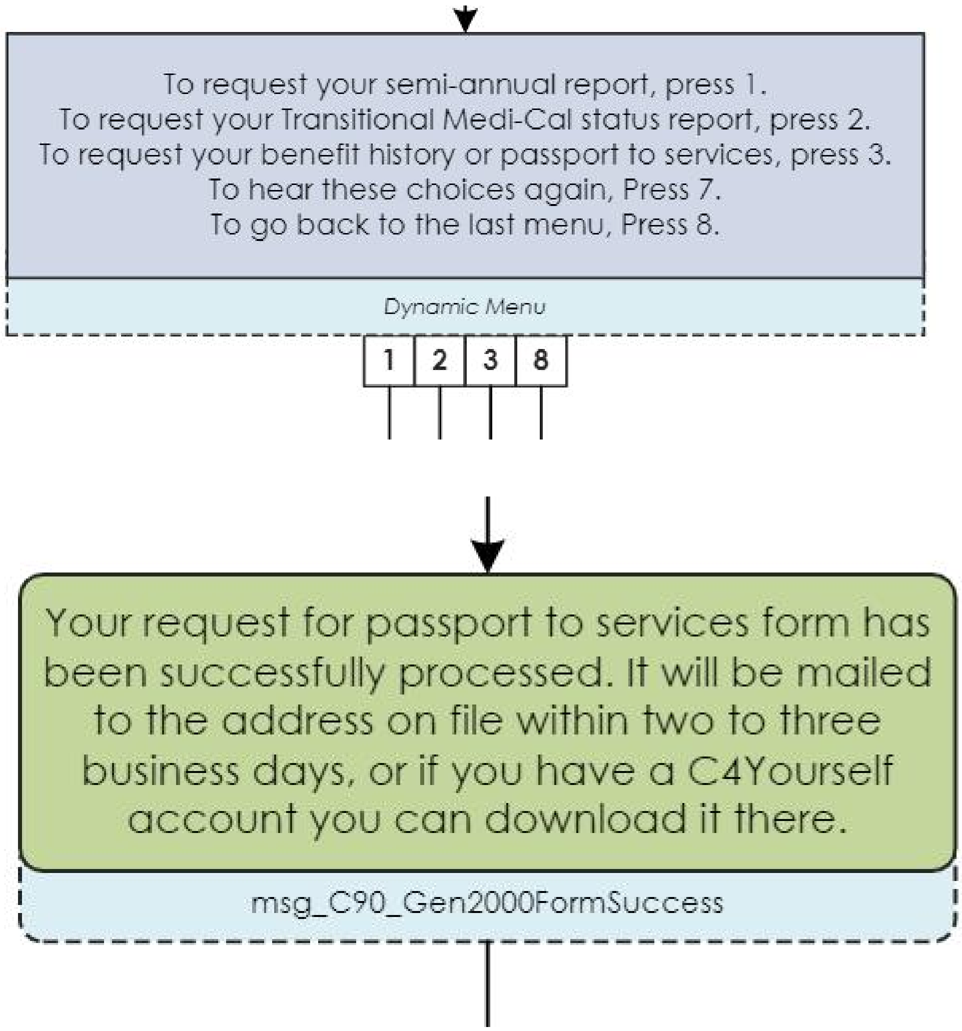

Figure 2.2.1 Existing IVR Call Flow for old form name

2.2.2 Description of Change

1. Update the existing IVR call flow to change the CSF 142 form name to 'Verification of Benefits'. See Figure 2.2.2 Updated IVR Call Flow.

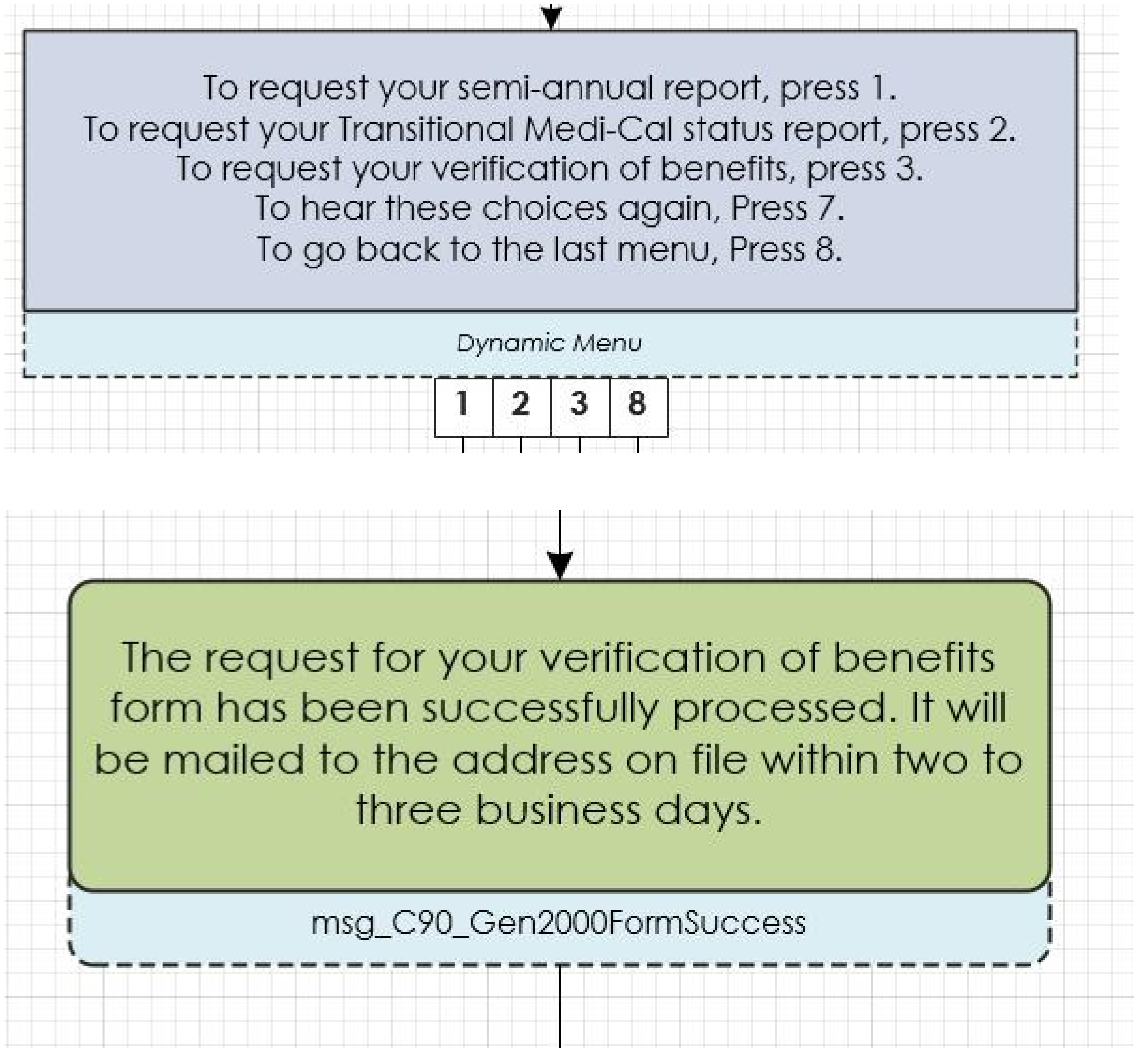

Figure 2.2.2 Updated IVR Call Flow

2.3 Generate CSF 142 form when requested through IVR

2.3.1 Overview

The functionality of generating the CSF 142 form through IVR currently does not exist in the CalSAWS.

2.3.2 Description of Change

1. Add business logic to generate CSF 142 form when requested through IVR. Business logic will perform the following actions if the person requesting the form has a valid Mailing Address.
   a. Generate the form in person's written language. CSF 142 form will generate in English if the CSF 142 form is not available in the person's written language.

b. Generate the CSF 142 form with Printed Centrally option.

