

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-200824 | CIV-100451

2020 Social Security Title II and Title XVI Cost of
Living Adjustments (SSA COLA)

CalSAWS	DOCUMENT APPROVAL HISTORY	
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DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/25/2019	1.0	Initial Draft	Tisha Mutreja
11/11/2019	1.0	Including all values from the draft ACWDL and ACIN published by DHCS	Tisha Mutreja
11/13/2019	1.0	Including data changes, journal and list for OPA SSI Income Records	Tisha Mutreja
11/22/2019	1.0	Updated OPA of SSI income records to update standards for CF program only	Tisha Mutreja
12/03/2019	1.1	Updated ACIN number	Tisha Mutreja
12/04/2019	1.2	Added 2.2.2.3.d to update SSI/SSP Payment total with the new total from updated SSI Payment with existing SSP Payment amounts.	Renee Gustafson
12/05/2019	1.3	Updated ACWDL number	Tisha Mutreja
12/05/2019	1.4	Update document to remove List: CalFresh Cases with OPA SSI amount not updated from the Outreach section	Tisha Mutreja
12/06/2019	1.5	Updated Document with: <ul style="list-style-type: none"> - Added Request #7 for CalSAWS to not make data change on OPA of SSI Amount - Updated recommendation 2.2 to be applied for C-IV only - Updated recommendation 2.8.2.2 to be applied for C-IV only - Updated 5.Outreach to reflect new posted list Date for C-IV - List #2 updated to remove references for 2.2 	Tisha Mutreja

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1 OVERVIEW

Per ACIN No. I-67-19, the Social Security Administration (SSA) increased to 1.6% percent for 2020.

Per ACWDL No. 19-24, the monthly Medicare Part B Supplemental Medical Insurance Base premium increased to \$144.60. The information for the Effective SSI/SSP Cash Grant Levels for Determining Pickle Eligibility from January 1, through December 31, 2020, and the 2020 Pickle Disregard Computation Chart were provided.

1.1 Current Design

The Systems store the income information of the customers and use the income information to evaluate the eligibility for any program.

Customer's Social Security Administration (SSA) income is updated every year based on the new SSA income increase rate effective the month of January of that year. As Federal Poverty Level (FPL)-related budgets also use this updated SSA income information and the new FPL increase rate is not effective until the month of April for FPL budgets, The Systems use a 'Backout Multiplier' to account for the difference. The Backout Multiplier holds the current year's SSA income increase rate value. When handling FPL budgets, The Systems take the current SSA income amount and divides it with the Backout Multiplier (CT335_A2_SSA_INCOME_INCREASE_MULTIPLIER) which results in the SSA income amount being equal to the previous SSA income amount. It undoes the updated SSA rates for FPL-related budgets for benefit months January, February, and March.

DHCS provides the 'Pickle Disregard Computation Chart'. The Systems use this chart to determine the disregard amount for Pickle applicants and eligible persons.

EDBC compares the customer's income to the SSI/SSP payment standard amounts to evaluate the eligibility for certain budgets like '250% Working Disabled'.

Most beneficial logic is applied when CalFresh (CF), CalWORKs (CW), Immediate Need (IN), or Refugee Cash Assistance (RCA) EDBC is run for a mid-period month. As part of the most beneficial logic, if the countable amount of an existing income has increased, the system will instead use the previously counted, lower income value.

If a customer is paying the Medicare Part B premium, EDBC uses this amount as a deduction for certain budgets.

1.2 Requests

1. With the 2020 SSA Cost of Living Adjustment (COLA), SSA has approved a 1.6 percent increase for SSA benefits. This causes an increase in the income for a customer who is currently receiving the SSA benefits. Income information stored in The Systems for these customers will be updated to address the increase.
2. The 2020 SSA COLA published SSA income increase rate is 1.6%. The current value of the 'Backout Multiplier' does not match with the updated rate increase and needs to be updated.
3. With the 2020 SSA COLA information, DHCS provided the updated The 2019 Pickle Disregard Computation Chart effective 1/1/2020. The Systems Pickle values will be updated to match the new chart.
4. With the 2020 SSA COLA, SSI/SSP payment standards are updated. The Systems will be updated to match the new SSI/SSP payment standards.
5. With the 2020 SSA COLA, income would increase for the customer who is currently receiving SSA. As this income increase is predicted, most beneficial logic will not be triggered.
6. The 2020 Medicare Part B Premium changed from \$135.50 to \$144.60. Medicare Part B Premium amounts stored in The Systems for these customers will be updated to address the increase.
7. Per CDSS directive, CalSAWS will not apply data change to add the new OPA detail SSI amount effective 1/1/2020 for a person receiving SSI income for Cal Fresh (CF) program.

CIV-105832 will reverse the applied data changes on person receiving SSI income for CF program for C-IV cases.

1.3 Overview of Recommendations

1. Apply a data change to add the new SSA income and SSI income amount effective 1/1/2020 for a person receiving SSA and SSI income in continuing EDBC-based programs.
2. The 2020 SSA COLA published SSA income increase rate is 1.6%. Update the value of the 'Backout Multiplier' to match the rate increase.
3. Update The Systems Pickle values to match the 'Pickle Disregard Computation Chart' effective 1/1/2020.
4. Update The Systems to match the new SSI/SSP payment standards.

5. Income would increase for the customer who is currently receiving SSA. As this income increase is predicted, most beneficial logic will not be triggered.
6. Update Medicare Part B Premium amounts stored in The Systems for these customers to \$144.60 to address the increase.
7. Create a Journal entry to document the data changes for SSA Income and Medicare Part B Premium amounts.

1.4 Assumptions

1. The Systems do not maintain the Pickle In-kind and Support Maintenance (ISM) values.
2. The resource limit for both Medi-Cal and Pickle eligibility will remain the same (\$2,000 for one person and \$3,000 for two persons).
3. Medicare Part A premium amount is not relevant to SSA COLA. Existing Medicare Part A records in the database are entered by the user and will not be updated by this data change.
4. Other than what is referenced in this document, all EDBC-based program eligibility determination logic remains unchanged.
5. For Mixed Households (MAGI/Non-MAGI), when EDBC runs on Medi-Cal, it will run against the latest MAGI eligibility.
6. There are no changes to Forms or NOAs as a result of this SCR. If the SSA COLA adjustment results in a decrease or loss of benefits, the system will leverage existing negative change NOA logic to notify participants.

2 RECOMMENDATIONS

2.1 Data Change to Apply the New SSA Income Amount

2.1.1 Overview

The new SSA income amount has increased by 1.6% effective 1/1/2020. Apply a data change to add the new SSA income amount effective 1/1/2020 for a person receiving SSA income in continuing EDBC-based programs.

2.1.2 Description of Changes

1. Identify SSA income records with all of the following:
 - a. The income category is Social Security
 - b. The income amount detail has a begin date on or after 1/1/2019 but before 1/1/2020
 - c. The income amount is not \$0
 - d. The income amount detail has no end date (high-dated)

- e. The income record has either \$0 or no value in both the "Income Adjustment" and "Unreported Amount" field

And either of the following:

- a. The participant with the eligible income record is Active on an EDBC-based program* on or after 01/01/2020

Or

- b. The participant Is Denied or Discontinued on an eligible EDBC-based program* within the rescission period

Program	Rescission Period
Medi-Cal	90
CalFresh	30
Homeless – Temp	30
Immediate Need	30
Homeless – Perm	30
Diversion	30
CalWORKs	30
CAPI	30
General Assistance/General Relief	30

Note: The rescission period is the amount of time the user normally rescinds a denied or discontinued case instead of a reapplication.

* For reference, these are the EDBC-based programs: Adoption Assistance Program (AAP), Cash Assistance Program for Immigrants (CAPI), CF, Nutrition Benefit (NB), CW, Diversion, Foster Care (FC), Homeless - Perm, Homeless - Temp, IN, Kin-GAP (KG), Medi-Cal (MC), RCA, General Assistance/General Relief (GA/GR), Approved Relative Caregiver (ARC), Transitional CalFresh (TCF)

2. End date the identified high-dated SSA income record effective 12/31/2019.
3. Create a new SSA income record for the person identified in #1 with a copy of the 2019 record and update the following values:
 - a. Begin date: 1/1/2020
 - b. Amount: increase the identified 2019 amount by 1.6% (multiplying by 1.016) and round down to the nearest whole dollar.
 - c. Change Reason: COLA
 - d. Reported Date: Implementation Date of the SCR

Note: The verification status will be the same as the verification status of the identified 2019 record.

2.1.3 Programs Impacted

EDBC-based programs: AAP, CAPI, CF, NB, CW, Diversion, FC, Homeless - Perm, Homeless - Temp, IN, KG, MC, RCA, GA/GR, ARC, TCF

2.1.4 Estimated Number of Records Impacted/Performance

~350,000 income records impacted in CalSAWS and ~430,000 income records impacted in C-IV.

2.2 **C-IV only:** Data Change to Apply the New OPA Detail SSI Amount

2.2.1 Overview

The new SSI amounts have increased by Standard amounts effective 1/1/2020. Apply a data change to add the new OPA detail SSI amount effective 1/1/2020 for a person receiving SSI income for Cal Fresh (CF) program. The SSI/SSP Payment Amount for the 'SSI/SSP' OPA records are updated when the page is saved.

2.2.2 Description of Changes

1. Identify the Other Program Assistance (OPA) detail SSI record with all of the following:
 - a. The 'Type of Assistance' category is "SSI Only" or 'SSI/SSP'
 - b. The OPA record has a begin date on or after 1/1/2019 but before 1/1/2020
 - c. The 'SSI Payment' and/or 'Amount or Value of Services' is \$771 or \$578.50
 - d. The amount detail has no end date (high-dated)

And either of the following:

 - a. The participant with the eligible OPA record is Active on a CF program on or after 01/01/2020
 - Or**
 - b. The participant Is Denied or Discontinued on a CF program within the rescission period of 30 days.
2. End date the identified high-dated OPA record effective 12/31/2019.
3. Create a new OPA detail record for the person identified in #1 with a copy of the 2019 record and update the following values:
 - a. Begin date: 1/1/2020
 - b. 'SSI Payment' and/or 'Amount or Value of Services': Update
 - i. \$771 to \$783

- ii. \$578.50 to \$587.50
- c. Do not update SSP Payment amounts for 'Type of Assistance': "SSI/SSP"
- d. 'SSI/SSP Payment Total': For 'Type of Assistance': "SSI/SSP", update the 'SSI/SSP Payment Total' to be a total of the updated 'SSI Payment' amount from 3.b above plus the existing 'SSP Payment'

Note: The verification status will be the same as the verification status of the identified 2019 record.

2.2.3 Programs Impacted

CF person for EDBC-based programs: AAP, CAPI, CF, NB, CW, Diversion, FC, Homeless - Perm, Homeless - Temp, IN, KG, MC, RCA, GA/GR, ARC, TCF.

2.2.4 Estimated Number of Records Impacted/Performance

~48,000 number of OPA records impacted in C-IV with SSI amount of \$771 and \$578.50.

2.3 Backout Multiplier

2.3.1 Overview

The SSA COLA will not be applied to certain Medi-Cal programs until the 2020 Federal poverty levels (FPLs) are updated, typically in April. The Federal Poverty Level (FPL) related budgets use the updated SSA income information and the new FPL increase rate is not effective until the month of April for FPL budgets. The System uses a 'Backout Multiplier' to account for the difference.

The following categories will trigger the backout logic:

- a) FPL Percent Programs
- b) Aged and Disabled
- c) Medicare Premium Payment Programs

2.3.2 Description of Changes

1. Update the 'Backout Multiplier'(CT335_A2)
 - a. Set the 'Backout Multiplier'(CT335_A2) value to 1.016 for year 2020.
 - b. Set the 'Backout Multiplier'(CT335_A2) value to 1.00 for year 2021 and after. EDBC will use this value effective 01/01/2021 until the next SSA COLA changes are applied.
2. Update the "SSA COLA Adjustment End Month Number"(CT335_A5) and the "SSA MPPP COLA Adjustment End Month Number"(CT335_A6) in the code tables as below
 - a. End date the current records of CT335_A5 and CT335_A6 to '12/31/2019'.
 - b. Add new high-dated records for CT335_A5 and CT335_A6 with begin date of '01/01/2020' and value of '12' (December). This will allow the 'Backout Multiplier' from Recommendation 2.1 to be applied until the 2020 FPL limits are updated in the system.

Note: According to ACWDL 19-24, the SSA COLA will not be applied to certain Medi-Cal programs until the Federal Poverty Levels are updated, typically in April. The values, CT335_A5 and CT335_A6 will be updated to '3' (March) once the 2020 FPL limits are updated in the system. Changing this value back to 3 will allow the full SSA Income amount to be applied beginning in the 04/2020 Benefit month, without the 'Backout Multiplier'.

2.3.3 Programs Impacted

Medi-Cal

2.3.4 Performance Impacts

N/A

2.4 Pickle Disregard Computation

2.4.1 Overview

Pickle disregard for 2020 will be applied to the system.

2.4.2 Description of Change

1. Update the Pickle Disregard Computation Chart (CT1790_01) with the 2019 Pickle Multiplier values available in ACWDL 19-24 Enclosure #4 "The 2019 Pickle Disregard Computation Chart" effective 1/1/2020.

Note: The chart is titled with the year 2019 because the COLA disregard relates to individuals who were terminated from SSI/SSP in 2019.

2.4.3 Programs Impacted

Medi-Cal

2.4.4 Performance Impacts

N/A

2.5 SSI, SSP, and Total Payment Standard Amounts

2.5.1 Overview

The SSI, SSP and total payment standard amounts will be applied to the system.

