




## **Design Document**

CA-209232/CIV-104457

Add Full/Restricted Scope verbiage for Young Adult Expansion Non-MAGI NOAs (CH-139211)

Version 1.1

	DOCUMENT APPROVAL HISTORY	
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# 1 OVERVIEW

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SCRs CA-206941/ CIV-103662 implemented the CalHEERS eHIT: Young Adult Expansion 19 to 25 Years of Age (CH-139211) effort. These SCRs updated the system to grant full scope Medi-Cal to eligible young adults 19-25 years of age, inclusive, regardless of citizenship or immigration status.

## 1.1 Current Design

When the system grants full scope/ restricted scope to Non-MAGI participants, a NOA is generated which explains their eligibility for the approval/ change/discontinuance of the scope.

The NOA generated for the Young Adult Expansion scenarios currently does not have the updated verbiage.

## 1.2 Overview of Recommendations

1. **LRS:** Effective date the existing full scope or restricted scope fragments to populate if the NOA is generated prior to Young Adult Expansion Start date or benefit month begin date is prior to the Young Adult Expansion effective date.  
Note: CIV currently doesn't have the verbiage which indicates the change or approval of the scope with age references.
2. Populate the new State provided fragments on the NOA if the NOA is generated on or after the Young Adult Expansion Start Date and the benefit month is on or after the Young Adult Expansion effective date.
3. **CIV:** Add the MSG\_MAGI\_APPROVAL\_OR\_CHANGE\_REGULATION when the newly added fragments populate on the NOA and the regulations variable is not null.
4. **CIV:** Order the newly added message and MSG\_MAGI\_APPROVAL\_OR\_CHANGE\_REGULATION to populate on the NOA following the existing Aid code category message.

## 1.3 Assumptions

- 1) These SCRs will be implemented with the ability to modify the start date and benefit month effective date based on DHCS guidance. As of the design of this SCR, DHCS provided the start date of 11/20/2019, and the effective date of the policy change as 01/01/2020.
- 2) SCRs CA-209109 CIV-104415 will introduce the new MAGI fragments for YAE.
- 3) The newly added Non-MAGI fragments will be available only in English and Spanish with this effort. Threshold languages will be added in a future release.
- 4) The existing NOAs will continue to generate in the threshold languages if all fragments on the NOA are available in that language (existing framework in LRS and C-IV).
- 5) **CIV:** The state provided verbiage had been updated to match CIV's current functionality.

Example update: Good news! Your <Person>'s Medi-Cal changed to full- scope on <month dd, yyyy>.

- 6) **LRS:** The following update has been made to the 2nd sentence in MAGI regulations section of the State provided verbiage as Hearing rights are on the back of the first page of the Notice. The updated verbiage matches the existing verbiage.
  - a. If you think we made a mistake, you can appeal. See "Your Hearing Rights" ~~on the last page~~ on the back of the first page of this notice to learn how to appeal.
- 7) One-time batches to reevaluate Medi-Cal for young adults age 19-25, inclusive, from restricted scope Medi-Cal to full scope Medi-Cal will be addressed in SCRs CA-208241/CIV-104022 in a future release based on DHCS guidance. The SCRs will provide lists of any processing exceptions to the County for follow-up.
- 8) Medi-Cal age batches will be modified due to Young Adult Expansion. The age 19 and age 21 Medi-Cal batches will be updated and a new age 26 batch to re-evaluate young adults turning age 26 will be addressed in SCRs CA-207950/CIV-103874 in a future release. Existing reports regarding age batch processing will be updated according to the changes implemented with these age batches.

## 2 RECOMMENDATIONS

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### 2.1 Description of Changes

#### 2.1.1 Effective date Existing Fragments – LRS Only

Effective date the following NOAs to populate on the NOA if the NOA is generated prior to Young Adult Expansion Start date or benefit month begin date is prior to the Young Adult Expansion effective date.

- M129 - MC\_AP\_RESTRICT\_MC\_NO\_SOC\_M129
- M134A - MC\_AP\_RESTRICT\_RETRO\_MC\_M134
- M159C - MC\_CH\_ALIEN\_STATUS\_VERIF\_FAIL\_M159
- M160C - MC\_CH\_FULL\_TO\_RESTR

**Example:** Following are the scenarios where the existing fragments are populated on the NOA

- NOA is generated before the Young Adult Expansion Start date
- Benefit Month begin date is prior to 01/01/2020

Note: The trigger condition to check for NOA generation date will be removed if the trigger becomes invalid after the DHCS provides the final YAE start date.