Technical Flow: IVR Client endpoint will get called when the customer requests Verification of Benefits form. This will put a message in queue (Active MQ) and a listener inside CalSAWS application will process the message. Business logic should be added which will generate the CSF 142 form.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1.	IVR	Spanish translation for the updated IVR Call Flow	Spanish translation for IVR Call Flow.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
2629	The CONTRACTOR shall migrate the GEN 2000 – Passport to Services to the CalSAWS Software with the following updates: 1) Add the CalSAWS standard header information 2) Update the title from "Passport to Services" to "Verification of Benefits" 3) Remove the "Monthly Gross Inc" column 4) Update "CW Grant" to "CalWORKs" 5) Update "General Assistance" to "GA/GR" 6) Update "CF Allotment" to "CalFresh"	1. Estimate is for migrating the form in English and Spanish along with adding IVR trigger to post this form to self-service portal real time. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. Estimate does NOT include any effort for modifying or creating new Functional Design Documents (FDDs) for forms being modified/migrated/created.	1. IVR functionality is being migrated to CalSAWS system with this SCR.

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
	7) Add a new Column labeled "RCA" 8) Add "Current" before "Household details" 9) Update "CF" to "CalFresh" 10) Update "MC" to "Medi-Cal" 11) Update the form number from "GEN 2000" to CalSAWS standard naming/numbering format The CONTRACTOR shall migrate the C-IV functionality to request the GEN 2000 via the IVR system to the CalSAWS Software.	Consortium staff will be modifying or creating FDDs. 5. Existing Document Parameter page from C-IV will be migrated which allows the user to pick the benefit month begin date and end date. 6. New IVR System will be in place and behave similar to the existing C-IV IVR System in order to add the ability for the customer to request this form from IVR. 7. New Self-Service Portal will be in place prior to implementation in order to post this form to the customer's account.	

CalSAWS

California Statewide Automated Welfare System

Design Document

SCR CA-220977 – Rekey Nuance Voice Biometrics Speaker ID, and Migrate Predictive Handling Batch Job

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Jared Kuester
	Reviewed By	Pramod Ramesh, Dheeraj Muralidara, and Henry Lee

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/22/2021	0.1	Initial version	Jared Kuester

Contents

1 OVERVIEW

The C-IV County Amazon Connect contact centers voice biometrics system's Speaker ID currently matches the C-IV PERS_ID. The Speaker ID needs to be updated to match the rekeyed PERS_ID in CalSAWS.

To regularly update the accuracy of the Predictive Handling a batch job updates a table with percentage weights of predictions. This batch job needs to be migrated to CalSAWS.

1.1 Current Design

The Nuance Speaker_ID matches the PERS_ID in C-IV.

The C-IV IVR Predictive Handling batch job does not exist in CalSAWS.

1.2 Requests

Rekey the Speaker_ID to match the PERS_IDs in CalSAWS.

Migrate the C-IV IVR Predictive Handling batch job to CalSAWS.

1.3 Overview of Recommendations

1. Rekey the Speaker ID in Nuance to match the rekeyed PERS_ID in CalSAWS
2. Migrate the IVR Predictive Handling batch job to CalSAWS.

1.4 Assumptions

1. Nuance Voice Biometrics only applies to the 39 C-IV Counties.
2. Predictive Handling is only used by San Bernardino county.

2 RECOMMENDATIONS

2.1 Rekey the Speaker ID

2.1.1 Overview

The Nuance Voice Biometrics system identifies a caller with the Speaker ID column internally in their system. The Speaker ID matches the PERS_ID in C-IV. With he migration of C-IV to CalSAWS, the PERS_ID will be rekeyed. The Nuance Speaker ID must be rekeyed to match the new IDs.

2.1.2 Description of Change.

1. Rekey the Nuance Speaker ID to match the PERS_ID column in CalSAWS.
    a. This will match the rekey being done as part of the C-IV Converstion effort.

2.2 IVR Predictive Handling Batch Job

2.2.1 Overview

The IVR Predictive Handling Batch job updates the prediction weights used to make the most accurate predition as possible. The prediction is made each time a customer with a phone number associated to an active case calls into the San Bernardino county IVR.

2.2.2 Description of Change

1. Migrate the C-IV IVR Predictive Handling batch job PB36M500 to CalSAWS.
    a. Updates are made to the following tables.
        i. AGGRUSR.PRDTVE_HANDL_DATA
        ii. AGGRUSR.PRDTVE_HANDL_WEIGHT
    b. Update PERS_ID in PRDTVE_HANDL_DATA to have rekeyed values.
    c. Install R on batch server to enable running R scripts.
    ~~d.~~ Make any needed changes to Predictive Handling scripts for updating Predictive Handling weights for a more accurate prediction.
    ~~e.~~d.

2.2.3 Execution Frequency

Monthly

2.2.4 Key Scheduling Dependencies

N/A

2.2.5 Counties Impacted

San Bernardino County

2.2.6 Data Volume/Performance

< 3 minutes to run in C-IV batch

2.2.7 Interface Partner

Amazon Connect

2.2.8 Failure Procedure/Operational Instructions

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

APPENDIX

Amazon Connect - https://aws.amazon.com/connect/features/

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-222516

Add CF 100 – CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident (11/20)

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Maria Jensen
	Reviewed By	Harish Katragadda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/29/2020	0.1	Initial Draft	Maria Jensen
01/07/2021	0.2	BA comments: Imaging fields, BRM info, Imaging Barcode	Maria Jensen
01/19/2021	0.3	Added Assumptions section and Header information	Maria Jensen
02/10/2021	0.4	Removed BRM address tables and barcode	Maria Jensen

Table of Contents

1 OVERVIEW

This SCR will add the CF 100 – CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident (11/20) State form to the CalSAWS system.

1.1 Current Design

Currently the CF 100 State form does not exist in the CalSAWS system.

1.2 Requests

1. Add State Form CF 100 - CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident to the Template Repository for all 58 Counties. (See Supporting Documents #1-2)

1.3 Overview of Recommendations

1. Add new State form CF 100 - CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident.
2. Make the form available in the Template Repository for all 58 Counties with the CalSAWS standard header information.

1.4 Assumptions

1. The form will have a BRM section. BRM barcode will be added for form CF 100 with SCR CA-222353.
2. When generated in the context of a case, the body fields will be editable for all counties, as per CalSAWS standards.

2 RECOMMENDATIONS

2.1 Add Form CF 100 - CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident

2.1.1 Overview

This SCR will add the State form CF 100 – CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident (revision 11/20) to the CalSAWS system.

State Form: CF 100 (11/20)

Programs: CalFresh

Attached Forms: None

Forms Category: Forms

Template Repository Visibility: All Counties

Languages: English, Spanish

2.1.2 Create Form CF 100 XDP

1. The new form will have 4 impressions which will consist of static verbiage provided by the State and several non-prepopulated input fields. The first impression will be a coversheet with the standard header. The second impression will be empty and will act as a placeholder for the BRM. The third and fourth impressions will be the actual CF 100 State form. Please see the Supporting Documents #1-2 for details.