2.5.2 Description of Change

1. Update the SSI, SSP and total payment standard amounts for Individual and Couple effective 1/1/2020 (CT963). Refer to the 'Independent Living Arrangement' table of the ACWDL 19-24 Enclosure #1 "2020 SSI-SSP Payment Standards" for values.

2.5.3 Programs Impacted

Medi-Cal

2.5.4 Performance Impacts

N/A

2.6 SSA Income COLA Mid-Period/Change Reason Logic

2.6.1 Overview

The SSA Income COLA will apply existing SSA income for mid-period/change reason logic.

2.6.2 Description of Change

1. **C-IV only:** Update the EDBC logic to allow the SSA Income COLA to apply existing SSA income in mid-period months by suppressing most-beneficial logic for those income types for January 2020(CT335_SA).
2. **CalSAWS only:** Update the EDBC logic to allow the SSA Income COLA to apply existing SSA income by suppressing the Change Reason logic for January 2020 (CT335_S1 and CT335_S2).

2.6.3 Programs Impacted

Programs subject to mid-period/change reason logic.

Note: EDBC-based programs: CAPI, CF, NB, CW, Diversion, Homeless - Perm, Homeless - Temp, IN, MC, RCA, GA/GR, TCF

2.6.4 Performance Impacts

N/A

2.7 Data Change to Apply the Medicare Part B Premium Amount

2.7.1 Overview

The Medicare Part B Premium amount increased to \$144.60 effective 1/1/2020.

2.7.2 Description of Change

1. Identify the Medicare Part B Premium records with all of the following:
 - a. The Medicare Part B Premium amount is \$135.50
 - b. The Begin date of the Medicare Part B Premium record is prior to 01/01/2020
 - c. The Medicare Part B Premium record does not have an end date (high dated)

And either of the following:

- a. The participant with Medicare Premium Part B record is Active on an EDBC-based program* on or after 01/01/2020

Technical Note: A person on the case should be included in the population of the data change.

Or

- b. A participant is Denied or Discontinued on an eligible EDBC-based program* that is Denied or Discontinued within the rescission period

Program	Rescission Period
Medi-Cal	90
CalFresh	30
Homeless – Temp	30
Immediate Need	30
Homeless – Perm	30
Diversion	30
CalWORKs	30
CAPI	30
General Assistance/General Relief	30

Note: The rescission period is the amount of time the user normally rescinds a denied or discontinued case instead of a reapplication.

* For reference, these are the EDBC-based programs: AAP, CAPI, CF, CW, Diversion, FC, Homeless - Perm, Homeless - Temp, IN, KG, MC, RCA, GA/GR, ARC, TCF,NB

Note: If there is more than one high dated Medicare Part B Premium record for the same person, do not apply the data change.

2. Apply the data change to the identified records with the following actions:
 - a. Duplicate the existing record
 - b. End date the existing record 12/31/2019
 - c. Set the begin date of the new record to 01/01/2020
 - d. Set the Medicare Part B amount on the new record to 144.60
 - e. Set the verification status of the new record the same as the verification status of previously existing record.
 - f. Change Reason: COLA
 - g. Reported Date: Implementation Date of the SCR

2.7.3 Programs Impacted

EDBC-based programs: AAP, CAPI, CF, NB, CW, Diversion, FC, Homeless - Perm, Homeless - Temp, IN, KG, MC, RCA, GA/GR, ARC, TCF.

2.7.4 Estimated Number of Records Impacted /Performance

~200,000 records impacted in CalSAWS and ~300,000 records impacted in C-IV.

2.8 Automatic Journal Entry

2.8.1 Overview

The Systems will create an automatic journal entry for cases updated by the SSA COLA data changes.

2.8.2 Description of Change

1. Create a Journal Entry for cases where an associated non-hidden person had the data change applied to their SSA income record due to Recommendation 2.1.

The Journal Entry will be displayed as follows on Journal Detail page:

Journal Category: All

Journal Type: Basic Information

Short Description: SSA COLA Income Record Update

Long Description: The system updated at least one SSA income record for this case in accordance with the 2020 SSA COLA.

Note: There will be one journal entry per case.

2. **C-IV only**: Create a Journal Entry for cases where an associated non-hidden person had the data change applied to their OPA record due to Recommendation 2.2.

The Journal Entry will be displayed as follows on Journal Detail page:

Journal Category: All

Journal Type: Basic Information

Short Description: SSA COLA OPA Record Update

Long Description: The system updated at least one OPA "SSI Only" or 'SSI/SSP' record for this case in accordance with the 2020 SSA COLA.

Note: There will be one journal entry per case.

3. Create a Journal Entry for cases where an associated non-hidden person had the data change applied to their Medicare record due to Recommendation 2.7.

The Journal Entry will be displayed as follows on Journal Detail page:

Journal Category: All

Journal Type: Basic Information

Short Description: SSA COLA Medicare Premium Record Update

Long Description: The system updated at least one Medicare Premium record for this case in accordance with the 2020 SSA COLA.

Note: There will be one journal entry per case.

2.8.3 Programs Impacted

EDBC-based programs: AAP, CAPI, CF, NB, CW, Diversion, FC, Homeless - Perm, Homeless - Temp, IN, KG, MC, RCA, GA/GR, ARC, TCF.

2.8.4 Performance Impacts








N/A

2.9 Lists

2.9.1 Description of Change

Lists will be generated after the data change is run in recommendation 2.1 and 2.7. Refer to section 5 'Outreach' for further details.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Eligibility	ACWDL 19-24	 ACWDL 19-24.pdf
2	Eligibility	ACIN No. I-67-19 Social Security Administration Cost of Living Adjustment – Effective January 01, 2020	 ACIN I-67_19.pdf
3	Enclosures	Enclosure 1 2020 SSI-SSP Payment Standards	 Enclosure 1 2020 SSI-SSP Payment Sta
4	Enclosures	Enclosure 2 The 2020 In-Kind Support and Maintenance Values for Computing	 Enclosure 2 The 2020 In-Kind Suppo
5	Enclosures	Enclosure 3 The 2020 Resource Limit for both Medi-Cal and Pickle Cases	 Enclosure 3 The 2020 Resource Limit
6	Enclosures	Enclosure 4 The 2019 Pickle Disregard Computation Chart	 Enclosure 4 The 2019 Pickle Disregar
7	Eligibility	Draft 2020 Medicare Premium Part B	 Draft 2020 Medicare Premium P

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).	A data change will be implemented to update the income record and Medicare Part B record of a targeted population.
2.16.4.4	The LRS shall include the ability to process a mass update that involves the development of new policy in response to changes in federal, State, and local laws, rules, regulations, ordinances, guidelines, directives, policies, and procedures.	A data change will be implemented to update the income record and Medicare Part B record of a targeted population.

5 OUTREACH

5.1 Lists

Lists will be generated after the data change is run in recommendation 2.1 and 2.7.

All lists will display the standard list columns.

Standard Columns:

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

1. **List Name:** Cases with SSA Income not updated

List Criteria: Cases that have at least one EDBC-based program where at least one of the identified EDBC-based programs has a non-hidden person who has an SSA income record end-dated on or after 01/01/2020 that was not changed by the 2020 SSA COLA data change. The non-hidden person with the SSA income record is Active on an EDBC-based program on or after

01/01/2020 – Or - the non-hidden person Is Denied or Discontinued on an eligible EDBC-based program within the rescission period.

Include additional columns to indicate which, if any, of the following are true:

- a. The identified SSA income record has an income amount which begins on or after 01/01/2020.
- b. The identified SSA income record has an amount entry with a begin date on or after 01/01/2019 and an amount of \$0.
- c. The identified SSA income record has a non-zero value entered in either "Income Adjustment" or "Unreported Amount" fields.
- d. The identified SSA income record has a begin date prior to 01/01/2019.
- e. The identified SSA income record has an end date on or after 01/01/2020.

Additional Columns:

- Begins 01/01/2020
- Begins before 01/01/2019
- SSA End Dated
- Reported Amount is \$0
- Adjusted Amount > \$0
- Unreported Amount > \$0
- Program Type

County Action: Counties can use this list to verify that SSA income amounts are correct and take action if needed.

2. **C-IV only: List Name:** Non-Automated EDBC Program Types with updates

List Criteria: Cases where both the following conditions are true:

- a. The data change has been applied by Recommendation 2.1.
- b. Case contains at least one program, that is not run by batch: AAP, CAPI, Homeless – Perm, Homeless – Temp, General Assistance, Approved Relative Caregiver(ARC).

Additional column:

- Program Type
- Reported Amount
- Inheritance
- Person Name

County Action: Counties can review cases and run EDBC to apply updated SSA,SSI Income amounts.

3. **List Name:** Cases with Medicare not updated

List Criteria: Cases that have at least one EDBC-based program, where at least one of the identified programs has a non-hidden person, who has a Medicare Part B record that was not changed by the 2020 SSA COLA data change. The non-hidden person with the Medicare Part B record is Active on an EDBC-based program on or after 01/01/2020 – Or - the non-hidden person Is Denied or Discontinued on an eligible EDBC-based program within the rescission period. The Medicare Part B record meets one of the following conditions:

- a. The amount was not \$135.50

- b. The begin date was 01/01/2020
- c. The end date was on or after 01/01/2020, or
- d. The person had more than one high-dated Medicare Part B premium record.

Additional Columns:

- Part B Medicare Amount
- Not \$135.50
- Begins 01/01/2020
- Medicare End Dated
- Duplicate Medicare
- CIN#
- Program Type

County Action: Counties can use this list to verify that Medicare Premium Amounts are correct and take action if needed.

4. **List Name:** Cases with Person not receiving RSDI COLA

List Criteria: Cases with an active Medi-Cal program in January 2020 or later where there is an SSA income record and where the question "Has this person received a RSDI COLA increase in any month since SSI/SSP was discontinued?" is "No".

Additional Columns:

- Discontinued SSI Ind
- Received RSDI Ind
- CIN#
- Person Hidden Ind

County Action: Counties can review this list to ensure that the answer to the question "Has this person received a RSDI COLA increase in any month since SSI/SSP was discontinued ?" is correct and make any updates is needed.

The list will be posted to the following locations:

System	Path : Date
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2019>CA-200824 : On December 13 th , 2019
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2019>CIV-100451 : TBD

6 APPENDIX

1. **The Systems:** "The Systems" refers to both CalSAWS and C-IV Systems. For instance, if the document mentions the below:

- The Systems must add

That implies:

- Both CalSAWS and C-IV must add

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-202778 | CIV-7564

Revised Medi-Cal Hierarchy

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Tisha Mutreja, Mathew Lower, William Baretsky
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DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
9/25/2019	1.0	Initial Draft	Tisha Mutreja
10/08/2019	1.0	Added Flow Chart to Explain Revised Medi-Cal Hierarchy to recommendation 2.1.2.3	Tisha Mutreja
10/18/2019	1.0	Added No Potential MAGI Criteria to recommendation 2.1.2.1	Tisha Mutreja
10/25/2019	1.0	Added Online Recommendation to 2.2	Mathew Lower
11/1/2019	1.0	Added More than 1 Person Case Scenario to Recommendation 2.1.2.3	Tisha Mutreja
11/18/2019	1.0	Update logic for More than 1 Person Case Scenario to Recommendation 2.1.2.3 after Committee Feedback	Tisha Mutreja
11/27/2019	1.0	Automated Regression Section added	William Baretsky
12/04/2019	1.0	Updated document to Define 'No Potential MAGI' as 'Potential MAGI' Also, Updated Recommendation 2.2.2.2 to add 'Aged' in the criteria	Tisha Mutreja
12/18/2019	1.0	Committee Approved Draft	Tisha Mutreja

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1 OVERVIEW

This SCR is based on All County Welfare Director's Letter (ACWDL) 17-03 to transmit the Medi-Cal hierarchy to be used when determining or redetermining Medi-Cal eligibility. The policy contains instructions on the order in which Medi-Cal eligibility must now be determined.

Mega Mandatory groups must be considered first in the Medi-Cal hierarchy. The Mega Mandatory groups include SSI/SSP, Adoption Assistance, Foster Care (FC), Former Foster Youth, Pickle, Disabled Adult Child (DAC), Disabled Widower (DW) and Medicare Savings Programs (MSP). If the applicant or beneficiary has eligibility in one of the Mega Mandatory groups and a MAGI Medi-Cal eligibility result is returned for that applicant/beneficiary, counties must not automatically accept the MAGI Medi-Cal result for that applicant/beneficiary as the basis for eligibility. That applicant or beneficiary will remain in the household for income and household size determination purposes, but may only be changed to a MAGI Medi-Cal eligibility group if the applicant or beneficiary elects MAGI Medi-Cal.

With this SCR, **The Systems** will be updated to evaluate Mega Mandatory groups first in the Full Medi-Cal Hierarchy, then MAGI Medi-Cal and lastly the rest of Non-MAGI Medi-Cal programs. The order of the Non-MAGI Medi-Cal programs will be updated to evaluate the Optional Categorical programs [Aged & Disabled Federal Poverty Level (A&D FPL), Blind FPL, Working Disabled 250%] before Medically Needy/Medically Indigent (MN/MI) programs [Aged, Blind and Disabled MN (ABD MN), Aid to Families with Dependent Children MN (AFDC MN), MI Child, MI Pregnant].