Supporting Documents #1 through #4 have the updated FDDs for LRS. The updates are highlighted.

### 2.1.2 Add New MAGI Fragments

Generate the following new fragments on the NOA if the NOA is generated on or after the Young Adult Expansion Start Date and the benefit month is on or after the Young Adult Expansion Effective Date.

**Example:** Following are the scenarios where the new fragments are populated on the NOA.

- NOA is generated on 11/20/2019 or later for the benefit month begin date of 01/01/2020 or later

**LRS Note:** The existing trigger conditions to generate the NOA for Retro restricted scope approval, Restricted scope approval, Full scope to restricted scope change or Restricted scope to full scope change will remain the same for the new NOAs. The update is to only effective date the existing fragments and populate the new fragments if the NOA is generated after the Young Adult Expansion Start Date and the benefit month is on or after the Young Adult Expansion Effective Date.

- Supporting Documents #5 through #8 are the FDDs for newly added fragments.

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### 2.1.2.1 Restricted-Scope Retro Approval

Following is the verbiage and variable population for the newly added fragments.

CIV	LRS
<p>You asked us to check if &lt;Person&gt; could get Medi-Cal to cover &lt;Person&gt;'s bills for any of the three months before &lt;Person&gt; applied. &lt;Person&gt; qualified for restricted scope Medi-Cal in &lt;BenefitMonth&gt; because &lt;Person&gt; is 26 or older and you did not send us proof of &lt;Person&gt;'s U.S. citizenship or satisfactory immigration status for Medi-Cal purposes. Restricted scope Medi-Cal only covers emergency services and pregnancy related services such as prenatal care, labor, delivery, and postpartum care. If you are not sure if a service is covered by restricted scope Medi-Cal, ask &lt;Person&gt;'s medical provider. You may get or may have already received other notices about &lt;Person&gt;'s eligibility for other time periods. This notice is only telling you that &lt;Person&gt; got Medi-Cal coverage for &lt;BenefitMonth&gt;.</p> <p>If you have proof of &lt;Person&gt;'s citizenship and immigration status that you can give us now, or want to let us know you are having problems getting &lt;Person&gt;'s document, please call your county worker at the number listed on this notice. &lt;Person&gt;'s benefits may change from restricted scope to full scope when you provide us with &lt;Person&gt;'s documents. Full scope benefits allow you to see a doctor for all of your medical needs.</p>	<p>You asked us to check if you could get Medi-Cal to cover your bills for any of the three months before you applied. You qualified for restricted scope Medi-Cal in &lt;BenefitMonth&gt; because you are 26 or older and you did not send us proof of your U.S. citizenship or satisfactory immigration status for Medi-Cal purposes. Restricted scope Medi-Cal only covers emergency services and pregnancy related services such as prenatal care, labor, delivery, and postpartum care. If you are not sure if a service is covered by restricted scope Medi-Cal, ask your medical provider. You may get or may have already received other notices about your eligibility for other time periods. This notice is only telling you that you got Medi-Cal coverage for &lt;BenefitMonth&gt;.</p> <p>If you have proof of your citizenship and immigration status that you can give us now, or want to let us know you are having problems getting your document, please call your county worker at the number listed on this notice. Your benefits may change from restricted scope to full scope when you provide us with your documents. Full scope benefits allow you to see a doctor for all of your medical needs.</p> <p>&lt;Regulation&gt; is the Regulation or law we relied on for this decision. If you think we made a mistake, you can appeal. See "Your Hearing Rights" on the back of the first page of this notice to learn how to appeal. You have only 90 days to ask for a hearing. The 90 days started the day after the date on this notice.</p>

#### 2.1.2.1.1 Variable Population

CIV/LRS	Variable Name	Data population
CIV Specific	Person	Name of the person associated to the action
CIV & LRS	BenefitMonth	The approved retro month in the format of MM/YYYY
LRS Specific	Regulation	California Code of Regulations, Title 22, Section(s) 51056, 50159, 50173, 50501, 50601, 50653, 50701, and 50731, 14007.8

#### 2.1.2.1.2 Trigger conditions – CIV Only

Populate the restricted scope retro approval fragment on the NOA when all the following conditions are true:

1. Program is Medi-Cal
2. Approved EDBC is for a Retro month
3. Individual aid code approval action has been created (ACTN\_INDIVIDUAL\_MC\_AID\_CODE\_APPROVAL)
4. Individual's aid code is the aid code corresponding to Non-MAGI Restricted Scope (CT184 REFER\_TABLE\_2\_DESCR is Restricted and REFER\_TABLE\_3\_DESCR is not null)
5. NOA is generated on or after the Young Adult Expansion Start Date
6. Benefit month is on or after the Young Adult Expansion Effective Date