   Form Header: CalSAWS Standard Header #1 (on the 1st impression)
   Form Title (Document List Page Displayed Name): CalFresh Request for Authorized Representative Drug or Alcohol Treatment Center Resident
   Template Description: This form allows customers to request an Authorized Representative for a resident of a Drug or Alcohol Treatment Center.
   Form Number: CF 100
   Include NA Back 9: No
   Imaging Form Name: CF Request for AR Drug/Alcohol Resident
   Imaging Document Type: Authorized Rep and Release of Info
   Form Mockups/Examples: See Supporting Documents #1-2 for PDF Mockups

2. Barcode options for the CF 100 Form:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

3. Add Form CF 100 to the Template Repository in English and Spanish for all 58 counties.

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

4. Include the following Print Options and Mailing Requirements for Form CF 100:

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): Participant selected on the document parameters page
   Mailed From (Return): Program Worker's Office Address
   Mail-back-to Address: N/A
   Outgoing Envelope Type: Standard Outgoing Mail
   Return Envelope Type: N/A

   Additional Requirements:
   Special Paper Stock: N/A
   Enclosures: No
   Electronic Signature: Yes
   Post to SSP: Yes
   Clock Indicator: N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Correspondence	CF 100 (English)	CF100_EN.pdf
2	Correspondence	CF 100 (Spanish)	CF100_SP.pdf

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-222517

Add State Form CF 101 (11/20) - CalFresh Request for Authorized Representative form

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/17/2020	1.0	Initial Revision	Raj Devidi
12/28/2020	1.1	Updated BRM barcode requirements as per BA comments	Raj Devidi

Table of Contents

1 OVERVIEW

The purpose of this change is to add the CF 101 (11/20) - CalFresh Request for Authorized Representative Form to CalSAWS and generate this form from the Template Repository.

1.1 Current Design

The purpose of this change is to add CF 101 (11/20) - CalFresh Request for Authorized Representative form to the CalSAWS and make this form available for all 58 counties.

1.2 Requests

The CF 101 (11/20) - CalFresh Request for Authorized Representative form will be available in English and Spanish languages.

- This form will be available in the Template Repository for all 58 counties.

1.3 Overview of Recommendations

Add CF 101 (11/20) - CalFresh Request for Authorized Representative form to CalSAWS Template Repository in English and Spanish languages. Make the form available for 58 counties.

1.4 Assumptions

1. Page numbers will be added on the form.
2. CF 101 (11/20) - CalFresh Request for Authorized Representative form will be available for all 58 counties.
3. All form fields are editable unless specified.
4. BRM barcode will be added on CF 101(11/20) - CalFresh Request for Authorized Representative form with SCR CA-222353.

2 RECOMMENDATIONS

2.1 Add the CF 101 (11/20)- CalFresh Request for Authorized Representative form to CalSAWS

2.1.1 Overview

Add the Form CF 101 (11/20) - CalFresh Request for Authorized Representative form to CalSAWS.

State Form: CF 101 (11/20)
Programs: CalFresh
Attached Forms: N/A
Forms Category: Form
Languages: English and Spanish.
Template Repository Visibility: All 58 counties

2.1.2 Description of Change

1. Add CF 101 (11/20) - CalFresh Request for Authorized Representative form in English and Spanish languages to the CalSAWS Software.

   Form Header: Add CalSAWS State Standard Header
   Form Title/Name: CalFresh Request for Authorized Representative
   Form Description: This form gives the participant the opportunity to appoint an Authorized Representative to pick up and negotiate their benefits and make the application on their behalf.
   Form Number: CF 101
   Include NA Back 9: N/A
   Imaging Form Name: CalFresh Request for Auth Rep
   Imaging Document Type: Authorized Rep and Release of Info
   Form Mockups: Please refer to Section 3.0 – Supporting Document #1.

2. Add the CF 101 (11/20) - CalFresh Request for Authorized Representative form to Template Repository. The following parameters will be required:

   Required Form Input: Case Number, Customer Name, Program, and Language.

3. Populate fields as below when CF 101 (11/20) - CalFresh Request for Authorized Representative form is generated from Template Repository.

   a. Header fields population

Field	Description
Section: Header (CalSAWS Standard Header), Page 1	
Worker Name	Name of Worker who is assigned to the Program
Worker ID	ID of Worker who is assigned to the Program
Worker Phone Number	Phone Number of Worker who is assigned to the Program
Case Name	Case Name on the Case
Date	Date on which CF 101 (11/20) form generated
Customer ID	Customer Id of the Participant
Case Number	Case Number on the Case

b. Populate county use only section

Field	Description
Case Name	Case Name on the Case
Case Number	Case Number on the Case
Worker Name	Name of Worker who is assigned to the Program
Worker Number	Phone Number of Worker who is assigned to the Program

4. Footer requirements

   As mentioned in mockup.

5. Agency name requirements

   As mentioned in mockup.

6. Add the following barcode options to the CF 101 (11/20) - CalFresh Request for Authorized Representative form

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

7. Add the following print options to the CF 101 (11/20) - CalFresh Request for Authorized Representative 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 Program selected on the Document parameter page.
Mailed From (Return): Program Worker's Office Address
Mail-back-to Address: Program Worker's Office Address
Outgoing Envelope Type: Standard
Return Envelope Type: N/A

Additional Requirements:
Special Paper Stock: N/A
Enclosures: N/A
Clock Indicator: N
Electronic Signature: Yes
Post to Self Service Portal: Yes

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	CF 101 (11/20) Form	CF101_EN.pdf CF101_SP.pdf

4 REQUIREMENTS

4.1 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
N/A	Add State Form CF 101 (11/20) - CalFresh Request for Authorized Representative to the Template Repository for all 58 Counties.	1. Estimate is for updating the form in English and Spanish along with updating the batch and online triggers. 2. Spanish translations will be provided by the Consortium. 3. See DDID 2664 assumption for listing of the threshold languages included in the estimate. 4. 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.	SCR CA-222517 updates CF 101 (11/20)- CalFresh Request for Authorized Representative Form and implement in English and Spanish languages.

Memorandum	CalSAWS Project Regulations: H.R. 133 Meeting: January 26, 2021
To:	PPOCs, RMs, Committee Members
From:	CalSAWS Project
Attendees:	PPOCs, RMs, Committee Members, CalSAWS Project

Memorandum Purpose:
This memorandum is intended to convey the batch EDBC scope, county actions and schedule for the referenced program changes.

Scope:

Per H.R. 133, SCRs CA-223408/CIV-108468 implemented the 15% increase to the CalFresh Max Allotment and an increase to the CalFresh Minimum Allotment effective 01/01/2021 on 02/03/2021.
Per H.R. 133, SCR CA-223410/CIV-108470 Updated the Pandemic Unemployment Compensation (PUC) as an income type to be treated as exempt income for CalFresh program effective 01/01/2021 on 02/03/2021

To minimize the work required by the counties, the project will take the following actions over the weekend:

CalFresh Batch EDBC Processing:

1. **Batch:**
    a. Run batch EDBC on 02/05/2021 for CIV system and 02/06/2021 for CalSAWS for the benefit months of 01/2021, 02/2021, and 03/2021 for:
    All active CF (including TCF) programs, and any active Nutrition Benefit (NB) programs on the same case as the active CF program in targeted program mode.
    Exclude the following cases:
        i. The benefit month is past the latest RE due date for the program.
        ii. The program has a SAR7 due month prior to the targeted benefit month with the report status in Sent, Received, or Incomplete and SAR7 due date is prior to EDBC run date
        iii. EDBC has already been processed for the benefit month since SCR CCA-223408/CIV-108468 went to production on 02/03/2021
    b. In CalSAWS: Run the above population with run reason 'CF COLA' (CT744_FS).
    c. In CalSAWS: Run the above population with Sub Type code '15% CalFresh Allotment Adjustment per Consolidated Appropriations Act, 2021' (CT942_XX).

2. **NOAs:**
    a. Reject the following NOAs generated by the batch EDBC:
        i. CalSAWS Supplement NOAs
        ii. C-IV Supplement NOAs
        iii. C-IV Positive Benefit Change NOAs

    Note: CalSAWS will send out all Benefit Change NOAs and Discontinuance NOAs generated by the batch. C-IV will send out all Negative Benefit Change NOAs and Discontinuance NOAs generated by the batch. The difference in NOAs being rejected is due to the difference of how the NOAs are implemented and stored in the two Systems. C-IV currently differentiates between positive and negative Benefit Change NOAs. This functionality will be added for CalSAWS with SCR CA-223784.

    All notices will be sent to the Central Printing facility the night of the batch EDBC process.