Since the Full Medi-Cal Hierarchy is being re-vamped, The Systems will be updated to incorporate a check for "Potential MAGI" criteria within the Medi-Cal Hierarchy per ACWDL 18-16 and will no longer require the Worker to set the Requested Medi-Cal type to "No Potential MAGI" to bypass the requirement for a MAGI Determination when the individual meets the criteria.

1.1 Current Design

The Systems' Medi-Cal Hierarchy for the Requested Medi-Cal Type "Medi-Cal" tests eligibility in the following order:

- a. MAGI Medi-Cal Eligibility
- b. Non-MAGI Medi-Cal Eligibility
 - i. Mega Mandatory
 1. Pickle
 2. DAC
 3. DW
 - ii. Medically Needy/Medically Indigent (Regular MC Test Category)
 1. ABD MN Blind
 2. ABD MN Aged
 3. ABD MN Disabled
 4. AFDC/MN
 5. MI Child
 6. MI Pregnant
 - iii. Optional Categorical (Percent Test Category)
 1. A&D FPL
 2. Blind FPL
 3. Working Disabled 250%
 - iv. State Only
 1. Dialysis
 2. Tuberculosis
 3. Parental Hyperalimentation (TPN)
 4. 60-day postpartum
 - v. Medicare Savings Programs (MSP)
 1. Qualified Medicare Beneficiary (QMB)
 2. Specified Low Income Medicare Beneficiary (SLMB)
 3. Qualifying Individual QI1)
 4. Qualified Working Disabled Individual (QWDI)

Note: All other Mega Mandatory groups (as mentioned in ACWDL 17-03) are not included in The Systems' Medi-Cal Hierarchy rules since these programs have their own respective Requested Medi-Cal Type such as –

- Former Foster Youth(4M)
- AAP EFC(07), AAP Federal(03), AAP State(04)
- FC Unpaid(45), ICAMA(06), ICPC(46), KG Federal(4T)
- Child Welfare Services Medi-Cal

Or

are tracked only in Other Program Assistance (e.g. SSI/SSP).

Also, The Systems can grant MSP in two ways: by the worker selecting the "Medical Premium Payment Program" Requested Medi-Cal Type or by the Medi-Cal Hierarchy for the "Medi-Cal" Requested Medi-Cal Type; only Requested Medi-Cal Type "Medi-Cal" runs through the Medi-Cal Hierarchy.

The Systems have the "No Potential MAGI" Requested Medi-Cal Type which allows a Worker to run through the Non-MAGI Medi-Cal Eligibility Rules only without requiring a MAGI Determination (per ACWDL 18-16). A household is considered "No Potential MAGI" eligible when there is no MAGI Medi-Cal eligibility due to:

- a. being aged or blind/disabled **and** receiving Medicare
- and**
- b. there is no dependent child or pregnant person(s) in the household

The Systems have several page validations on Run EDBC, Negative Action and Request MAGI pages to ensure that a Worker uses "No Potential MAGI" Requested Medi-Cal Type only when appropriate.

The Systems have available Requested Medi-Cal Types that are outdated and no longer used.

- a. 1931 for Adult Minor Parent
- b. Medi-Cal – Property Disregard
- c. Medi-Cal – No Property Information
- d. Express Lane Adults 19-64
- e. Express Lane Parents 19-64
- f. Express Lane Under 19

1.2 Requests

Per ACWDL 17-03, the Mega Mandatory group must be evaluated before MAGI Medi-Cal in the Medi-Cal Hierarchy and the Optional Categorical programs (A&D FPL, Blind FPL and Working Disabled 250%) must be evaluated before Medically Needy/Medically Indigent programs (ABD MN, AFDC MN, MI Child, MI Pregnant). The Mega Mandatory group must be evaluated before MAGI Medi-Cal; therefore, a MAGI Determination is not required to test for Mega Mandatory.

Incorporate the check for Potential MAGI in the Full Medi-Cal Hierarchy EDBC Rules instead of requiring the Worker to set the Requested Medi-Cal type "No Potential MAGI."

Create an automatic Journal Entry when EDBC determines MAGI Determination is not required.

1.3 Overview of Recommendations

1. Remove the MAGI hard validations from Run EDBC and Manual EDBC page that requires a MAGI Determination prior to running Medi-Cal EDBC for Requested Medi-Cal Type "Medi-Cal" when at least one of the person on the Medi-Cal program block has Full Medi-Cal Hierarchy = 'Yes'.
2. Update the Medi-Cal EDBC Rules to evaluate Mega Mandatory first in the Medi-Cal hierarchy with below priority:
 - a. Disabled Adult Child (DAC)
 - b. Pickle
 - c. Disabled Widow/Widower
 - d. Medicare Savings Programs (MSP)
3. Update the Medi-Cal EDBC Rules to incorporate the check for Potential MAGI to determine if a MAGI Determination is required to continue with the Medi-Cal EDBC.
4. Update Medi-Cal EDBC Rules to evaluate Optional Categorical programs before Medically Needy/Medically Indigent programs.
5. Remove the following Requested Medi-Cal Types:
 - a. No Potential MAGI
 - b. 1931 for Adult Minor Parent
 - c. Medi-Cal – Property Disregard
 - d. Medi-Cal – No Property Information
 - e. Express Lane Adults 19-64
 - f. Express Lane Parents 19-64
 - g. Express Lane Under 19
6. Update Batch EDBC Skip Reasons for Requested Medi-Cal Type "Medi-Cal" when at least one of the person on the Medi-Cal program block has Full Medi-Cal Hierarchy = 'Yes'.
7. Create a Journal Entry for cases where EDBC determines MAGI Determination is not required for the household.

1.4 Assumptions

1. Medi-Cal programs not explicitly mentioned in the Description of Changes will retain their existing logic in the Medi-Cal hierarchy.
2. Pending release of DHCS policy on TMC – No changes to current Consumer Protection Programs in the Medi-Cal hierarchy.
3. No changes to existing Deemed Protection functionality.
4. No changes to MEDS. Read-Only EDBCs will not be communicated to MEDS.
5. Fields not mentioned in the Description of Changes sections, will not be updated.

2 RECOMMENDATIONS

2.1 Requested Medi-Cal Type Detail Page

2.1.1 Overview

This page allows the worker to select Requested Medi-Cal Type for the Program Person to grant them specific eligibility. Outdated Requested Medi-Cal Types will be removed from the drop-down display and cannot be used any longer while creating new records.

2.1.2 Requested Medi-Cal Type Detail Mockup

Requested Medi-Cal Type Detail

* - Indicates required fields

Requested Medi-Cal Type Information

Requested Medi-Cal Type: * **Begin Month: *** **End Month:**

- Select -

Save and Return Cancel

Save and Return Cancel

Figure 2.1.1 – Requested Medi-Cal Type Detail page

2.1.3 Description of Changes

1. Remove the following options from the Requested Medi-Cal Type drop down when adding new records:
 - a. No Potential MAGI
 - b. 1931 for Adult Minor Parent
 - c. Medi-Cal – Property Disregard
 - d. Medi-Cal – No Property Information
 - e. Express Lane Adults 19-64
 - f. Express Lane Parents 19-64
 - g. Express Lane Under 19

If a historical record exists with one of the removed Requested Medi-Cal Types, the Worker will be able to edit the existing record although the record cannot be updated to use a removed Requested Medi-Cal Type.

2. Generate a list for records with the above mentioned Requested MC Types in #1 for counties to take appropriate actions. Refer to section 5 'Outreach' for further details.

2.1.4 Page Location

- **Global: Case Summary**
- **Local: Medi-Cal Detail**
- **Task: Medi-Cal Person Detail > Requested Medi-Cal Type Detail**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Page Usage/Data Volume Impacts

N/A

2.2 Eligibility Rules Update

2.2.1 Overview

Remove the hard validation on the Run EDBC and Create Manual EDBC pages that prevents a Worker from running Medi-Cal EDBC without a valid MAGI Determination. Update the Medi-Cal EDBC Rules to evaluate for Mega Mandatory eligibility first in the Medi-Cal Hierarchy, to include the "Potential MAGI" criteria for the "Medi-Cal" Requested Medi-Cal Type and to evaluate Optional Categorical before Medically Needy/Medically Indigent in the Medi-Cal Hierarchy.

2.2.2 Description of Changes

1. Update the page validations on the Run EDBC and Create Manual EDBC pages to not prevent a Worker from running Medi-Cal EDBC without a valid MAGI Determination when at least one person on the Medi-Cal program is requesting to be run through the Full Medi-Cal Hierarchy.

Remove the below mentioned validations when all of the following criteria are true:

- i. there is at least one active or pending individual on the Medi-Cal program with Customer Option: Full Medi-Cal Hierarchy = 'Yes'
 - ii. Requested Medi-Cal Type = 'Medi-Cal'
- a. **Validation Message:** "Medi-Cal: EDBC cannot be run for this program. A MAGI determination must be run and marked as

Reviewed for the selected or prior benefit month within the same Redetermination period."

- b. **Validation Message:** "Medi-Cal: EDBC cannot be run for this program. All open applicants in the valid MAGI Determination are MAGI Pending eligible."
 - c. **Validation Message:** "Medi-Cal: EDBC cannot be run for this program. All open applicants are required to be in the MAGI determination which is valid for this benefit month."
2. Update Medi-Cal EDBC Rules to add the following "Potential MAGI" criteria to Requested Medi-Cal Type 'Medi-Cal' instead of using 'No Potential MAGI' Requested Medi-Cal Type to determine when a MAGI Determination is required.

MAGI Determination is not required when:

The entire household is potentially Non-MAGI Medi-Cal eligible, with no MAGI Medi-Cal eligibility, due to being aged or blind/disabled **and** receiving Medicare, **and** there is no dependent child or pregnant person(s) in the household.

- A person is considered aged when all the following are true:
 - a person who is age 65 or older for at least one day of the benefit month
- A person is considered a child when all the following are true:
 - a person who is age 18 or younger for at least one day of the benefit month
- A person is considered pregnant when all the following are true:
 - a pregnancy record exists for the individual with all the following are true:
 - Reported Month is on or before the benefit month
 - Pregnancy end month is on or after benefit month

Note: *Pregnancy end month is the Termination Month and if Termination Month does not exist, it is Delivery Month*

- A person is considered disabled when one of the following are true:
 - A person with a Medical Condition with all the following true:
 - Medical Condition Category: Active Verified
 - Medical Condition Type: SP-DDSD Disabled, SSA Disabled
 - The record exists for at least one day of the benefit month
- A person is considered blind when all the following are true:
 - A person with Medical Condition record with all the following true:
 - Medical Condition Category: Active

- Verified
- One of the following Medical Condition Type: SSA Blind, SSI Blind, SP-DDSD Blind
- The record exists for at least one day of the benefit month

If any individual on the Medi-Cal program does not meet the criteria mentioned above then a MAGI Determination is required for a Full Medi-Cal Hierarchy determination. (See 2.2.2.3 Step 3)

3. Update the Medi-Cal EDBC Rules to follow the Medi-Cal Hierarchy for Requested Medi-Cal Type “Medi-Cal” explained in the Flow Chart below:

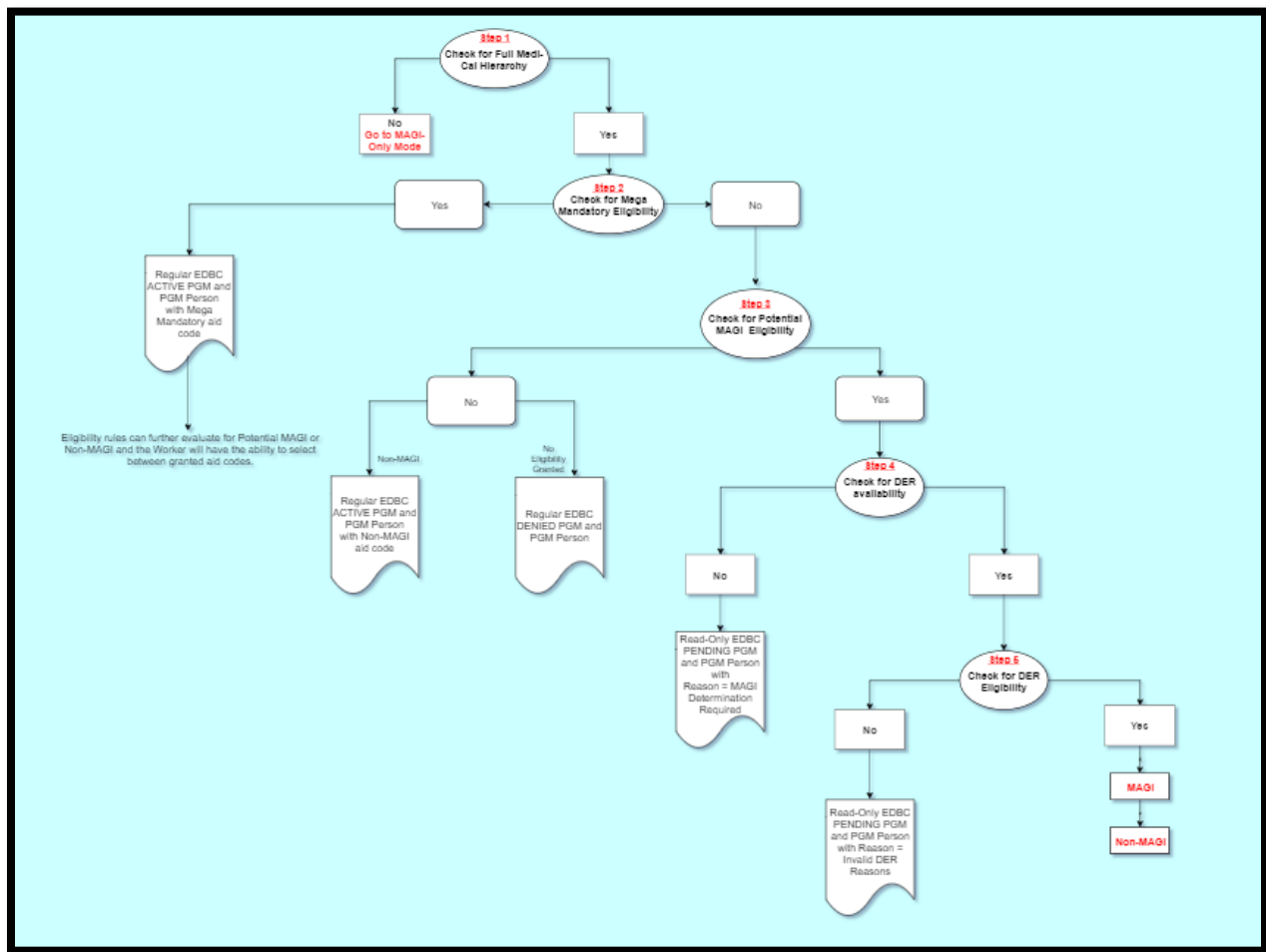


Figure 2.1.2.2 – Medi-Cal Hierarchy Flow Chart

Step 1: Check for “Full Medi-Cal Hierarchy” in the Customer Options entered by the eligibility worker.