### 2.1.2.2 Restricted-Scope Approval

CIV	LRS
<p>&lt;Person&gt; has been approved for only restricted scope Medi-Cal because &lt;Person&gt; is 26 or older and you did not send us proof of &lt;Person&gt;'s U.S. citizenship or satisfactory immigration status for Medi-Cal purposes. California law covers full scope Medi-Cal only for individuals who are under age 26 and who do not have or cannot provide proof of citizenship or satisfactory immigration status. Because &lt;Person&gt; is above the age limit, &lt;Person&gt; only qualifies for restricted scope Medi-Cal. Restricted scope Medi-Cal only covers emergency services and pregnancy related services such as prenatal care, labor, delivery, and postpartum care. If you are not sure if a service is covered by restricted scope Medi-Cal, ask &lt;Person&gt;'s medical provider.</p> <p>&lt;Person&gt;'s eligibility for restricted scope Medi-Cal begins &lt;BeginDate&gt;. &lt;Person&gt;'s Medi-Cal coverage will continue unless &lt;Person&gt; is found no longer eligible. This could happen at the time &lt;Person&gt;'s eligibility is renewed or when &lt;Person&gt;'s situation changes.</p> <p>If you have proof of &lt;Person&gt;'s citizenship or immigration status that you can give us now, or want to let us know you are having problems getting &lt;Person&gt;'s document, please call your county worker at the number listed on this notice. &lt;Person&gt;'s benefits may change from restricted scope to full scope when you provide us with &lt;Person&gt;'s documents. Full scope benefits allow you to see a doctor for all of your medical needs.</p>	<p>{Person}</p> <p>You have been approved for only restricted scope Medi-Cal because you are 26 or older and you did not send us proof of your U.S. citizenship or satisfactory immigration status for Medi-Cal purposes. California law covers full scope Medi-Cal only for individuals who are under age 26 and who do not have or cannot provide proof of citizenship or satisfactory immigration status. Because you are above the age limit, you only qualify for restricted scope Medi-Cal. Restricted scope Medi-Cal only covers emergency services and pregnancy related services such as prenatal care, labor, delivery and postpartum care. If you are not sure if a service is covered by restricted scope Medi-Cal, ask your medical provider.</p> <p>Your eligibility for restricted scope Medi-Cal begins &lt;BeginDate&gt;. 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.</p> <p>If you have proof of your citizenship or immigration status that you can give us now, or want to let us know you are having problems getting your document, please call your county worker at the number listed on this notice. Your benefits may change from restricted scope to full scope when you provide us with your documents. Full scope benefits allow you to see a doctor for all of your medical needs.</p>



<Regulation> is the Regulation or law we relied on for this decision. If you think we made a mistake, you can appeal. See "Your Hearing Rights" on the back of the first page of this notice to learn how to appeal. You have only 90 days to ask for a hearing. The 90 days started the day after the date on this notice.

### 2.1.2.2.1 Variable Population

CIV/LRS	Variable Name	Data population
CIV and LRS	Person	Name of the person associated to the action
CIV & LRS	BeginDate	Benefit month begin date in the format of Month DD, YYYY example: July 01, 2019
LRS Specific	Regulation	California Code of Regulations, Title 22, Section(s) 51056, 50159, 50173, 50501, 50601, 50653, 50701, 50731, 14007.8

### 2.1.2.2.2 Trigger conditions – CIV Only

Populate the restricted scope approval fragment on the NOA when all the following conditions are true:

1. Program is Medi-Cal
2. Approved EDBC is not for a Retro month
3. Individual aid code approval action has been created (ACTN\_INDIVIDUAL\_MC\_AID\_CODE\_APPROVAL)
4. Individual's aid code is the aid code corresponding to Non-MAGI Restricted Scope (CT184 REFER\_TABLE\_2\_DESCR is Restricted and REFER\_TABLE\_3\_DESCR is not null)
5. NOA is generated on or after the Young Adult Expansion Start Date
6. Benefit month is on or after the Young Adult Expansion Effective Date