3. **Journal:**
    CalSAWS only: A journal entry will be created for each program run by the batch EDBC process. This will be the standard journal entry added by the batch EDBC process. The long description will read:

    > "Batch EDBC Ran for <Effective Month, Year>. Batch EDBC processed for the <Program Name> program for following reasons: 15% CalFresh Allotment Adjustment per Consolidated Appropriations Act, 2021"

    CIV only: Create a DCR to insert a journal with the following information for each case processed through the one-time batch process. There will be only one journal per case, per benefit month successfully processed.

    Journal Category: Eligibility
    Journal Type: Batch EDBC

Short Description: Batch EDBC ran for [MONTH/YEAR].
Long Description: Batch EDBC ran for [MONTH/YEAR]. Batch EDBC processed for the [Program Type] for the following reasons: 15% CalFresh Allotment Adjustment per Consolidated Appropriations Act, 2021

4. **List Details:**
The project will post the following lists to the web portal in the following location:

CalACES Web Portal > System Changes > SCR and SIR Lists > 2021

a. The lists will be posted for C-IV cases to the 'SCR CIV-108469' folder.
b. The lists will be posted for CalSAWS cases to the 'SCR CA-223409' folder.

List	**County Action**
a. List of Cases Discontinued by Batch EDBC Process. Include additional columns to indicate program type, program closure reason, and benefit month	These cases are likely the result of household changes or ongoing data collection which were not yet processed through EDBC. Since the purpose of this Batch EDBC process was not to discontinue households, review these cases to verify the closure was accurate.
b. List of Cases Where Batch EDBC Process Closed a Person. Include an additional column to indicate program type, and benefit month	These cases are likely the result of household changes or ongoing data collection which was not yet processed through EDBC. Since the purpose of this Batch EDBC process was not to close persons, review these cases to verify the closure was accurate.
c. List of Cases that Resulted in a Benefit Reduction. Include additional columns to indicate each benefit reduction type in a separate column (Household/AU Size Change, Income Change, Proration Change, Over Payment Adjustment Change), and benefit month	These cases are likely the result of household changes or ongoing data collection which was not yet processed through EDBC. Since the purpose of this Batch EDBC process was not to reduce benefits, review these cases to verify the benefit reduction was accurate.
d. List of Cases That Resulted in Read-Only EDBC Include additional columns to indicate program type, read-only reason, and benefit month	Since Batch EDBC couldn't automatically apply the intended change to these cases, users may process EDBC to apply intended changes, if applicable.

List	County Action
e. List of Cases Skipped During Batch Run. Include additional columns to indicate the program type, skip reason, and benefit month	Since Batch EDBC couldn't automatically apply the intended change to these cases, users may process EDBC to apply intended changes if applicable.

Reminder: For the Systems to issue the correct January 2021 Emergency Allotments (EA), the 15% CalFresh increase will be processed prior to the EA job. The January EA job has been rescheduled to run on 02/13/2021.

Development Schedule

1. Review the batch process schedule with counties on 01/26/2021.
2. Deliver the driving query and list queries to the System Test team on 01/26/2021.
3. System Testing of the CF batch process will occur between 01/26/2021 and 02/5/2021.
4. Run CF batch EDBC in production for CalSAWS systems on 02/06/2021.
5. Run CF batch EDBC in production for CIV systems on 02/05/2021.

Things to remember about these batch EDBC processes:

- All impacts from Defects and SCRs which have not been implemented will continue to occur during the batch processing.
- There are multiple reasons why a program may not be successfully run through batch EDBC processing. Some examples include: No Worker Assigned, Overridden Program Case, and Pending Program/Person/Application. Please review tasks and the Batch Eligibility Report daily.
- The EDBCs will have an EDBC Source of 'Batch EDBC Rules'.
- When a user runs EDBC on a case where a prior pending month exists, the EDBC will have a type of Read-Only. When running Batch EDBC that restriction does not apply and these EDBCs will not be Read-Only.
- Any updates or lack of updates made/not made to cases will impact the Batch EDBC results. This means programs may be discontinued (due to non-compliances, etc.) unexpectedly.
- All notices will be generated normally, except as mentioned in #2 NOAs section above.

County Action:

- Review cases included in the lists and take necessary action.
- Review the Batch Eligibility Report and action cases which could not be processed. This report is an on-request report available under Global: Reports > Local: On Request > Task: Administrative. If you do not see this report, please contact your Security Administrator for rights. To see cases not processed select a status of 'Not Processed' on the Reports Parameters pages

Schedule Considerations:

- **C-IV system will be down from Friday 2/05/2021 1PM to EOB Sunday 2/7/2021 during CF batch processing. The following is detailed status of each resource during the down time:**

Resource	C-IV	Imaging	Ad-Hoc /EDR	OBIEE	IVR	PRT	Training	LDS	C4 Yourself
Status	Down	Down	Up	Down	Up	Up	Down	Up	Up

- CalSAWS will not be down during CF batch processing on Saturday, February 06, 2021
- Batch jobs scheduled for each evening will run after the batch EDBC process completes.
- Approximately 1,800,000 active programs will be processed during the CF batch EDBC process in C-IV for the benefit month of 1/2021, 2/2021, and 3/2021.
- Approximately 2,200,000 active programs will be processed during the CF batch EDBC process in CalSAWS for the benefit month of 1/2021, 2/2021, and 3/2021.
- Approximately 50,000 programs processed per hour via batch EDBC.
- The System cannot run batch EDBC processing during the following:
    - Main Payroll
    - Foster Care Main Payroll
    - SAR7 Discontinuance
    - RE Discontinuance
    - 10-day Discontinuance
    - CalFresh Recertification Discontinuance
    - Primary Period of Maintenance (PPM) [C-IV Only]
        - 6:30 AM – 9:00 PM, Monday through Saturday

Timeline:

- Expected CF Batch EDBC processing for CalSAWS System: 02/06/2021.
- Expected CF Batch EDBC processing for CIV System: 02/05/2021.

CalSAWS in Red
C-IV in Blue

February 2021

SUN	MON	TUES	WED	THUR	FRI	SAT
	1 SAR7 Discontinuance	2 SAR7 Discontinuance	3	4	5 **CIV- CF Batch EDBC run**	6 **CIV- CF Batch EDBC run** **CalSAWS- CF Batch EDBC run**
7	8	9	10	11	12 NA 960X NA 960X	13 Jan EA Job Jan EA job
14	15	16 Ten-Day Discontinuance CW/CF RE Packets/ Ten-Day Discontinuance/ NA RE X	167	18	19 Main Payroll	20
21	22 Send SAR7/SAR2	23 Send SAR7	24 Main Payroll	25	26	27 CW/CF Disc CW/CF Disc
28						

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-223624 | CIV-108495

Run Batch EDBC with 2021 FPL Values

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Tisha Mutreja
	Reviewed By	Derek Goering, Prashant Goel, Naga Chinduluru, Geetha Ramalingam, William Baretsky

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/08/2021	1.0	Initial Draft	Tisha Mutreja
01/19/2021	1.1	Added Medicare Part B Premium update	Tisha Mutreja
01/25/2021	1.2	Added policy and updated Data Volume	Tisha Mutreja
01/26/2021	1.3	Added Implementation Dates	Tisha Mutreja
01/28/2021	1.4	Added Policy	Tisha Mutreja
02/11/2021	1.5	Added MAGI RE DER column to Read-Only list and formatted throughout	Renee Gustafson
02/16/2021	1.6	Replaced Monthly FPL Chart attachment with newest version from DHCS	Renee Gustafson
02/19/2021	1.7	Added Technical Note to define "Receiving Aid".	Ritu Chinya

Table of Contents

1 OVERVIEW

With release 21.02.23, the System was updated with the 2021 Federal Poverty Level (FPL) values based on ACWDL 21-01. Any 2021 Medi-Cal EDBC run prior to the update used the previous 2020 FPL values. This SCR will automate re-running Medi-Cal EDBC for 2021 benefit months to update the budget to use the 2021 values per the directive in the ACWDL.