- a. If ‘No’: EDBC rules will evaluate for MAGI-Only Mode.

- b. If 'Yes': EDBC rules will evaluate for Mega Mandatory first in the MC Hierarchy in the below order without requiring MAGI Determination.
 - i. Disabled Adult Child (DAC)
 - ii. Pickle
 - iii. Disabled Widow/Widower
 - iv. MSP (secondary aid code)If an individual is eligible to Pickle, DAC, or Disabled Widow/Widower at the same time, grant the DAC program.

Step 2: Check for "Mega Mandatory" Eligibility.

- a. If 'Yes': EDBC rules will create a "Regular" EDBC with Active Program (PGM) and PGM Person and provide appropriate Mega Mandatory program aid code.
Eligibility rules will further evaluate for Potential MAGI or Non-MAGI and Worker can Elect between granted aid codes.
- b. If 'No': EDBC rules will evaluate for "Potential MAGI" criteria.

Step 3: Check for "Potential MAGI" Eligibility.

- a. If 'No': EDBC rules will determine at this point that the individual has No Potential MAGI eligibility and will be evaluated for Non-MAGI Medi-Cal programs.
- b. If 'Yes': EDBC rules will determine at this point that the individual is potentially eligible for MAGI and will check for DER availability if any.

Step 4: Check for "DER Availability".

- a. If 'No' and at least one individual is not Mega Mandatory Eligible: EDBC rules will create a "Read-Only" EDBC with Pending PGM and PGM Person and will let the Worker know that "MAGI Determination is Required".
 - Add the following new EDBC Type Reasons (CT_502)
 - i. **EDBC Type Reason:** MAGI Determination is Required
Criteria: No Determination requested for the application
- b. If 'No' and all individuals are Mega Mandatory Eligible: EDBC rules will create a "Regular" EDBC with Active Program (PGM) and PGM Person and provide appropriate Mega Mandatory program aid code.
- c. If 'Yes': EDBC rules will further evaluate the eligibility of the available DER.

Step 5: Check for "DER Eligibility".

- a. EDBC rules will create a "Read-Only" EDBC with Pending PGM and PGM Person and will let the Worker know the "Invalid DER Reasons".
 - Add the following new EDBC Type Reasons (CT_502)
 - i. **EDBC Type Reason:** MAGI Eligible person not open on MC

- Criteria:** Not all eligible people on the Determination have an open Medi-Cal Application
- ii. **EDBC Type Reason:** MC Applicant missing on DER
Criteria: if any of the applicants is NOT on the Determination
- iii. **EDBC Type Reason:** All Applicants are MAGI Pending
Criteria: All open applicants in the valid MAGI Determination are MAGI Pending eligible
- iv. **EDBC Type Reason:** DER not reviewed
Criteria: Valid MAGI Determination status is not Reviewed or Complete
- v. **EDBC Type Reason:** Case Not Linked to CalHEERS
Criteria: Case Not Linked to CalHEERS
- b. If None of the above criteria is met, EDBC rules will evaluate for MAGI and Non-MAGI depending on the Determination Response.
- c. If all individuals are Mega Mandatory Eligible: EDBC rules will not create a "Read-Only" instead will create a "Regular" EDBC with Active Program (PGM) and PGM Person and provide appropriate Mega Mandatory program aid code.

4. Update Medi-Cal EDBC rules to evaluate Optional Categorical before Medically Needy/Medically Indigent.

2.2.3 Programs Impacted

Medi-Cal

2.2.4 Performance Impacts

No Impacts.

2.3 Automatic Journal Entry

2.3.1 Overview

The Systems will create an automatic journal entry when EDBC determines MAGI Determination is not required.

2.3.2 Description of Change

1. Create a Journal Entry for cases where EDBC determines an individual does not require a MAGI Determination due to Recommendation 2.2.2.2.

The Journal Entry will be displayed as follows on Journal Detail page:

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Journal Category: Eligibility

Journal Type: Program Status Update

Short Description: No Potential MAGI Medi-Cal Eligibility

Long Description: The system evaluated EDBC with No Potential MAGI Eligibility for the entire household

2.4 Batch EDBC

2.4.1 Overview

Update Batch EDBC Skip Reasons to not prevent running Batch EDBC without a valid MAGI Determination when at least one person on the Medi-Cal program is requesting to be run through the Full Medi-Cal Hierarchy.

2.4.2 Description of Change

1. Update the following EDBC Skip Reasons with the below mentioned conditions in addition to the existing criteria:
 - i. There is at least one active or pending individual on the Medi-Cal program with Customer Option: Full Medi-Cal Hierarchy = 'Yes'
 - ii. Requested Medi-Cal Type = 'Medi-Cal'
- a. Skip Reason (CT707_MN): MAGI Determination Not Received
- b. Skip Reason (CT707_MP): All Individual's MAGI Determinations are Pending
- c. Skip Reason (CT707_MA): Not all Applicants are in determination

2.4.3 Execution Frequency

No Change

2.4.4 Key Scheduling Dependencies

No Change

2.4.5 Counties Impacted

All Counties

2.4.6 Data Volume/Performance

N/A

2.4.7 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...)

2.5 Automated Regression Test

2.5.1 Overview

Update the existing automated regression test (ART) scripts that use any of the deprecated Medi-Cal Request Type values to yield the same results using the new EDBC logic. Create new ART scripts to verify an individual result from each branch in the EDBC logic outlined in Figure 2.1.2.2 above.



2.5.2 Description of Change

1. Update the case setup steps of all existing ART scripts that use one (or more) of the Medi-Cal Request Types being removed to:
 - a. Select the 'Medi-Cal' request type
 - b. Yield the same EDBC results: Program Status, Person Status(es), Aid Code(s), associated Reason values where applicable
2. Create new ART scripts to set up appropriate case and Medi-Cal program constructs, and run EDBC to generate each of the following results, if not already covered under the previous recommendation:
 - a. MAGI-only
 - b. Mega Mandatory Eligible
 - i. **Note:** For any single Mega Mandatory group
 - c. No Potential MAGI: Eligible (Active)
 - d. No Potential MAGI: Not Eligible (Denied)
 - e. No available DER
 - f. No valid DER (Error)
 - g. Valid DER: Denied MAGI
 - i. **Note:** Non-MAGI may be Eligible or Not Eligible
 - h. Valid DER: Elect MAGI
 - i. Valid DER: Elect Non-MAGI

Note #1: Each result may be set up and verified alone, or in tandem with other results (e.g., when setting up a Medi-Cal program with multiple applicants).

Note #2: Each script must be able to execute without a live MAGI connection (i.e., using the CHEWS / MAGI Emulator).

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Policy	ACWDL 17-03: Revised Medi-Cal Hierarchy	 ACWDL 17-03.pdf
2	Policy	ACWDL 18-16: Applications or Renewals with No Potential Modified Adjusted Gross Income Eligibility	 ACWDL 18-16.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.4.3.14	The LRS shall display results to COUNTY-specified Users after each eligibility determination, for User review and the editing of information, as necessary.	Eligibility will be determined for each group where the applicant/beneficiary has potential Medi-Cal eligibility.

5 OUTREACH

5.1 Lists

List will be generated for all the existing records with removed Requested MC Type after the Implementation of the SCR.

The list will display the standard columns.

Standard Columns:

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

List Name: Cases with Removed Requested MC Type

List Criteria: Cases that have an Active or Pending Medi-Cal program block with at least one high-dated Requested MC Type record for below types post the Implementation of the SCR :

- a. No Potential MAGI
- b. 1931 for Adult Minor Parent
- c. Medi-Cal – Property Disregard
- d. Medi-Cal – No Property Information
- e. Express Lane Adults 19-64
- f. Express Lane Parents 19-64
- g. Express Lane Under 19

Additional Columns:

- Requested MC Type

County Action: Counties to review the list to take appropriate actions for all the existing records with outdated Requested MC Type.

The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2019>CA-202778
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2019>CIV-7564

6 APPENDIX

1. **The Systems:** “The Systems” refers to both CalSAWS and C-IV Systems.

For instance, if the document mentions the below:

- The Systems must add

That implies:

- Both CalSAWS and C-IV must add



California Statewide Automated Welfare System

Design Document

CA-208184 CIV-104011 – ACL 19-34 Update KG
BDA to Accept Mid-Month Application Date

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	S Meenavalli, David Wong, Michael Barillas, Tiffany Huckaby
	Reviewed By	G Chakkingal, Design Team, Build Team

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
09/02/2019	1.0	Initial Design	S Meenavalli
09/20/2019	1.1	Updated the online/eligibility design sections based on the BA's design review comments	David Wong S Meenavalli
10/20/2019	1.2	Updated the eligibility design section based on the build design review comments on the net income calculation	S Meenavalli
11/03/2019	1.3	Updated the online/eligibility design sections based on the BA's design review comments	David Wong S Meenavalli
11/07/2019	1.4	Added Batch Requirements	Michael Barillas
11/08/2019	1.5	Added CC Requirements	Tiffany Huckaby
12/03/2019	1.6	Updated mock up screens layout based on FC Committee comments	S Meenavalli

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1 OVERVIEW

In CalSAWS System Kin-GAP (Kinship Guardianship Assistance Payment) Program is designed to always have the application date on the first day of the month to approve the program.

The proposed changes as part of this change request is to approve the KG (Kin-GAP) program and prorate the benefits having applications any date of the month. Also, Kin-GAP net income test evaluation need to be modified.

1.1 Current Design

Currently KG programs need to have application date first day of the month to get the KG program approve and to evaluate the eligibility benefits.

Kin-GAP budget calculation subtracts net non-exempt income from Foster Care Basic Rate before adding the Special Care Increment (SCI) causing the Kin-GAP EDBC to fail for over income.

1.2 Requests

As per the ACL 19-34, eligibility benefits for the Kin-GAP should be prorated and the program should be approved for any application date of the month. Kin-GAP EDBC Summary results page should be aligned with the proration details. The SCI / Special Needs amount should be added to the Foster Care Basic Rate before subtracting the Total Net Nonexempt Income for the new income test calculation.

1.3 Overview of Recommendations

1. Modify KG Rate Summary and KG Rate Detail pages to accept and display Begin Date and End Date instead of Begin Month and End Month in C-IV.
2. Modify KG Rate Summary page to accept and display split rates in the middle of the month following the effective dating framework in C-IV like LRS.
3. Modify KG EDBC logic to approve the KG Program for Applications beginning any day of the month.
4. Modify KG EDBC logic to calculate and prorate the aid payment including supplemental benefits for the partial month.
5. Modify KG EDBC Results Summary Page to move the Infant Supplemental Payment and Additional Rate (for LRS Only) from Kin-GAP Budget block to Aid Payment block to align with the new partial proration logic.
6. Modify KG Budget Net income test calculation to subtract Total Net Nonexempt Income from the sum of SCI amount and the Foster Care Basic Rate.
7. Modify KG EDBC Results Summary Page by moving the line items to align with the Net income test.
8. Modify KG EDBC Budget to split and calculate prorated days in a month based on the Rate split or SCI begin date from the Rate summary data collection details.
9. Modify the existing KG EDBC not processed reason verbiage when a person is missing Kin-GAP placement rates for any day within the benefit month.

10. Modify the C-IV Pre-EDBC skip logic to include validation for person missing a Kin-GAP placement rate for any day within the benefit month.

1.4 Assumptions

1. No changes to existing Reports.
2. No changes to Issuance and claiming logic.
3. No changes to batch pre-EDBC validation for the message change in LRS.
4. No changes to existing NOAs.

2 RECOMMENDATIONS

2.1 C-IV Kin-GAP Rate Summary

2.1.1 Overview

Kin-GAP currently does not allow mid-month applications. The C-IV Kin-GAP Rate Summary page will need the Begin Month and End Month fields updated to Begin Date and End Date.

2.1.2 Description of Changes

On the C-IV Kin-GAP Summary page, update the Begin Month and End Month column headers to display Begin Date and End Date. Update the Begin Month and End Month page mappings to display Begin Date and End Date in MM/DD/YYYY format. Following the implementation, the C-IV KG Rate Summary page will allow for sequential date splits upon adding new mid-month records following the effective dating framework.