### 2.1.2.3 Full scope to restricted scope

CIV	LRS
Important change to <Person>'s benefits. <Person>'s Medi-Cal changed to restricted scope on <BeginDate>.	Important change to your benefits. Your Medi-Cal changed to restricted scope on <BeginDate>.
<Person>'s Medi-Cal is changing from full scope to restricted scope because <Person> is 26 or older and you did not send us proof that you are a U.S. citizen or have satisfactory immigration status for Medi-Cal purposes. You have not contacted us to let us know that you are trying to provide proof. California law covers full scope Medi-Cal only for individuals who are under age 26 and who do not	Your Medi-Cal is changing from full scope to restricted scope because you are 26 or older and you did not send us proof that you are a U.S. citizen or have satisfactory immigration status for Medi-Cal purposes. You have not contacted us to let us know that you are trying to provide proof. California law covers full scope Medi-Cal only for individuals who are under age 26 and who do not have or

have or cannot provide proof of citizenship or satisfactory immigration status. Now that <Person> is above that age limit, your Medi-Cal will change to restricted scope.

Restricted scope Medi-Cal only covers emergency services, pregnancy related services such as prenatal care, labor, delivery, and postpartum care. If you are not sure if a service is covered by restricted scope, call <Person>'s medical provider.

If you have proof of <Person>'s citizenship or immigration status that you can give us now, or want to let us know you are having problems getting <Person>'s document, please call your county worker at the number listed on this notice. <Person>'s benefits may change from restricted scope to full scope when you send us <Person>'s documents. Full scope benefits allow you to see a doctor for all of your medical needs.

If you give us acceptable proof within one year, <Person>'s Medi-Cal may change back to full scope Medi-Cal starting the month <Person>'s restricted benefits began.

In the meantime, <Person>'s restricted scope Medi-Cal coverage will continue unless <Person> is found no longer eligible. This could happen at the time <Person>'s eligibility is renewed or when <Person>'s situation changes.

cannot provide proof of citizenship or satisfactory immigration status. Now that you are above that age limit, your Medi-Cal will change to restricted scope.

Restricted scope Medi-Cal only covers emergency services, pregnancy related services such as prenatal care, labor, delivery, and postpartum care. If you are not sure if a service is covered by restricted scope, call your medical provider.

If you have proof of your citizenship or immigration status that you can give us now, or want to let us know you are having problems getting your document, please call your county worker at the number listed on this notice. Your benefits may change from restricted scope to full scope when you send us your documents. Full scope benefits allow you to see a doctor for all of your medical needs.

If you give us acceptable proof within one year, your Medi-Cal may change back to full scope Medi-Cal starting the month your restricted benefits began.

In the meantime, your restricted scope 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.

<Regulation> is the Regulation or law we relied on for this decision. If you think we made a mistake, you can appeal. See "Your Hearing Rights" on the back of the first page of this notice to learn how to appeal. You have only 90 days to ask for a hearing. The 90 days started the day after the date on this notice.

### 2.1.2.3.1 Variable Population

CIV/LRS	Variable Name	Data population
CIV Specific	Person	Name of the person associated to the action
CIV and LRS	BeginDate	Benefit month begin date in the format of Month DD, YYYY example: July 01, 2019
LRS Specific	Regulation	California Code of Regulations, Title 22, Section(s) 51056, 50159, 50173, 50601, 50653, 50701, 50731, 14007.8.

### 2.1.2.3.2 Trigger conditions – CIV Only

Populate the full scope to restricted scope change fragment on the NOA when all the following conditions are true:

1. Program is Medi-Cal
2. Approved EDBC is not for a Retro month
3. Individual aid code changed from MAGI or Non-MAGI full scope to Non-MAGI restricted scope
4. NOA is generated on or after the Young Adult Expansion Start Date
5. Benefit month is on or after the Young Adult Expansion Effective Date

### 2.1.2.4 Restricted scope to full scope

CIV	LRS
<p>Good news! &lt;Person&gt;'s Medi-Cal changed to full scope on &lt;BeginDate&gt;.</p> <p>&lt;Person&gt;'s Medi-Cal is changing from restricted scope to full scope because you were able to prove &lt;Person&gt;'s U.S. citizenship or satisfactory immigration status or &lt;Person&gt; is under 26 years old. &lt;Person&gt;'s Medi-Cal coverage will continue unless &lt;Person&gt; is found to be no longer eligible. This could happen at the time &lt;Person&gt;'s eligibility is renewed or when &lt;Person&gt;'s situation changes.</p> <p>&lt;Person&gt;'s eligibility for full scope Medi-Cal benefits may cover past months. If you paid for medical care that was not an emergency or pregnancy related service while &lt;Person&gt; had restricted Medi-Cal benefits, you may be able to get your money back. Call Beneficiary Services at the Department of Health Care Services for answers to your reimbursement questions at 1-916-403-2007.</p>	<p>&lt;Person&gt;</p> <p>Good news! Your Medi-Cal changed to full scope on &lt;BeginDate&gt;.</p> <p>Your Medi-Cal is changing from restricted scope to full scope because you were able to prove your U.S. citizenship or satisfactory immigration status or you are under 26 years old. Your Medi-Cal coverage will continue unless you are found to be no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes.</p> <p>Your eligibility for full scope Medi-Cal benefits may cover past months. If you paid for medical care that was not an emergency or pregnancy related service while you had restricted Medi-Cal benefits, you may be able to get your money back. Call Beneficiary Services at the Department of Health Care Services for answers to your reimbursement questions at 1-916-403-2007.</p> <p>&lt;Regulation&gt; is the Regulation or law we relied on for this decision. If you think we made a mistake, you can appeal. See "Your Hearing Rights" on the back of the first page of this notice to learn how to appeal. You have only 90 days to ask for a hearing. The 90 days started the day after the date on this notice.</p>