1.1 Current Design

With CA-223627/CIV-108496 the System updated the 2021 FPL values based on ACWDL 21-01. Any 2021 Medi-Cal EDBC run prior to the update used the 2020 FPL values per ACWDL 20-03.

The System also updated records with Medicare Part B Premium amount to $148.50 for records with current amount less than $144.60 and Payment Method as 'State'.

CalSAWS only:

For FPL COLA - Current Batch EDBC functionality allows Batch EDBC with Sub-Type Code 'PL' to automatically add a standard Journal Entry to cases processed by Batch EDBC with:

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

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

For SSA COLA - A standard Journal Entry will be created automatically based on the Sub Type code = 'CT942-SA' – Annual SSA COLAs and Related Changes when the batch is run.

1.2 Requests

1. Run Batch EDBC for Medi-Cal cases in accordance with ACWDL 21-01 so that the new FPL values are correctly applied. The effective date of the 2021 FPL values vary as follows:
   - Effective retroactively to January 01, 2021
     - Applicants and recipients in Medicare Savings Programs (MSP): Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), Qualified Individual 1 (QI-1) who do not receive Title II - Retirement, Survivors and Disability Insurance (RSDI) income
   - Effective retroactively to March 01, 2021
     - Applicants and recipients in MSP (QMB, SLMB, QI-1) who are receiving Title II - RSDI income
   - Effective April 01, 2021

    - Applicants in an active, Non-MAGI program not included in the groups above
  - **CalSAWS only:** Exclude Medi-Cal cases from Batch EDBC processing if the Medi-Cal program is assigned to a DCFS worker.
2. Medicare Part B Premium amount was updated to $148.50 for records with current amount less than $144.60 and Payment Method as 'State' with CA-223627/CIV-108496. Run Batch EDBC on updated records.
3. **C-IV only:** Create a Journal with 'FPL COLA' reason for the FPL COLA Batch cases, and with 'SSA COLA' reason for cases run due to Medicare Part B Payment Method update.
4. Provide lists of cases to the county when a case or individual is discontinued from Medi-Cal, a Medi-Cal EDBC is Read-Only or when a case is not processed through Batch EDBC either from being skipped or because a MAGI Determination was requested on the case, but Medi-Cal EDBC has never been run against any MAGI Determination.

1.3 Overview of Recommendations

CalSAWS only: On March 13, 2021, after scheduled batch completes run Batch EDBC to apply updated FPL COLA values to Medi-Cal programs. Generate lists to aid the counties after Batch EDBC completes.

C-IV only: On March 13, 2021, place scheduled batch on hold and operationally run Batch EDBC to apply updated FPL COLA values to Medi-Cal programs. Create journals to document the Batch EDBC. Generate lists to aid the counties after Batch EDBC completes.

1.4 Assumptions

1. Batch EDBC will use the existing MAGI Determination which is relevant to the benefit month and will not trigger a new Eligibility Determination Request (EDR) to CalHEERS.
2. **CalSAWS only**: DCFS Medi-Cal programs will be identified through the worker associated to the program. The workers for DCFS programs are associated to positions that have unit department type of "DCFS". These workers can be identified by the prefix of "19**DC**" in their worker ID numbers.
3. **C-IV only**: March 13, 2021, will be a system down day and Batch EDBC will run throughout normal business hours.
4. No changes to Medi-Cal NOAs are required for this effort.
5. Batch EDBC process skips any overridden budgets.
6. With SCRs CA-215211 and CIV-106907, Negative Impacts in Batch EDBC are prevented for Medi-Cal Beneficiaries due to Public Health Crisis/Natural Disaster which saves EDBC as 'Read-Only' with Read-Only Reason of "Protection due to Public Health Crisis/Natural Disaster".

2 RECOMMENDATIONS

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

2.1.1 Overview

1. Identify cases for which Batch EDBC must run for 2021 benefit months as described in Section 1.2 Requests to apply the updated amounts. Insert the identified cases into SYS_TRANSACT for Batch EDBC processing.
2. Operationally execute Batch EDBC. Batch EDBC will run only for the cases identified.

2.1.2 Description of Changes

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

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

A. <u>Benefit Months: January and February 2021</u>

i. Medi-Cal EDBC has not been processed for January 2021 and February 2021 since updated 2021 FPL values have been deployed to production with CA-223627 and CIV-108496.
ii. There is a Regular Medi-Cal EDBC for the program for the month being run where there exists at least one individual receiving aid from MSP (QMB, SLMB, or QI-1).
iii. None of the individuals receiving aid from MSP receive Title II - Retirement, Survivors and Disability Insurance (RSDI) income.
iv. If MAGI has been requested on the case, a Medi-Cal EDBC has been run against at least one MAGI Determination.
v. **CalSAWS only**: The program is not assigned to a DCFS worker.

B. Benefit Months: March 2021

i. Medi-Cal EDBC has not been processed for March 2021 since updated 20201 FPL values have been deployed to production with CA-223627 and CIV-108496.
ii. There is a Regular Medi-Cal EDBC for the program for the month being run where there exists at least one individual receiving aid from MSP (QMB, SLMB, or QI-1).
iii. If MAGI has been requested on the case, a Medi-Cal EDBC has been run against at least one MAGI Determination.
iv. **CalSAWS only**: The program is not assigned to a DCFS worker.

C. Benefit Month: April 2021

i. Medi-Cal EDBC has not been processed for April 2021 since updated 2021 FPL values have been deployed to production with CA-223627 and CIV-108496.
ii. There exists at least one individual on the program receiving Non-MAGI Medi-Cal aid.
iii. If MAGI has been requested on the case, a Medi-Cal EDBC has been run against at least one MAGI Determination.
iv. There are no individuals on the Medi-Cal program receiving aid with an Express Lane aid code.
v. **CalSAWS only**: The program is not assigned to a DCFS worker.

Technical Note: Receiving aid implies that the person is Active on Medi-Cal with a Member (ME) or Medi-Cal Member Only (MMO) role.

2. Run Batch EDBC January 2021 through and including April 2021 with 'SSA COLA' Run Reason for SSA COLA Medi-Cal cases updated with SCR CA-223627/CIV-108496 recommendation #3

3. Generate lists to aid the counties after Batch EDBC completes (see Outreach section 5.1)

2.1.3 Batch Operations:

Steps of Operation:

i. Identify cases for Batch EDBC processing as mentioned in section 2.1.2.1(A-C) and 2.1.2.2
ii. Operationally execute Batch EDBC processing.

2.1.4 Execution Frequency

This is a one-time change.

2.1.5 Key Scheduling Dependencies

CalSAWS only: Expected start of Batch EDBC processing is on March 13, 2021 during Regular Batch Operation hours.

C-IV only: Expected start of Batch EDBC processing is on March 13, 2021 6:00 AM and Expected completion of Batch EDBC processing is on March 13, 2021 4:00 PM.

2.1.6 Counties Impacted

All 40 counties.

2.1.7 Data Volume/Performance

Batch EDBC will run approximately below mentioned Medi-Cal EDBCs for the months of January 2021 through and including April 2021 for 2021 FPL COLA updates.

BENEFIT MONTH	C-IV	CalSAWS
January,2021	17,303	83,742
February,2021	17,279	83,431
March,2021	163,463	234,787
April,2021	314,051	422,814
TOTAL	**512,096**	**824,774**

Batch EDBC will run approximately below mentioned Medi-Cal EDBCs for the months of January 2021 through and including April 2021 for Medicare Part B Premium amount updates.

	C-IV	CalSAWS
TOTAL	**49,088**	**10,004**

2.2 C-IV Only: Create DCR for Journal Entry

2.2.1 Overview

1. In **CalSAWS**, a standard Journal Entry will be created when Batch EDBC is run for FPL COLA based on Sub Type code = ‘PL’. In C-IV, a standard journal will be created by a data change request.
2. In **CalSAWS**, a standard Journal Entry will be created automatically based on the Sub Type code = ‘CT942-SA’ – Annual SSA COLAs and Related Changes when the batch is run. In C-IV, a standard journal will be created by a data change request.