2.1.3 Page Mockup

Kin-GAP Rate Summary

Child's Name: *

Mickey Mouse

▼ Rate List				
Type	Rate Level	Rate	Begin Date	End Date
Standard State Rate		0.00	10/12/2019	Edit
Dual Agency RC-California Early Start Intervention		0.00	03/03/2015	10/11/2019 Edit
Add				

Figure 2.1.3 – C-IV Kin-GAP Rate Summary

2.1.4 Page Location

- **Global: Eligibility**
- **Local: Customer Information**
- **Task: Kin-GAP**

2.1.5 Page Mappings

Update page mapping for the updated fields on the Kin-GAP Summary page

2.1.6 Page Usage/Data Volume Impacts

No expected impacts to page usage or data volume impacts.

2.2 C-IV Kin-GAP Rate Detail

2.2.1 Overview

Modify the Kin-GAP Rate Detail page to update Begin Month and End Month to Begin Date and End Date in C-IV.

2.2.2 Description of Changes

On the C-IV Kin-GAP Detail page, update the Begin Month and End Month column headers to display Begin Date and End Date. Update the Begin Month and End Month page mappings to display Begin Date and End Date in MM/DD/YYYY format.

2.2.3 Page Mockup

Kin-GAP Rate Detail

*- Indicates required fields

Save and Return Cancel

Child's Name: * Mickey Mouse	Begin Date: * 03/14/2019	End Date: 10/15/2019
Type: * Standard State Rate		

Figure 2.2.3 – C-IV Kin-GAP Detail

2.2.4 Page Location

- **Global: Eligibility**
- **Local: Customer Information**
- **Task: Kin-GAP**

2.2.5 Page Mappings

Update page mapping for the updated fields on the Kin-GAP Detail page

2.2.6 Page Usage/Data Volume Impacts

No expected impacts to page usage or data volume impacts.

2.3 LRS Kin-GAP EDBC Summary

2.3.1 Overview

Kin-GAP EDBC rules currently deny the KG Program if the application date is mid-month. In the Kin-GAP Budget block, Additional Rate and Special Needs are currently prorating based on the number of days but the Potential Grant is not prorating. Also, Kin-GAP budget calculation subtracts net non-exempt income from Foster Care Basic Rate before adding the Special Care Increment (SCI) causing the Kin-GAP EDBC to fail for over income.

2.3.2 Description of Changes

1. Modify the existing KG pre-EDBC filter message to the new message if at least one day in the rate summary contains a missing rate.
Existing message – **“Kin-GAP: There is no rate specified for the current benefit month. Please assign a rate for the benefit month.”**
New message – **“Kin-GAP: There is no rate specified for at least one day in the Rate Summary. Please assign a rate for the missing day(s).”**
2. Modify KG EDBC Results Summary Page to move the Infant Supplemental Payment and Additional Rate line items from Kin-GAP Budget block to Aid Payment block.
3. Modify KG EDBC Results Summary Page by moving the line items to align with the Net income test.
4. Add borders to the Total Net Nonexempt Income values in the KG EDBC Results Summary Page.
5. Modify the vertical blank space between Net Earned Income and Total Net Nonexempt Income to be less than the blank space between Total Net Nonexempt Income and Rate Type.
6. Modify KG EDBC to remove the Special Needs proration calculation, remove online hyperlink and associated **“EDBC Person Line Item Detail -**

AU Special Needs" proration details child Page at the line item to reflect the new net income test.

7. Modify KG EDBC Results Summary Page to remove the **"Total"** line item from the Kin-GAP Budget section.
8. Modify KG Budget Net income test calculation to subtract Total Net Nonexempt Income from the sum of SCI amount and the Foster Care Basic Rate.
 - a. For the purpose of Net Income test, the monthly anticipated SCI amount will be considered to evaluate the budget when the SCI begin date is mid-month or for intake month.
 - b. The Kin-GAP income test is Pass if Total Net Nonexempt Income is less than sum of Foster Care Basic Rate combined with the SCI amount otherwise income test is Fail.

Net Income Test Result	Condition
PASS	Total Net Nonexempt Income <= (Foster Care Basic Rate + SCI)
FAIL	Total Net Nonexempt Income > (Foster Care Basic Rate + SCI)

9. Modify KG EDBC Budget to split and calculate prorated days in a month based on the Rate split or SCI begin date from the Rate summary data collection details.
10. Modify "Aid Payment" line item to prorate the "Full Month Aid Payment" based on the "Dates to Prorate" under the "Aid Payment" section in the KG EDBC Results Summary Page.
11. Implementation date logic
 - a. New KG EDBC Results summary Page with the line items changed to Aid Payment block will be displayed based on the EDBC run date.
 - b. Historical KG EDBC Summary data will be untouched and will display the old format line Items.

1a) LRS Kin-GAP EDBC Summary Full month with BDA 1st of the month Before Change:

Kin-GAP Budget		Regular	
Unearned Income		\$	<u>350.00</u>
Unearned Income Disregards		-	<u>0.00</u>
Net Unearned Income		=	350.00
Earned Income		\$	<u>0.00</u>
Earned Income Disregards		-	<u>0.00</u>
Net Earned Income		=	0.00
Total Net Nonexempt Income		\$	350.00
Foster Care Basic Rate		\$	1,000.00
Rate Type		Standard State Rate	
Basic Rate Code		Level of Care	
Level of Care		Basic Level Rate	
Potential Grant		\$	650.00
Infant Supplemental Payment		+	<u>0.00</u>
Additional Rate		+	<u>900.00</u>
Special Needs		\$	<u>500.00</u>
Total		=	2,050.00

Aid Payment		Regular	
Full Month Aid Payment		\$	2,050.00
Dates to Prorate			1-30
Aid Payment		\$	2,050.00
Combined Aid Payment		\$	2,050.00

Additional Rate Proration Detail

					Close
Name	Type & Description	Begin Date	End Date	Amount	
	County Authorized Allowance	11/01/2019	11/30/2019	\$ 900.00	
Total		\$ 900.00			

1b) LRS Kin-GAP EDBC Summary Full month with BDA 1st of the month After Change:

Kin-GAP Budget		Regular	
Unearned Income		\$	350.00
Unearned Income Disregards		-	0.00
Net Unearned Income		=	350.00
Earned Income		\$	0.00
Earned Income Disregards		-	0.00
Net Earned Income		=	0.00
Total Net Nonexempt Income		\$	350.00
Rate Type		Standard State Rate	
Basic Rate Code		Level of Care	
Level of Care		Basic Level Rate	
Foster Care Basic Rate		\$	1,000.00
Special Needs		+	500.00
Total Net Nonexempt Income		-	350.00
Potential Grant		=	1,150.00
Aid Payment		Regular	
Full Month Aid Payment		\$	1,150.00
Dates to Prorate			1-30
Aid Payment		\$	1,150.00
Infant Supplemental Payment		+	0.00
Additional Rate		+	900.00
Combined Aid Payment		\$	2,050.00

Additional Rate Proration Detail

					Close
Name	Type & Description	Begin Date	End Date	Amount	
	County Authorized Allowance	11/01/2019	11/30/2019	\$ 900.00	
	Total		\$ 900.00		

2a) LRS Kin-GAP EDBC Summary Partial month with BDA mid-month Before Change:

In the Kin-GAP Budget block, Additional Rate and Special Needs are currently prorating based on the number of days but the Potential Grant is not prorating.

The "Total" and "Full Month Aid Payment" is calculated incorrectly as the Additional Rate and Special Needs are already prorated and "Aid Payment" is again prorating based on the number of days which is a double proration for Additional Rate and Special Needs giving incorrect amount.

Kin-GAP Budget	Regular	
Unearned Income	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>
Net Unearned Income	=	350.00
Earned Income	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>
Net Earned Income	=	0.00
Total Net Nonexempt Income	\$	350.00
Foster Care Basic Rate	\$	1,000.00
Rate Type	Standard State Rate	
Basic Rate Code	Level of Care	
Level of Care	Basic Level Rate	
Potential Grant	\$	650.00
Infant Supplemental Payment	+	<u>0.00</u>
Additional Rate	+	<u>600.00</u>
Special Needs	\$	<u>333.33</u>
Total	=	1,583.33

Aid Payment	Regular	
Full Month Aid Payment	\$	1,583.33
Dates to Prorate	11-30	
Aid Payment	\$	1,055.56
Combined Aid Payment	\$	1,055.56

2b) LRS Kin-GAP EDBC Summary Partial month with BDA mid-month After Change:

To move the ISP and Additional Rate line items from Kin-GAP Budget block to Aid Payment block and removed Total line item to align with the new proration logic. Also, moved the Special Needs line item before potential grant and removed the Special Needs line item proration hyperlink to align with the new net income test calculation.

Kin-GAP Budget		Regular	
Unearned Income		\$	<u>350.00</u>
Unearned Income Disregards		-	<u>0.00</u>
Net Unearned Income		=	350.00
Earned Income		\$	<u>0.00</u>
Earned Income Disregards		-	<u>0.00</u>
Net Earned Income		=	0.00
Total Net Nonexempt Income		\$	350.00
Rate Type		Standard State Rate	
Basic Rate Code		Level of Care	
Level of Care		Basic Level Rate	
Foster Care Basic Rate		\$	1,000.00
Special Needs		+	500.00
Total Net Nonexempt Income		-	350.00
Potential Grant		=	1,150.00
Aid Payment		Regular	
Full Month Aid Payment		\$	1,150.00
Dates to Prorate			11-30
Aid Payment		\$	766.67
Infant Supplemental Payment		+	<u>0.00</u>
Additional Rate		+	<u>600.00</u>
Combined Aid Payment		\$	1,366.67

Additional Rate Proration Detail

Close

Name	Type & Description	Begin Date	End Date	Amount
	County Authorized Allowance	11/11/2019	11/30/2019	\$ 600.00
Total				\$ 600.00

3a) LRS Kin-GAP EDBC Summary Full month with BDA 1st of the month but SCI mid-month Before Change:

Kin-GAP Budget	Regular
Unearned Income	\$ 350.00
Unearned Income Disregards	- 0.00
Net Unearned Income	= 350.00
Earned Income	\$ 0.00
Earned Income Disregards	- 0.00
Net Earned Income	= 0.00
Total Net Nonexempt Income	\$ 350.00
Foster Care Basic Rate	\$ 1,000.00
Rate Type	Standard State Rate
Basic Rate Code	Level of Care
Level of Care	Basic Level Rate
Potential Grant	\$ 650.00
Infant Supplemental Payment	+ 0.00
Additional Rate	+ 900.00
Special Needs	\$ 333.33
Total	= 1,883.33

Aid Payment	Regular
Full Month Aid Payment	\$ 1,883.33
Dates to Prorate	1-30
Aid Payment	\$ 1,883.33
Combined Aid Payment	\$ 1,883.33

**3b) LRS Kin-GAP EDBC Summary Full month with BDA 1st of the month but SCI mid-month
After Change:**

Kin-GAP Budget	Prorated		Prorated	
Unearned Income	\$	<u>350.00</u>	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Unearned Income	=	350.00	=	350.00
Earned Income	\$	<u>0.00</u>	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Earned Income	=	0.00	=	0.00
Total Net Nonexempt Income	\$	350.00	\$	350.00
Rate Type	Standard State Rate		Standard State Rate	
Basic Rate Code	Level of Care		Level of Care	
Level of Care	Basic Level Rate		Basic Level Rate	
Foster Care Basic Rate	\$	1,000.00	\$	1,000.00
Special Needs	+	0.00	+	500.00
Total Net Nonexempt Income	-	350.00	-	350.00
Potential Grant	=	650.00	=	1,150.00
Aid Payment	Prorated		Prorated	
Full Month Aid Payment	\$	650.00	\$	1,150.00
Dates to Prorate	1-10		11-30	
Aid Payment	\$	216.67	\$	766.67
Infant Supplemental Payment			+	<u>0.00</u>
Additional Rate			+	<u>900.00</u>
Combined Aid Payment			\$	1,883.33

4a) LRS Kin-GAP EDBC Summary Full month with BDA 1st of the month but Rate Split mid-month Before Change:

Kin-GAP Budget	Prorated		Prorated	
Unearned Income	\$	<u>350.00</u>	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Unearned Income	=	350.00	=	350.00
Earned Income	\$	<u>0.00</u>	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Earned Income	=	0.00	=	0.00
Total Net Nonexempt Income	\$	350.00	\$	350.00
Foster Care Basic Rate	\$	400.00	\$	1,000.00
Rate Type	Non Standard Rate		Standard State Rate	
Basic Rate Code			Level of Care	
Level of Care			Basic Level Rate	
Potential Grant	\$	50.00	\$	650.00
Infant Supplemental Payment	+	<u>0.00</u>	+	<u>0.00</u>
Additional Rate	+	<u>643.53</u>	+	<u>735.46</u>
Special Needs	\$	<u>233.33</u>	\$	<u>266.67</u>
Total	=	926.86	=	1,652.13

Aid Payment	Prorated		Prorated	
Full Month Aid Payment	\$	926.86	\$	1,652.13
Dates to Prorate		1-14		15-30
Aid Payment	\$	432.57	\$	881.08
Combined Aid Payment			\$	1,313.65

4b) LRS Kin-GAP EDBC Summary Full month with BDA 1st of the month but Rate Split mid-month After Change:

Kin-GAP Budget	Prorated		Prorated	
Unearned Income	\$	<u>350.00</u>	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Unearned Income	=	350.00	=	350.00
Earned Income	\$	<u>0.00</u>	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Earned Income	=	0.00	=	0.00
Total Net Nonexempt Income	\$	350.00	\$	350.00
Rate Type	Non Standard Rate		Standard State Rate	
Basic Rate Code			Level of Care	
Level of Care			Basic Level Rate	
Foster Care Basic Rate	\$	400.00	\$	1,000.00
Special Needs	+	500.00	+	500.00
Total Net Nonexempt Income	-	350.00	-	350.00
Potential Grant	=	550.00	=	1,150.00
Aid Payment	Prorated		Prorated	
Full Month Aid Payment	\$	550.00	\$	1,150.00
Dates to Prorate	1-14		15-30	
Aid Payment	\$	256.67	\$	613.33
Infant Supplemental Payment			+	<u>0.00</u>
Additional Rate			+	<u>900.00</u>
Combined Aid Payment			\$	1,770.00

Please refer to the tab "LRS Kin-GAP" in the "CA-208184 CIV-104011 EDBC Scenarios.xlsx" under the Supporting Documents section for the above detailed examples.