#### 2.1.2.4.1 Variable Population

CIV/LRS	Variable Name	Data population
CIV and LRS	Person	Name of the person associated to the action
CIV and LRS	BeginDate	Benefit month begin date in the format of Month DD, YYYY example: July 01, 2019
LRS Specific	Regulation	California Code of Regulations, Title 22, Section(s) 51056, 50159, 50173, 50601, 50653, 50701, 50731, 14007.8.

#### 2.1.2.4.2 Trigger conditions – CIV Only

Populate the restricted scope to full scope approval fragment on the NOA when all the following conditions are true:

1. Program is Medi-Cal
2. Approved EDBC is not for a Retro month
3. Individual aid code changed from MAGI or Non-MAGI restricted scope to Non-MAGI full scope
4. NOA is generated on or after the Young Adult Expansion Start Date
5. Benefit month is on or after the Young Adult Expansion Effective Date

#### 2.1.2.5 Regulations – CIV Only

Note: The newly added fragments will not have any regulations associated to them. Regulations associated to the aid code category message will be populated in the MSG\_MAGI\_APPROVAL\_OR\_CHANGE\_REGULATION fragment.


1. Populate the MSG\_MAGI\_APPROVAL\_OR\_CHANGE\_REGULATION fragment on the NOA when one of the following fragments are added to the NOA and the message associated to the aid code category has regulations attached to it.
  - a. Restricted scope retro approval fragment
  - b. Restricted scope approval fragment
  - c. Full to restricted scope change fragment
  - d. Restricted to full scope change fragment








#### 2.1.2.6 Message ordering – CIV Only

1. Populate the newly added fragments and MSG\_MAGI\_APPROVAL\_OR\_CHANGE\_REGULATION message on the NOA in the following order.
  - a. Aid code approval action message
  - b. Existing Message associated to the Aid code approval
  - c. Newly added restricted scope/full scope Message
  - d. MSG\_MAGI\_APPROVAL\_OR\_CHANGE\_REGULATION

### 3 SUPPORTING DOCUMENTS

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Number	Functional Area	Description	Attachment
1	Correspondence	Existing Non-MAGI - Restricted Scope - Retro NOA	 NOA_M134A_6564_SPD.Doc.docx

Number	Functional Area	Description	Attachment
2	Correspondence	Existing Non-MAGI - Restricted Scope – Approval NOA	 NOA_M129A_6559_FDD.docx
3	Correspondence	Existing Non-MAGI - Full Scope to Restricted Scope NOA	 NOA_M159C_6573_FDD.docx
4	Correspondence	Existing Non-MAGI - Restricted Scope to Full Scope NOA	 NOA_M160C_6325_FDD.docx
5	Correspondence	New Non-MAGI - Restricted Scope - Retro NOA	 NOA_M134A_6564_SPD.Doc - Retro Res
6	Correspondence	New Non-MAGI - Restricted Scope – Approval NOA	 NOA_M129A_6559_FDD - Restricted Sco
7	Correspondence	New Non-MAGI - Full Scope to Restricted Scope NOA	 NOA_M159C_6573_FDD Full to Restrctite
8	Correspondence	New Non-MAGI - Restricted Scope to Full Scope NOA	 NOA_M160C_6325_FDD - Restricted to I
9	Correspondence	Spanish Translations	Spanish Translations are under review and will be attached once approved.

## 4 REQUIREMENTS

### 4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met

## 5 APPENDIX

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### 5.1 'The System' Definition

'The System' refers to both LRS and C-IV systems.

For instance, if the document mentions the below:

- Update The System to...

That implies:

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

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