2.2.2 Description of Change

1. Create a DCR to insert a journal with the following information for each case processed through the one-time batch process for recommendation 2.1.2.1. There will be only one journal per case, per benefit month successfully processed.

   Journal Category: Eligibility

   Journal Type: Batch EDBC

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

   Long Description: Batch EDBC ran for [MONTH/YEAR]. Batch EDBC processed for the [Program Type] for the following reasons: 2021 FPL COLA and related changes

2. Create a DCR to insert a journal with the following information for each case processed through the one-time batch process for recommendation 2.1.2.2. There will be only one journal per case, per benefit month successfully processed.
   Journal Category: Eligibility
   Journal Type: Batch EDBC
   Short Description: Batch EDBC ran for [MONTH/YEAR].
   Long Description: Batch EDBC ran for [MONTH/YEAR]. Batch EDBC processed for the [Program Type] for the following reasons: 2021 SSA COLA and related changes

   Note: The Journal record created from recommendation#2.2.2.1 and recommendation#2.2.2.2 will append into one journal entry if overlapping records exist in both Batch EDBCs.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Eligibility	ACWDL 21-01	ACWDL 21-01.pdf
2	Eligibility	2021 Monthly FPL Chart 600% Enclosure 1	2021 Monthly FPL Chart 600% NEW.PD
3	Eligibility	2021 Annual FPL Chart 600% Enclosure 2	2021 Annual FPL Chart 600% Enclosure

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.1.2	The LRS shall include an automated method for implementing mass updates triggered by policy changes or mass participant financial changes, including Social Security or Veterans benefits cost of living adjustments (COLAs).	This SCR runs Batch EDBC to update Medi-Cal Eligibility based on the 2021 FPL values.

5 OUTREACH

5.1 Lists

Generate lists to aid the counties after Batch EDBC completes.

The listing will consist of below standard columns:

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

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

1. **List Name: Closed Program**
   Generate a list of cases in which Batch EDBC resulted in the closure of the Medi-Cal program. Counties can use this list to verify that the program's discontinuance is appropriate. If available, display the closure reason (for example: Calif. Residence).

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

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

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

3. **List Name: Read-Only EDBC**
   Generate a list of cases in which Batch EDBC resulted in a Read-Only Medi-Cal EDBC with all the Read-Only Reasons except the Read-Only Reason of "Protection due to Public Health Crisis/Natural Disaster". Counties can use this list to run Medi-Cal EDBC for those cases and take the appropriate action. For additional column, "MAGI RE DER," the value will be 'Y' if the latest DER for the benefit month is a Batch Renewal (RE) DER with at least one person MAGI Pending; otherwise, 'N'.

   Additional Column(s): Read-Only Reason, Benefit Month, MAGI RE DER
   County Action: Since Batch EDBC couldn't automatically apply the intended change to these cases, users may process EDBC to apply intended changes if applicable.

4. **List Name: MAGI Run with EDBC Never Linked**
   Generate a list of cases that were excluded from Batch EDBC processing because the Medi-Cal program had requested a MAGI Determination, but Medi-Cal EDBC never ran against any MAGI Determination on the case.

   Additional Column(s): *none*
   County Action: In this situation, a user has never run EDBC to establish the CalHEERS link for this case. To avoid having Batch EDBC processing do so automatically, these cases were not processed. For cases in this list, run Medi-Cal EDBC to apply the FPL COLA Changes, taking note that this EDBC will establish the link to CalHEERS.

5. **List Name: Batch EDBC skipped with a reason**
   Generate a list of cases in which Batch EDBC was skipped, including the reason for the skip. These cases will be the responsibility of the worker to address.

   Additional Column(s): Skip Reason, Benefit Month
   County Action: Batch could not process these cases because of the skip reasons listed in the list. Review each case and take appropriate action based on the skip reason.

6. **List Name: Denials and Discontinuance for January - April 2021**
   Generate a list of cases for individuals that were denied or discontinued prior to the 2021 FPL value updates although may be eligible with the latest updated 2021 FPL values.

   Additional Column(s): Individual Name, CIN, Benefit Month
   County Action: Review all denials and discontinuances and re-evaluate eligibility based on the 2021 FPL values.
   Criteria:
   i. Medi-Cal EDBC was processed prior to the updated 2021 FPL values (CA-223627/CIV-108496) is deployed.

ii. One of the following failed income budgets exists in the EDBC:
    - QMB
    - SLMB
    - QI-1
    - ABD FPL
    - 250% Working Disabled

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

iv. The Income value of the failed budget is less than the 2021 FPL value for the appropriate effective month. (Refer to the Technical Note)

v. There is a latest EDBC processed for the denied or discontinued individual for any of the months January through April 2021. (Refer to the Technical Note for budget type corresponding to the benefit month).

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

Technical Note***:*** The "Total net non-exempt income" value of the failed budget is less than the 2021 FPL "Maintenance Need" value. Refer to recommendation 2.1.2.1(A-C) for corresponding benefit month and criteria (e.g. RSDI income, Budget type)

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

Above Mentioned Lists will be posted on March 15, 2021, at following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2021>CA-223624
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2021>CIV-108495

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-203793

MEDS: Create EW32 Transaction for Daily Batch

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sowmya Coppisetty
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/08/2020	1.0	Initial Draft	Sowmya Coppisetty
12/17/2020	1.1	Revisions based on BA review	Sowmya Coppisetty
1/20/2021	1.2	Updates from the committee review and Analysts	Sowmya Coppisetty.

Table of Contents

1 OVERVIEW

The Medi-Cal Eligibility Data System (MEDS) system tracks individual eligibility and supports the delivery of health care services for the Medi-Cal program. Depending on the transaction type, the update information in the transaction record may include new or changed eligibility and/or demographic information.

There are variety of transaction types in a single MEDS outbound batch file. The business rules used to populate a given batch file varies by transaction type. With this SCR a new transaction type of 'EW32' will be created for the Med-Cal program to report incarceration details in CalSAWS to MEDS.

1.1 Current Design

Currently in CalSAWS, there does not exist an automated process to report the incarceration status or updates to the incarceration status of an individual in CalSAWS to MEDS in the daily MEDS outbound file. The EW32 transaction is currently online only and initiated by a worker outside of the CalSAWS.

1.2 Requests

1. Add a new transaction type of 'EW32' to the MEDS daily outbound file that will report the incarceration status and updates to the incarceration status to MEDS.
2. Add new MEDS Alerts to the existing list of MEDS Alerts in CalSAWS related to EW32.
3. Update the living arrangement detail page fields 'Name' and 'Living Arrangement Type' to be non-editable in edit mode.

1.3 Overview of Recommendations

1. Create a new streams job for the EW32 transaction to retrieve information on incarceration status and any updates to the incarceration status of an individual Active on a Medi-Cal program in CalSAWS and send this information to MEDS as part of the daily MEDS outbound file.
2. Add new MEDS Alerts to the existing list of MEDS Alerts in CalSAWS related to the EW32 transaction.
3. Update the living arrangement detail page fields 'Name' and 'Living Arrangement Type' to be non-editable in edit mode.

1.4 Assumptions

1. Workers will continue to have the option to submit an online EW32 transaction manually to MEDS when appropriate.
2. There are no changes with this SCR to the automated data collection updates (e.g., Household Status) made by the Los Angeles County Probation interface. Future changes are planned with SCR CA-50091.

2 RECOMMENDATIONS

2.1 Create a new EW32 transaction to the MEDS daily outbound file

2.1.1 Overview

The EW32 transaction will report information pertaining to incarceration (initiating suspension), reporting a release (ending suspension), and to correct previously reported suspension start and/or release dates in CalSAWS to MEDS as part of the daily MEDS outbound file for persons Active on the Medi-Cal program.