2.3.3 Programs Impacted

Kin-GAP

2.4 C-IV Kin-GAP EDBC Summary

2.4.1 Overview

Kin-GAP EDBC rules currently deny the KG Program if the application date is mid-month. In the Kin-GAP Budget block, Infant Supplemental Payment and Special Needs are currently prorating based on the number of days but the Potential Grant is not prorating. Also, Kin-GAP budget calculation subtracts net non-exempt income from Foster Care Basic Rate before adding the Special Care Increment (SCI) causing the Kin-GAP EDBC to fail for over income.

2.4.2 Description of Changes

1. Modify the existing KG pre-EDBC filter message to the new message if at least one day in the rate summary contains a missing rate.
Existing message – **“Kin-GAP: There is no rate specified for the current benefit month. Please assign a rate for the benefit month.”**
New message – **“Kin-GAP: There is no rate specified for at least one day in the Rate Summary. Please assign a rate for the missing day(s).”**
2. Modify KG EDBC Results Summary Page to move the Infant Supplemental Payment line item from Kin-GAP Budget block to Aid Payment block.
3. Modify KG EDBC Results Summary Page by moving the line items to align with the Net income test.
4. Add borders to the Total Net Nonexempt Income values in the KG EDBC Results Summary Page.
5. Modify the vertical blank space between Net Earned Income and Total Net Nonexempt Income to be less than the blank space between Total Net Nonexempt Income and Foster Care Basic Rate.
6. Modify KG EDBC to remove the Special Needs proration calculation, remove online hyperlink and associated **“EDBC Person Line Item Detail - AU Special Needs”** proration details child Page at the line item to reflect the new net income test.
7. Modify KG EDBC Results Summary Page to remove the **“Total”** line item from the Kin-GAP Budget section.
8. Modify KG Budget Net income test calculation to subtract Total Net Nonexempt Income from the sum of SCI amount and the Foster Care Basic Rate.
 - a. For the purpose of Net Income test, the monthly anticipated SCI amount will be considered to evaluate the budget when the SCI begin date is mid-month or for intake month.

- b. The Kin-GAP income test is Pass if Total Net Nonexempt Income is less than sum of Foster Care Basic Rate combined and the SCI amount otherwise income test is Fail.

Net Income Test Result	Condition
PASS	Total Net Nonexempt Income <= (Foster Care Basic Rate + SCI)
FAIL	Total Net Nonexempt Income > (Foster Care Basic Rate + SCI)

- 9. Modify KG EDBC Budget to split and calculate prorated days in a month based on the Rate split or SCI begin date from the Rate summary data collection details.
- 10. Modify "Aid Payment" line item to prorate the "Full Month Aid Payment" based on the "Dates to Prorate" under the "Aid Payment" section in the KG EDBC Results Summary Page.
- 11. Implementation date logic
 - a. New KG EDBC Results summary Page with the line items changed to Aid Payment block will be displayed based on the EDBC run date.
 - b. Historical KG EDBC Summary data will be untouched and will display the old format line Items.

1a) C-IV Kin-GAP EDBC Summary Full month Before Change:

Kin-GAP Budget	Regular	
Unearned Income	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>
Net Unearned Income	=	350.00
Earned Income	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>
Net Earned Income	=	0.00
Total Net Nonexempt Income	\$	350.00
Foster Care Basic Rate	\$	1,000.00
Potential Grant	\$	650.00
Infant Supplemental Payment	+	<u>411.00</u>
Special Needs	\$	<u>500.00</u>
Total	=	1,561.00

Aid Payment	Regular	
Full Month Aid Payment	\$	1,561.00
Dates to Prorate		1-30
Aid Payment	\$	1,561.00
Combined Aid Payment	\$	1,561.00

Infant Supplemental Payment Detail

		Close
Infant Name	Description	Countable Amount
	09/01/2019 - 09/30/2019	\$411.00
	Total	\$411.00

1b) C-IV Kin-GAP EDBC Summary Full month After Change:

Kin-GAP Budget		Regular
Unearned Income	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>
Net Unearned Income	=	350.00
Earned Income	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>
Net Earned Income	=	0.00
Total Net Nonexempt Income	\$	350.00
Foster Care Basic Rate	\$	1,000.00
Special Needs	+	500.00
Total Net Nonexempt Income	-	350.00
Potential Grant	=	1,150.00
Aid Payment		Regular
Full Month Aid Payment	\$	1,150.00
Dates to Prorate		1-30
Aid Payment	\$	1,150.00
Infant Supplemental Payment	+	<u>411.00</u>
Combined Aid Payment	\$	1,561.00

Infant Supplemental Payment Detail

Infant Name		Description	Countable Amount
		09/01/2019 - 09/30/2019	\$411.00
		Total	\$411.00

2a) C-IV Kin-GAP EDBC Summary Partial month Before Change:

In the Kin-GAP Budget block, ISP and Special Needs are currently prorating based on the number of days but the Potential Grant is not prorating.

The "Total" and "Full Month Aid Payment" is calculated incorrectly as the ISP and Special Needs are already prorated and "Aid Payment" is again prorating based on the number of days which is a double proration for ISP and Special Needs giving incorrect amount.

Kin-GAP Budget	Regular
Unearned Income	\$ 350.00
Unearned Income Disregards	- 0.00
Net Unearned Income	= 350.00
Earned Income	\$ 0.00
Earned Income Disregards	- 0.00
Net Earned Income	= 0.00
Total Net Nonexempt Income	\$ 350.00
Foster Care Basic Rate	\$ 1,000.00
Potential Grant	\$ 650.00
Infant Supplemental Payment	+ 274.00
Special Needs	\$ 333.33
Total	= 1,257.33

Aid Payment	Regular
Full Month Aid Payment	\$ 1,257.33
Dates to Prorate	11-30
Aid Payment	\$ 838.22
Combined Aid Payment	\$ 838.22

Infant Supplemental Payment Detail

		Close
Infant Name	Description	Countable Amount
	09/11/2019 - 09/30/2019	\$274.00
Total		\$274.00

2b) C-IV Kin-GAP EDBC Summary Partial month After Change:

To move the ISP line item from Kin-GAP Budget block to Aid Payment block and removed Total line item to align with the new proration logic. Also, moved the Special Needs line item before potential grant and removed the Special Needs line item proration hyperlink to align with the new net income test calculation.

Kin-GAP Budget	Regular
Unearned Income	\$ 350.00
Unearned Income Disregards	- 0.00
Net Unearned Income	= 350.00
Earned Income	\$ 0.00
Earned Income Disregards	- 0.00
Net Earned Income	= 0.00
Total Net Nonexempt Income	\$ 350.00
Foster Care Basic Rate	\$ 1,000.00
Special Needs	+ 500.00
Total Net Nonexempt Income	- 350.00
Potential Grant	= 1,150.00

Aid Payment	Regular
Full Month Aid Payment	\$ 1,150.00
Dates to Prorate	11-30
Aid Payment	\$ 766.67
Infant Supplemental Payment	+ 274.00
Combined Aid Payment	\$ 1,040.67

Infant Supplemental Payment Detail

Close		
Infant Name	Description	Countable Amount
	09/11/2019 - 09/30/2019	\$274.00
	Total	\$274.00

**3a) C-IV Kin-GAP EDBC Summary Full month with BDA 1st of the month but SCI mid-month
Before Change:**

Kin-GAP Budget	Regular	
Unearned Income	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>
Net Unearned Income	=	350.00
Earned Income	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>
Net Earned Income	=	0.00
Total Net Nonexempt Income	\$	350.00
Foster Care Basic Rate	\$	1,000.00
Potential Grant	\$	650.00
Infant Supplemental Payment	+	<u>411.00</u>
Special Needs	\$	<u>333.33</u>
Total	=	1,394.33

Aid Payment	Regular	
Full Month Aid Payment	\$	1,394.33
Dates to Prorate		1-30
Aid Payment	\$	1,394.33
Combined Aid Payment	\$	1,394.33

3b) C-IV Kin-GAP EDBC Summary Full month with BDA 1st of the month but SCI mid-month After Change:

Kin-GAP Budget	Prorated	Prorated
Unearned Income	\$ 350.00	\$ 350.00
Unearned Income Disregards	- 0.00	- 0.00
Net Unearned Income	= 350.00	= 350.00
Earned Income	\$ 0.00	\$ 0.00
Earned Income Disregards	- 0.00	- 0.00
Net Earned Income	= 0.00	= 0.00
Total Net Nonexempt Income	\$ 350.00	\$ 350.00
Foster Care Basic Rate	\$ 1,000.00	\$ 1,000.00
Special Needs	+ 0.00	+ 500.00
Total Net Nonexempt Income	- 350.00	- 350.00
Potential Grant	= 650.00	= 1,150.00

Aid Payment	Prorated	Prorated
Full Month Aid Payment	\$ 650.00	\$ 1,150.00
Dates to Prorate	1-10	11-30
Aid Payment	\$ 216.67	\$ 766.67
Infant Supplemental Payment	+	411.00
Combined Aid Payment		\$ 1,394.33

4a) C-IV Kin-GAP EDBC Summary Full month with BDA 1st of the month but Rate Split mid-month Before Change:

Kin-GAP Budget	Prorated		Prorated	
Unearned Income	\$	<u>350.00</u>	\$	<u>350.00</u>
Unearned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Unearned Income	=	350.00	=	350.00
Earned Income	\$	<u>0.00</u>	\$	<u>0.00</u>
Earned Income Disregards	-	<u>0.00</u>	-	<u>0.00</u>
Net Earned Income	=	0.00	=	0.00
Total Net Nonexempt Income	\$	350.00	\$	350.00
Foster Care Basic Rate	\$	400.00	\$	1,000.00
Potential Grant	\$	50.00	\$	650.00
Infant Supplemental Payment	+	<u>191.80</u>	+	<u>219.20</u>
Special Needs	\$	<u>233.33</u>	\$	<u>266.67</u>
Total	=	475.13	=	1,135.87

Aid Payment	Prorated		Prorated	
Full Month Aid Payment	\$	475.13	\$	1,135.87
Dates to Prorate		1-14		15-30
Aid Payment	\$	221.73	\$	605.80
Combined Aid Payment			\$	827.52

4b) C-IV Kin-GAP EDBC Summary Full month with BDA 1st of the month but Rate Split mid-month After Change:

Kin-GAP Budget	Prorated	Prorated
Unearned Income	\$ 350.00	\$ 350.00
Unearned Income Disregards	- 0.00	- 0.00
Net Unearned Income	= 350.00	= 350.00
Earned Income	\$ 0.00	\$ 0.00
Earned Income Disregards	- 0.00	- 0.00
Net Earned Income	= 0.00	= 0.00
Total Net Nonexempt Income	\$ 350.00	\$ 350.00
Foster Care Basic Rate	\$ 400.00	\$ 1,000.00
Special Needs	+ 500.00	+ 500.00
Total Net Nonexempt Income	- 350.00	- 350.00
Potential Grant	= 550.00	= 1,150.00

Aid Payment	Prorated	Prorated
Full Month Aid Payment	\$ 550.00	\$ 1,150.00
Dates to Prorate	1-14	15-30
Aid Payment	\$ 256.67	\$ 613.33
Infant Supplemental Payment		+ 411.00
Combined Aid Payment		\$ 1,281.00

Please refer to the tab "C-IV Kin-GAP" in the "CA-208184 CIV-104011 EDBC Scenarios.xlsx" under the Supporting Documents section for the above detailed examples.

2.4.3 Programs Impacted

Kin-GAP

2.5 Batch EDBC: Update CalSAWS Batch Pre-EDBC validation Not Processed Reason language (CalSAWS Only)

2.5.1 Overview

Batch EDBC currently skips Kin-GAP programs which validates if a person's placement rate is missing for the benefit month through the Pre-EDBC filter. Modify the verbiage when Pre-EDBC skips Kin-GAP programs when Kin-GAP persons is missing placement rates for any day within the benefit month.

2.5.2 Description of Change

Modify the Batch EDBC Not Processed Reason Code (Category 707) 'RK' verbiage with an in-place update.

Existing verbiage – **Kin-GAP: There is no rate specified for the current benefit month. Please assign a rate for the benefit month."**

New verbiage – **Kin-GAP: There is no rate specified for at least one day in the Rate Summary. Please assign a rate for the missing day(s).**

2.5.1 Execution Frequency

No Change

2.5.2 Key Scheduling Dependencies

No Change

2.5.3 Counties Impacted

All Counties

2.5.4 Data Volume/Performance

N/A

2.5.5 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.)

2.6 Batch EDBC: Add new CIV Batch Pre-EDBC validation logic to include missing Kin-GAP Rates (C-IV Only)

2.6.1 Overview

Currently in CIV Pre-EDBC logic there is no validation for Kin-GAP persons missing Kin-GAP placement rates for any day within the benefit month. Validation for a person's missing Kin-GAP placement rate is present in LRS.

2.6.2 Description of Change

- 1) Modify the CIV Pre-EDBC Batch skip logic to include validation for persons missing a Kin-GAP placement rate for any day within the benefit month.
- 2) Add a new Batch EDBC Not Processed Reason Code (Category 707) to match the updated LRS Code (Code Value = 'RK').

Short Description	There is no rate specified for the current benefit month.
Long Description	Kin-GAP: There is no rate specified for at least one day in the Rate Summary. Please assign a rate for the missing day(s).

2.6.3 Execution Frequency

No Change

2.6.4 Key Scheduling Dependencies

No Change

2.6.5 Counties Impacted

All Counties

2.6.6 Data Volume/Performance

N/A

2.6.7 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.)

2.7 Correspondence: Regression Test Existing Pro-rated Kin-GAP language

2.7.1 Overview

Currently in both CalSAWS and C-IV there exists prorated NOA language for Kin-GAP. This NOA language will continue to generate with the updates to the Kin-GAP BDA with this effort.

2.7.2 Description of Change

The following existing CalSAWS and C-IV prorated NOA language will generate.

CalSAWS: KG_AP_ACTION1 (ID: 4028)

CalSAWS Existing Prorated Language:


"The Kin-GAP cash aid payment for your first month of aid is only for a part of a month. It is for the time from your first day of Kin-GAP cash aid, shown above, through the end of the month. If nothing changes, next month's Kin-GAP cash aid will be for a full month."

C-IV: MSG_PARTIAL_MONTH_BENEFIT (ID: 164)

C-IV Existing Prorated Language:

"The benefit amount for your first month of aid is only for a part of the month. It is for the time from your first day of <PGM>, shown above, through the end of the month. If nothing changes, next month's benefit amount will be for a full month."

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	EDBC	EDBC Scenarios	 CA-208184 CIV-104011 EDBC Sc

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.8.1.15	The LRS shall determine the effective start and end date of eligibility and the Redetermination, Recertification, and/or Annual Agreement period for all individuals for all applicable programs.	The system will grant Kin-GAP program to apply mid-month and new income test to pass when the Total Net Nonexempt Income <= (Foster Care Basic Rate + Special Needs).

5 MIGRATION IMPACTS

NONE

6 OUTREACH

NONE

7 APPENDIX

NONE

CalSAWS

California Statewide Automated Welfare System

Design Document

SCR CA-209032 CIV-103887 – Create State
Agency Accounts for Designated DHCS and
CDSS Staff

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
	1.0	Initial	Gerald Limbrick

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1 OVERVIEW

This SCR will implement functionality that will allow consortium analysts to give LRS and C-IV application access to designated CDSS and DHCS staff in the context of any county.

LRS Note: This System Change Request defines functionality that is restricted to Universal (project/consortium staff) users. Universal users must be added to the LRS system before this functionality will be useable in LRS.

1.1 Current Design

Consortium Analysts add an application account for Oversight Agency staff through the Oversight Agency Staff Detail page. After an Oversight Agency account has been created by a Consortium Analyst, workers with the appropriate security privileges within the counties may activate or deactivate access to the application for their county. Access is managed by clicking the 'Activate' or 'Deactivate' button in the County Access panel on the Oversight Agency Staff Detail page.

1.2 Requests

Designated staff require access to the C-IV or LRS application (the automated system) in the context of any county within the automated system. A new classification is needed for Oversight Agency Staff on the Oversight Agency Staff Detail page. This is needed to distinguish between current Oversight Agency staff, staff that counties activate/deactivate, and those that only the Consortium Analysts maintain.

Once a Consortium Analyst creates an Oversight Agency account for this new classification of person, the person needs to have access to the application in the context of any county, without the need to be activated by a county worker. The security role for these accounts will not be editable via the County Security Role List page. In addition, these new accounts will not be exposed to the county users via the Staff Search pages, they are strictly maintained by the Consortium Analysts.

1.3 Overview of Recommendations

- Create a new Security Role that will contain specific View Only privileges including Report access but without Imaging access.
- Create a new classification for Oversight Agency staff. This classification will be available in the 'Classification' drop-down on the Oversight Agency Staff Detail page and used to assign the new role to users.
- Add logic to grant access to information for any county within the automated system to users with this new classification.
- Add logic to hide this new classification title on the Oversight Agency Staff Search page and the oversight Agency Staff Detail page from non Universal (project/consortium staff) users.
- Add logic to exclude these users from staff search results shown to non Universal (project/consortium staff) users.

- Add 'Activate All' or 'Deactivate All' buttons, for this new staff classification only, on the Oversight Agency Staff Detail page.

2 RECOMMENDATIONS

2.1 Oversight Agency Staff Detail

2.1.1 Overview

Consortium Analysts create an application account for Oversight Agency staff through the Oversight Agency Staff Detail page. After an account has been created by a Consortium Analyst and a username/password has been issued, designated workers from one or more counties may activate or deactivate access to the application for their specific county only. Access is managed by clicking the 'Activate' or 'Deactivate' buttons in the County Access panel on the Oversight Agency Staff Detail page.

Add a new staff classification, and a new role for the classification, with the specified set of security privileges. Add logic to automatically activate users with this new classification, for all counties, when the new security profile is created. Add logic to restrict users from being updated to or from this new classification after they have been created. Also add functionality for a Consortium Analyst to activate or deactivate users with this new classification, for all counties.

2.1.2 Oversight Agency Staff Detail Mockups

General Staff Information

First Name: *

Middle Name:

Last Name: *

Suffix:

Classification Title: *

CA State All County Access

CMSP Auditor

CalFresh Auditor

Child Care Auditor

IEVS Auditor

Medi-Cal Auditor

Other External Agency

QC Auditor

Staff ID:
555555

Comments:

916-657-3665

Security Profile

User Name:
jane.s@C92

Login Status:
Active

Password:

County Access

Status	Begin Date	End Date	Updated By
Inactive	06/27/2019	06/27/2019	877646
Active	06/27/2019		877646

Save

Cancel

Figure 2.1.1 - Oversight Agency Staff Detail - Edit Mode

Oversight Agency Staff Detail

*- Indicates required fields

Deactivate All Edit Close

General Staff Information

First Name: * Jane	Middle Name:	Last Name: * Smith	Suffix:
Classification Title: * CA State All County Access		Staff ID: 568273	
E-mail Address: * jane.smith@dss.ca.gov			
Comments: 916-657-3665			

Security Profile

User Name: jane.s@C92	Login Status: Active	Password: Reset Password
---------------------------------	--------------------------------	--

County Access

Status	Begin Date	End Date	Updated By
Inactive	11/28/2019	11/28/2019	877646
Active	11/28/2019		877646

Deactivate All Edit Close

Figure 2.1.2 Oversight Agency Staff Detail - View Mode

2.1.3 Description of Changes

- 1) Create a new security role called "CA State All County Access" with specific View Only privileges for all state agency users:
 - a) See appendix for security groups to be added to the new role.
 - b) Hide this security role on the County Security Role List page.
Note: An SCR should be requested to update the groups associated to the new role.

- i) Add additional security logic as needed to restrict adding this new role to existing users.
- 2) Create the following new classification for Oversight Agency staff: "CA State All County Access".
- a) Add application logic to exclude users of this new classification type from results returned in staff searches, unless the user is a Universal (project/consortium staff) user.
 - b) LRS Only:** Add application logic to hide this new classification in the 'Classification' dropdown on the Staff Search page. Note: Existing Oversight Agency Staff Classification titles are already hidden in this dropdown. This dropdown does not exist in the C-IV application.
- Note: Users with this new classification will show up, as normal, on Audit reports.
- 3) Add this classification in the 'Classification' drop-down on the Oversight Agency Staff Detail page.
- a) Add logic to hide this classification in this dropdown, unless the user is a Universal (project/consortium staff) user.
Note: Universal user does NOT mean Oversight Agency users or Regional Call Center users, it refers to project Consortium Staff.
 - b) Update the logic that assigns the Oversight Agency Staff security role so that the new role is used, instead, when a new account is created with the "CA State All County Access" classification.
 - c) Update the 'Classification' dropdown so that staff may not be updated to/from the "CA State All County Access" classification, after creation:
 - i) Disable the "CA State All County Access" option when staff of another classification is being edited.
 - ii) Disable all other classification options when a staff of the "CA State All County Access" classification is being edited.
 - d) Update the logic that creates a new account, when the classification is "CA State All County Access":
 - i) Activate users of this classification, for all counties at the time they are created.
 - ii) Set the activation end date to high_date.
Note: high_date is a system variable which means there is no end date until/unless a new end date is chosen.
- 4) Add 'Activate All' and 'Deactivate All' buttons to the Oversight Agency Staff Detail page when in view mode, viewing users with this new classification only.
- a) These buttons will activate or deactivate county access for all counties.
 - b) Position the buttons left of the 'Edit' and 'Close' buttons at the top and bottom of the page.
 - c) Add logic to protect these buttons with the OversightAgencyStaffDetailEdit security right and to only show these buttons for Universal (project/consortium staff) users (viewing a staff person with this new classification).
 - d) Hide these buttons when:
 - i) Hide the 'Activate All' button when all counties are active.
 - ii) Hide the 'Deactivate All' button when all counties are inactive.

2.1.4 Page Location

- C-IV only:
Global: Tools
Local: Admin
Task: Oversight Agency Staff
- LRS only:
Global: Admin Tools
Local: Admin
Task: Oversight Agency Staff

2.1.5 Security Updates

Security Rights

Security Right	Right Description	Right to Group Mapping
NA		

Security Groups

Security Group	Group Description	Group to Role Mapping
See appendix		

2.1.6 Page Mapping

NA

2.2 Oversight Agency Staff Search

2.2.1 Overview

The Oversight Agency Staff Search page is used to search for and find Oversight Agency staff. The 'Classification' dropdown is used to filter search results and all classification titles are available/viewable by all users with access to the page. Hide the new classification, created by this SCR, so that it is viewable, in the dropdown, by Universal (project/consortium staff) users only.

The 'Begin Date' field defaults to the current date. This is unnecessarily filtering the default search results and page users are removing the date for almost every search. To increase the page usability, remove the default date from the 'Begin Date' field.

2.2.2 Description of Changes

- 1) Add logic to hide the newly added classification in the 'Classification' dropdown, unless the user is a Universal (project/consortium staff) user. Note: Universal users does NOT mean Oversight Agency users or Regional Call Center users, it refers to project Consortium staff.
- 2) Remove the default date from the 'Begin Date' search field.


2.2.3 Page Location

- **C-IV only:**
Global: Tools
Local: Admin
Task: Oversight Agency Staff
- **LRS only:**
Global: Admin Tools
Local: Admin
Task: Oversight Agency Staff

2.2.4 Page Mapping

NA

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Security	Security Matrix	 SCR CA-209032 CIV-103887 Security

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4 REQUIREMENTS

4.1 Project Requirements

REQ #	Requirement Text	How Requirement Met
3.4.1.1.7	7. The LRS shall allow for the creation of special security profiles and security restrictions, such as limited-view, for external stakeholders.	The new classification added with this SCR is a special limited and restricted security profile for external stake holders.
3.4.1.3.4	4. The LRS shall include a means to prevent LSOs from assigning COUNTY-specified security profiles to Users.	The new staff classification can only be added by Universal (consortium/project) users with appropriate security privileges.
3.4.1.3.8	8. The LRS shall allow CSOs full access control to change the levels of LRS application security without the assistance of technical specialists such as programmers.	A security profile of this new classification type can be created by Universal (consortium/project) users with appropriate security privileges.

4.2 Migration Requirements

DDID #	Requirement Text	Contractor Assumptions	How Requirement Met
NA			

5 MIGRATION IMPACTS

None. This is a joint design being implemented in both systems.

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

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6 OUTREACH

Instructions for requesting staff logins will need to be sent to CDSS and DHCS.