With this SCR, a new daily streams job will be created to generate and save the EW32 transaction data in the CalSAWS database, and once all the types of transactions are generated and saved, the final MEDS outbound job will retrieve the records from the database and send them to MEDS in the daily MEDS outbound file.

2.1.2 Description of Change

1. Create a new daily streams job for the EW32 transaction that will generate and save the EW32 transaction information in the CalSAWS database and send them to MEDS in the daily MEDS outbound file.

   The EW32 transactions will be used to report an incarceration date (Arrival Date), report a release date (Departure Date), and to correct previously reported incarceration arrival and/or departure dates of the individual from the Living Arrangement Detail page (refer to figure 2.1.1) to MEDS in the daily outbound file.

Figure 2.1.1 Living Arrangement Detail Page

2. Trigger the EW32 transaction when any of the following conditions are met for the individual who is in 'Active' status on a Medi-Cal program with a 'Incarcerated' Living Arrangement Type:
   a. A new incarceration record with an Arrival Date is entered on the Living Arrangement Detail page.
   b. A Departure Date has been entered into an existing incarcerated Living Arrangement Detail record.
   c. An update is made to the Arrival Date field of an existing incarceration record on the Living Arrangement Detail page.
   d. An update has been made to the Departure Date of an existing incarceration record on the Living Arrangement Detail page.
3. The below data specific to the EW32 transactions will be sent to MEDS. Please refer to the detailed list of data elements sent in the EW32 transaction in Section 2.2.

   Required Data to be sent in the transaction:

   a. Last Name: Last name of the incarcerated individual
   b. First Name: First Name of the incarcerated individual
   c. Initial: Initial or the first alphabet of the incarcerated individual
   d. Incarceration date: This date refers to the Arrival Date entered and saved on the Living Arrangement Detail page. The arrival/incarceration date is a mandatory field and will be sent as follows:
      - Data Element Number- 9345
      - Format: CCYYMMDD
      - Be greater than or equal to 01/01/2010
        Be equal to or lesser than batch Date
      - Cannot overlap an existing incarceration period

   Optional data to be sent in the transaction:

   e. Case Name
   f. District Code
   g. EW Code: Eligibility Worker (EW) Code
   h. Release date: This date refers to the Departure Date entered and saved in the Living Arrangement Detail page for an incarcerated record and it will be sent as follows:
      - Data Element Number-9350
      - Format: CCYYMMDD
      - Equal to or greater than the INCARCERATION-DATE or CORRECTION INCARCERATION DATE
      - Equal to or lesser than batch date

   i. CORRECTION INCARCERATION DATE: When the Arrival date is updated in the Living Arrangement Detail Page, the updated Arrival date will be sent in this data element and it will be sent as follows:
      - Data Element Number -9360

- Format: CCYYMMDD
- This date must be equal to or lesser than batch date or the original arrival/incarceration date
- If correction Incarceration Date is on a transaction, then Incarceration date should be a required field.

j. CORRECTION RELEASE DATE: When the Departure date is updated in the Living Arrangement Detail Page, the updated Departure date will be sent in this data element and it will be sent as follows:
   - Data Element Number -9365
   - Format: CCYYMMDD
   - This date must be equal to or lesser than batch date or the original departure/release date
   - If Correction release Date is on a transaction, then release date should be a required field.

4. When the Arrival/Incarcerated date is updated more than once on the Living Arrangement Detail page the last reported Correction Incarceration date to MEDS will be populated in the Incarceration date data element in the EW E32 Transaction.
5. When the Departure/Release date is updated more than once on the Living Arrangement Detail page the last reported Correction Release date to MEDS will be populated in the release date data element in the EW32 Transaction.
6. When an existing open period of incarceration (incarceration with no release date) is updated with a release/departure date in the Living Arrangement Detail page and a new open period of incarceration is reported and added for the individual on the same day then 2 separate EW32 transactions will be sent to MEDS.
7. When a 'Incarcerated' living arrangement type record is removed from the living arrangement list page A batch EW32 transaction will be triggered and sent with a Release Date/Correction Release Date equal to the Incarceration Date to MEDS.

Note: CalSAWS will display incarcerated data received from partner systems on the Living Arrangement Detail page.

2.2 Event Streaming for EW32 Transactions

2.2.1 Overview

The EW32 transactions will be architected to leverage the "Stream Processing Architecture" and run the job during business hours.

2.2.2 Description of Changes

1. A connector will be set up to gather the individual's arrival and departure dates from the Living Arrangement Detail page for the incarcerated record type.
2. Below is the list of source tables from which connector will be gathering and sending corresponding IDs (System generated primary key for the tables) to the source topics for downstream processing. No PII data will be stored in the source topics.
   a. LIVING_ARRGMT

3. A streaming application will monitor the source topics, process the data, and send the IDs of cases that need to be sent to MEDS to a sink topic.
4. A consumer application will process the data from the sink topic, generate EW32 transactions using the processing logic, and stage them in the MEDS transaction table for the final job to create an outbound file.

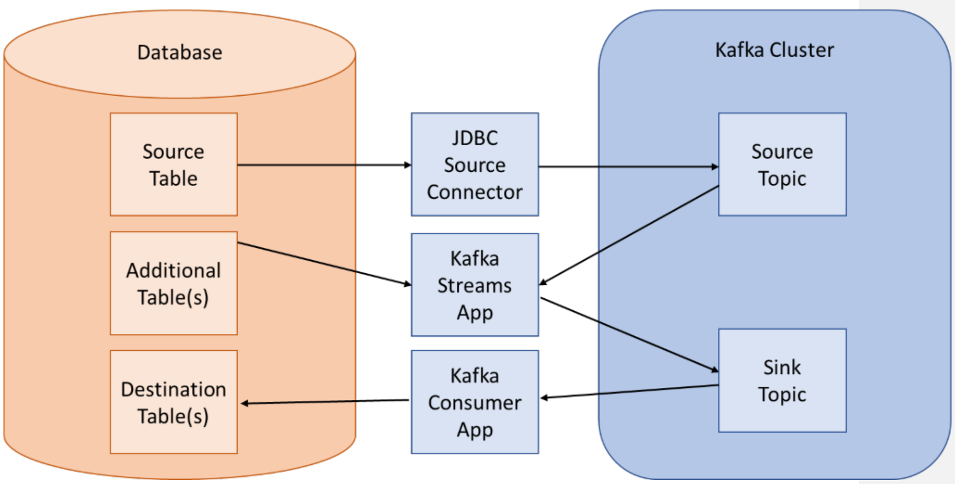

Figure 2.2.1 Streams Processing Architecture for EW32 Transaction

2.2.3 Execution Frequency

Source Connector and Streams Application will be running 24X7.
Consumer Applications will be scheduled to run every hour.

2.2.4 Key Scheduling Dependencies

Consumer Application will be set as the predecessor to the MEDS outbound writer job.

2.2.5 Counties Impacted

All counties.

The 57 Migration Counties will inherit this functionality at the time of migration.

2.2.6 Data Volume/Performance

N/A

2.2.7 Failure Procedure/Operational Instructions

The Batch/Tech Operation Support Team will evaluate errors, diagnose the issue and work with the appropriate teams to resolve the failure.

2.3 File/Record layout and Data mapping for EW32 transaction

MEDS TRANSACTION HEADER RECORD					
FIELD NAME	FIELD DESCRIPTION	TYPE	POSITION	LENGTH	REQUIRED
TRANSACTION_CODE	Transaction code	AN	1	4	Y
SOURCE_SYSTEM_ID_CIV	Source ID	AN	5	2	Y
SOURCE_SYSTEM_ID_COUNTY	County code	AN	7	2	Y
FORMAT_INDICATOR	Field format indicator	AN	9	1	Y
FILLER	N/A	AN	10	24	Y
CREATION_DATE	Date component of record time stamp. YYYYMMDD	N	34	8	Y
CREATION_TIME	Time component of record time stamp. HHMMSSTT	N	42	8	Y
BATCH_NUMBER	Batch number	AN	50	3	Y
FILLER	N/A	AN	53	1	Y
MEDS_ID	Social Security Number	AN	54	9	Y
MEDS_ID_CHECK_DIGIT	SSN check digit	AN	63	1	Y

MEDS TRANSACTION HEADER RECORD					
FIELD NAME	FIELD DESCRIPTION	TYPE	POSITION	LENGTH	REQUIRED
CLIENT_INDEX_NUMBER	Client Identification Number (CIN)	AN	64	9	Y
CIN_CHECK_DIGIT	CIN check digit	AN	73	1	Y
COUNTY	County code	AN	74	2	Y
AID_CODE	Aid code	AN	76	2	Y
SERIAL	Serial number	AN	78	7	Y
FAMILY_BUDGET_UNIT	Family Budget Unit (FBU)	AN	85	1	Y
PERSON_NUMBER	Person number	AN	86	2	Y
BIRTHDATE	Date of birth. YYYYMMDD	N	88	8	Y
CUSTOMER_KEY	Customer key	AN	96	9	Y
FILLER	N/A	AN	105	11	Y
VARIABLE_DATA_LENGTH	Length of key / value pair section following this field in this record	N	116	5	Y

* The AID_CODE data element in the MEDS transaction header will be sent as 'IE' for the EW32 transaction.

*The FAMILY_BUDGET_UNIT data element in MEDS transaction header will be sent as '0' for the EW32 transaction

* CREATION_TIME data element in the MEDS transaction header will be sent as '00000000' for the EW32 transaction

EW32: Report Incarceration and Suspension status					
FIELD NAME	FIELD DESCRIPTION	TYPE	POSITION	LENGTH	REQUIRED
LAST-NAME*	Last name	AN	121	20	Y
FIRST-NAME*	First name	AN	141	15	Y
INITIAL*	Initial	AN	156	1	Y
INCARCERATION-DATE	Incarceration/Arrival date of the individual	N	157	8	Y
CASE-NAME	Case Name	AN	165	18	N
DISTRICT	District Code	AN	183	3	N

EW32: Report Incarceration and Suspension status					
FIELD NAME	FIELD DESCRIPTION	TYPE	POSITION	LENGTH	REQUIRED
EW_CODE	Eligibility Worker (EW) Code	AN	186	4	N
RELEASE_DATE	Release date of the individual	N	190	8	N
CORRECTION INCARCERATION DATE	Updated incarcerated/arrival date	N	198	8	N
CORRECTION RELEASE DATE	Updated release/departure Date	N	206	8	N

2.4 Add new MEDS Alerts related to EW32 Transactions into CalSAWS

2.4.1 Overview

This SCR will add new MEDS Alerts related to the EW32 transactions into CalSAWS.

2.4.2 Description of Changes

1. Add the new MEDS Alerts below to the existing list of MEDS Alerts on the MEDS Alert Admin Detail page.
   - The new MEDS Alerts will be in 'Active' status by default for all counties unless an Admin User updates the status of the Alert to 'Inactive' on the MEDS Alert Admin Detail page.
   - The Task Information section in the MEDS Alert Admin Detail page for each Alert will be available as follows:
     a. Set the Status to 'Inactive'.
     b. The Task Type and Task Sub-Type values will initially be set to blank. If an Admin 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.
     c. The Long Description associated to each of these tasks:
     MEDS Alert {Alert ID} – {Alert Description} has been received.
     Due Date: Default Due Date
     Default Due Date: 10 Days
     Initial Assignment: Default Assignment
     Default Assignment: MEDS Alert Task Distribution

Alert 0506

Internal Alert ID	0813
Alert Description (TITLE_DESCR)	INDIVIDUAL RELEASED FROM INCARCERATION. RE-EVALUATE
Explanation (TEXT_DESCR)	A Release Date was added to MEDS to indicate an individual is no longer incarcerated.
Automation Indicator	No
Task Creation	No
Action Type	Action
Action (ACTN_DESCR)	Confirm contact information (mailing address, residence address, etc.) is current. Determine if individual's Medi-Cal has been reactivated. If not, re-evaluate to determine if the individual is eligible for Medi-Cal benefits.

Alert 1109

Internal Alert ID	0816
Alert Description (TITLE_DESCR)	RELEASE DATE CANNOT BE EARLIER THAN INCARCERATION DATE
Explanation (TEXT_DESCR)	User has entered an Incarceration Date or Correction Incarceration Date that is greater than the Release Date on the EW32 transaction.
Automation Indicator	No
Task Creation	No
Action Type	*PRI-REJ**
Action (ACTN_DESCR)	User must evaluate dates and re-enter date(s) so that the Incarceration or Correction Incarceration Date is prior to the Release Date or Correction Release Date (if also entered).

Alert 2206

Internal Alert ID	0812
Alert Description (TITLE_DESCR)	INCARCERATION PERIOD ALREADY ACTIVE ON MEDS
Explanation (TEXT_DESCR)	A transaction was submitted to add an Incarceration Date to a record with an active incarceration. If the Incarceration Date needs to be corrected, follow correct procedures.

Automation Indicator	No
Task Creation	No
Action Type	*PRI-REJ**
Action (ACTN_DESCR)	N/A

Alert 2207

Internal Alert ID	0814
Alert Description (TITLE_DESCR)	NO ACTIVE INCARCERATION TO RELEASE
Explanation (TEXT_DESCR)	A transaction was submitted to add a Release Date to a record without an active Incarceration. Determine if you are updating the correct record and confirm if you also need to add an Incarceration Date
Automation Indicator	No
Task Creation	No
Action Type	*PRI-REJ**
Action (ACTN_DESCR)	N/A

Commented [TT1]: From MEDS: A transaction was submitted to add a Release Date to a record without an active Incarceration. Determine if you are updating the correct record and confirm if you also need to add an Incarceration Date.

Commented [CS2R1]: Updated to the what is in MEDS

2.5 Living Arrangements Detail page

2.5.1 Overview

The Living Arrangements Detail page allows workers to add or edit a living arrangement. With the introduction of the new EW 32 MEDS batch transaction, which sends updates about the status of an "Incarcerated" type of Living Arrangement to MEDS, it is no longer appropriate to allow workers to edit the 'Name' or 'Living Arrangement Type' fields. These fields will be updated to be non-editable, after a record is initially created; if these fields are entered incorrectly workers will be required to remove the incorrectly added record and create a new one from the Living Arrangements List page.

2.5.2 Living Arrangement Detail Mockup

Living Arrangements Detail

*- Indicates required fields

Save and Return | Cancel

Change Reason

New Change Reason: *
- Select -

New Reported Date: *

Change Reason:
Participant Provided - Verbal

Reported Date:
01/17/2021

View

Name: *
Test, Test 38F

Living Arrangement Type: *
Incarcerated

Name of Location (Institution, Center, Shelter, Facility, etc.):
Folsom County Prison

Arrival Date: *
01/17/2021

Departure Date:

Expected Date of Release:

Save and Return | Cancel

Figure 2.1.1 – Mockup Name

2.5.3 Description of Changes

1. Update fields to be non-editable text when the page is in Edit mode:
    a. 'Name'
    b. 'Living Arrangement Type'

2.5.4 Page Location

- **Global: Eligibility**
- **Local: Customer Information**
- **Task: Living Arrgmt**

2.5.5 Security Updates

N/A

2.5.6 Page Mapping

N/A

2.5.7 Page Usage/Data Volume Impacts

N/A

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.20.1.2	The LRS shall trigger automated requests for LRS Data exchange of information with other systems, based on information captured during the application registration, application evaluation, intake, case maintenance, and referral processes.	Create a new transaction type 'EW32' to report incarceration information of individuals in CalSAWS to MEDS.
2.20.1.6	The LRS shall parse and display interface Alerts by system-related and User-related errors and generate reports for analysis and corrective actions by CONTRACTOR and for review by COUNTY.	Add new MEDS Alerts to the CalSAWS system