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7 APPENDIX

7.1 Security Groups for new role:

Security Group	Group Description	Group to Role Mapping
Select	Access to Select Organization, Select Worker, and Select Case pages.	CA State All County Access
Staff Location	Search for and view details of offices and staff.	CA State All County Access
Office Admin View	View offices, units, and staff.	CA State All County Access
Documents	Create forms and view imaged and distributed documents.	CA State All County Access
Journal View	View journal entries.	CA State All County Access
Job Order Search	Search and view information for a job order.	CA State All County Access
Activity View	View detailed information for an activity.	CA State All County Access
Service View	View detailed information for a service.	CA State All County Access
Organization View	View basic information for an organization (non-collaborator).	CA State All County Access
Service Provider Request View	View a request for a service or service provider.	CA State All County Access
Collaborator Assignment Search	Search for position assignments made to collaborators, services, and job orders.	CA State All County Access
Service Provider Search	Search and view service providers with an active status.	CA State All County Access
Vendor View	View Organization county vendor information.	CA State All County Access
License View	View Foster Care Facility license information.	CA State All County Access
Employer Search	Allow Employer in the resource category drop down.	CA State All County Access
Hearings View	View detailed information for a hearing.	CA State All County Access
Cash Aid Time Limit View	View detailed information for Cash Aid customer time limits.	CA State All County Access
Job Order List	View a list of all job orders.	CA State All County Access
Non-Financial View	View detailed information to nonfinancial eligibility factors.	CA State All County Access
Financial View	View detailed information to financial eligibility factors.	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Misc Program View	View Child placement details and child placement list, view care increment for a child, view re-evaluation list and re-evaluation details for a child, view placement rates and view infant supplement for a child.	CA State All County Access
Customer Reporting View	View Customer Reporting List and Detail information.	CA State All County Access
Additional Eligibility View	View detailed information for additional eligibility records.	CA State All County Access
Quality Assurance	View detailed information for a Quality Assurance record.	CA State All County Access
SIP View	View detailed information of customer SIP records.	CA State All County Access
Training Program Name View	View detailed information for Training program names.	CA State All County Access
Striker View	Search and View Other Program Assistance and Striker list and detail Information.	CA State All County Access
Work Registration View	View detailed information to customer work registration records.	CA State All County Access
Person View	View detailed information to customer records.	CA State All County Access
Demographics View	View detailed information to customer demographic records.	CA State All County Access
Case View	Continue new application process and view hide person information.	CA State All County Access
Program View	View information to programs.	CA State All County Access
Individual Intake	View Intake Schedule appointments and availabilities.	CA State All County Access
Program Detail View	View detailed information of all programs and add child care need.	CA State All County Access
Workload Assignment View	View detailed information of workload assignment	CA State All County Access
New Person View	Search and Select a person to add to a case.	CA State All County Access
Program History	View Program and Person History information (Application and Statuses).	CA State All County Access
Customer Schedule	View and edit customer schedule.	CA State All County Access
Worker Schedule	View and edit worker schedule.	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Needs View	View detailed information on needs.	CA State All County Access
Degrees View	View detailed information on degrees and certificates.	CA State All County Access
Referral View	View detailed information on customer referrals.	CA State All County Access
Service Arrangements View	View detailed information to Service Arrangements.	CA State All County Access
Child Wait List View	View detailed information on Child Care wait list.	CA State All County Access
Child Care View	View detailed information on Child Care program records.	CA State All County Access
Workload View	View detailed information of workload.	CA State All County Access
Performance View	View detailed information on customer performance.	CA State All County Access
Plan View	View Skills, goals, action plans strengths and test scores. Search skills.Preview and print summary documents of plan information.	CA State All County Access
Activity Agreement View	Edit detailed information for an activity.	CA State All County Access
Customer Activity View	View the Activity Progress Detail, Activity Progress Summary, and the Excused Absence List pages.	CA State All County Access
Payment Requests View	View detailed information of a payment request.	CA State All County Access
Receipt View	View detailed information of receipts.	CA State All County Access
Recovery Account View	View detailed information to a Recovery Account.	CA State All County Access
Repayment View	View detailed information to repayment terms.	CA State All County Access
Transaction View	View detailed information of a Recovery Account Transaction.	CA State All County Access
Issuance View	View detailed information on issuances.	CA State All County Access
Overpayments View	View detailed information on overpayments.	CA State All County Access
Recovery Account Workload	View the workload for Recovery Accounts.	CA State All County Access
Eligibility View	View Needs, Cal-Learn, Service arrangement and EDBC results information. View Individual Financial Detail.View property details. View EDBC list page. View	CA State All County Access

Security Group	Group Description	Group to Role Mapping
	EDBC list from Overpayment Adjustment list page navigation.	
Un-Reimbursed View	View un-reimbursed expenses incurred in a case.	CA State All County Access
Service Provider Rate View	View rate information for an organization.	CA State All County Access
Verification View	View detailed information of verifications.	CA State All County Access
Customer Appointment View	View customer appointment detail and Customer activity detail.	CA State All County Access
Intake View	View detailed information of intake records.	CA State All County Access
Findings View	View detailed information of finding records.	CA State All County Access
Quality Review View	View detailed information of Quality Review records.	CA State All County Access
RDB Service Type and Collaborator Change Report	RDB Service Type and Collaborator Change Report	CA State All County Access
RDB Service Provider Activity Report	RDB Service Provider Activity Report	CA State All County Access
Caseload Reports	Caseload Reports	CA State All County Access
Reception Log Report	Reception Log Report	CA State All County Access
Sanctions Report	Sanctions Report	CA State All County Access
Time Limit Report	Time Limit Report	CA State All County Access
Eligibility Reports	Eligibility Reports	CA State All County Access
Quality Control Summation Report	Quality Control Summation Report	CA State All County Access
Quality Review Caseload Activity Report	Quality Review Caseload Activity Report	CA State All County Access
Quality Review Class Code Findings Report	Quality Review Class Code Findings Report	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Integrated Claiming Reports	Integrated Claiming Reports	CA State All County Access
Register Reports	Register Reports	CA State All County Access
Child Care Register Reports	Child Care Register Reports	CA State All County Access
Collections Reports	Collections Reports	CA State All County Access
Inventory Reports	Inventory Reports	CA State All County Access
Issuance Exception Report	Issuance Exception Report	CA State All County Access
Pending Recovery Account Report	Pending Recovery Account Report	CA State All County Access
Planning Reports	Planning Reports	CA State All County Access
Program Assignment Reports	Program Assignment Reports	CA State All County Access
Unassigned Program List Report	Unassigned Program List Report	CA State All County Access
CWS / CMS Report	CWS / CMS Report	CA State All County Access
State Reports	State Reports	CA State All County Access
SIU State Reports	SIU State Reports	CA State All County Access
FNS 209 Report	FNS 209 Report	CA State All County Access
1099 Reconciliation Report	1099 Reconciliation Report	CA State All County Access
Direct Deposit New Status Report	Direct Deposit New Status Report	CA State All County Access
Warrant Production Reconciliation Report	Warrant Production Reconciliation Report	CA State All County Access
WTW Plan Time Limit Report	WTW Plan Time Limit Report	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Administrative Disqualification Hearing Caseload Activity Report	Administrative Disqualification Hearing Caseload Activity Report	CA State All County Access
Standard View	Search and view standard(s)	CA State All County Access
Valuable View	View detailed information on inventory of valuables.	CA State All County Access
Valuable Inventory View	View detailed information of inventory reasons.	CA State All County Access
Child Care Payment Calculation View	View Child Care Payment Calculation Information.	CA State All County Access
Direct Deposit Production Reconciliation Report	Direct Deposit Production Reconciliation Report	CA State All County Access
EBT Production Reconciliation Report	EBT Production Reconciliation Report	CA State All County Access
Child Care Levy View	Child Care Levy View	CA State All County Access
Fiscal History	View Fiscal History Information.	CA State All County Access
Foster Care Facility View	View claiming information for Foster Care Facilities.	CA State All County Access
WEX Service Hours View	View Work Experience and Community Service Hours Calculation records.	CA State All County Access
Feedback View	Search for feedback already submitted.	CA State All County Access
Notes View	Access to view notes.	CA State All County Access
Case Flag View	View detailed information for a Case/Person Flag.	CA State All County Access
MEDS Unconverted Active Case Report	MEDS Unconverted Active Case Report	CA State All County Access
Meds Alert Search View	Search for MEDs Alerts.	CA State All County Access
Child Care Forecasting Report	Child Care Forecasting Report	CA State All County Access
Child Support Exception Report	Child Support Exception Report	CA State All County Access
Foster Care View	View the details of a Placement Authority, Permanency	CA State All County Access

Security Group	Group Description	Group to Role Mapping
	Authority, and Foster Care Deprivation.	
Interview Result View	View the details of an interview result.	CA State All County Access
Direct Deposit Transmittal Register Report	Direct Deposit Transmittal Register Report	CA State All County Access
Release Note Report	Release Note Report	CA State All County Access
Manual EDBC View	View a Manual EDBC.	CA State All County Access
IEVS ECS View	View Earnings Clearance Report.	CA State All County Access
IEVS New Hire View	View New Hire Report.	CA State All County Access
IEVS PVS View	View Payment Verification Report.	CA State All County Access
IEVS Search	Search for IEVS reports.	CA State All County Access
IEVS Review Findings View	View IEVS findings	CA State All County Access
Child Care Delinquent Approvals Report	Child Care Delinquent Approvals Report	CA State All County Access
Cal-Learn Program View	View Cal-Learn program information.	CA State All County Access
Duplicate Aid Report	Duplicate Aid Report	CA State All County Access
EBT Account List View	View EBT Account List	CA State All County Access
EBT Account View	View EBT Account	CA State All County Access
EBT Card View	View EBT Card	CA State All County Access
EBT Account Search	Search for EBT Accounts	CA State All County Access
EBT Transaction Search	Search EBT Transaction	CA State All County Access
EBT Transaction View	View EBT Transaction	CA State All County Access
EBT Reports	Reports for EBT	CA State All County Access
Recovery Account Uncollectible Zero Report	Report Group to view Recovery Account Uncollectible Zero Report	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Resource Approval List View	View Resource Approval List	CA State All County Access
EApp View	View and Search E-Application	CA State All County Access
Active End Dated Activities Report	View Active End Dated Activities Report	CA State All County Access
Recovery Accounts With Aid Restored Report	Report for Recovery Accounts with Aid Restored	CA State All County Access
WDTIP Alert View	Search and View WDTIP Alerts	CA State All County Access
Vital Statistics View	View Vital Statistics Records	CA State All County Access
Tax Intercept Reports	View Tax Intercept Reports	CA State All County Access
Time Limit Aid View	Search and View Time Limit Aid Details	CA State All County Access
Good Cause Detail View	Search and View Good Cause Records	CA State All County Access
Expedited Service CalFresh Management Report	Expedited Service CalFresh Management Report	CA State All County Access
Child Support Collection View	Search and View Child Support Collection List and Detail	CA State All County Access
Notification List View	View Notification List	CA State All County Access
County Impact List View	View County Impact List	CA State All County Access
Excused Absence List View	View excused absence information.	CA State All County Access
Legacy Case List View	View Legacy Case List	CA State All County Access
Valuable Type View	View the Valueable Type List and Detail page.	CA State All County Access
Employment Services Status List View	Allows access to view the WTW and FSET Status List pages	CA State All County Access
Foster Care Recovery Account Report	Foster Care Recovery Account Report	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Employment Hours Detail View	View Employment Hours Detail Page	CA State All County Access
IHSS Referral View	Search and View IHSS Referral	CA State All County Access
IHSS Alert View	Search and View IHSS Alerts	CA State All County Access
Local Warrant Print View	View Local Warrant Print page	CA State All County Access
CMSP Pending Applications Report	CMSP Pending Applications Report	CA State All County Access
CMSP Caseload Report	CMSP Caseload Report	CA State All County Access
CMSP 237 Report	CMSP 237 Report	CA State All County Access
CMSP 237 Detailed Report	CMSP 237 Detailed Report	CA State All County Access
Inactive Programs With Outstanding Overpayments Report	Inactive Programs With Outstanding Overpayments Report	CA State All County Access
Balderas Telephone Contact Report	Balderas Telephone Contact Report	CA State All County Access
Outstanding Collection Balance Report	Outstanding Collection Balance Report	CA State All County Access
School Lunch Report	School Lunch Report	CA State All County Access
Excess Recoupment Report	Excess Recoupment Report	CA State All County Access
MEDS Alert Summary Report	MEDS Alert Summary Report	CA State All County Access
MEDS Weekly Alerts Detailed Report	MEDS Weekly Alerts Detailed Report	CA State All County Access
MEDS Reconciliation Alerts Report	MEDS Reconciliation Alerts Report	CA State All County Access
Mileage Rate View	View Mileage Rate	CA State All County Access
Sanction Track View	View Sanction Track	CA State All County Access

Security Group	Group Description	Group to Role Mapping
Vocational Education Track View	View Vocational Education Track	CA State All County Access
Child Under One Track View	View Child Under One Track	CA State All County Access
WPR Time Track View	View WPR Time Track	CA State All County Access
Job Readiness Track View	View Job Readiness Track	CA State All County Access
Work Participation Rate Report	Work Participation Rate Report	CA State All County Access
Custom Reports Builder	Access to the Business Intelligence Catalog which contains ad hoc reporting functionality	CA State All County Access
Issuance Method Detail View	View the Issuance Method.	CA State All County Access
C4Yourself Regional Dashboard View	Provides access to the C4Yourself Dashboard at a regional level.	CA State All County Access
Kin-GAP View	View Kin-GAP Rate, Infant Supplemental and Special Care Increment information.	CA State All County Access
Lobby Management Reports	Provides access to the Lobby Management Dashboard	CA State All County Access
Caseload Inventory Supervisor Dashboard View	Access to the Business Intelligence Caseload Inventory Dashboard	CA State All County Access
MAGI View	View MAGI information.	CA State All County Access
Subscriber County Review List	Allows access to the Subscriber County Review List page including the ability to reassign cases displayed on the page.	CA State All County Access
Application Questions List View	Allows the ability to view information on the Application Questions List page.	CA State All County Access
ARC View	View the details of an ARC Relative Placement.	CA State All County Access
MAGI RE Discontinuance Report	MAGI RE Discontinuance Report.	CA State All County Access

Security Group	Group Description	Group to Role Mapping
ABAWD Time Limit View	View detailed information for ABAWD customer time limits.	CA State All County Access
ABAWD Status List View	Allow access to view the ABAWD Status List pages.	CA State All County Access
Deemed Eligibility View	This group grants view access for the Deemed Eligibility pages.	CA State All County Access
Authorized Representative List View	Gives the user access to the Authorized Representative List Page.	CA State All County Access
Authorized Representative Detail View	Gives the user view access to the Authorized Representative Detail Page and the Authorized Representative Program Detail Page.	CA State All County Access
EC-EA Tracking Report	The group allows the users to access the EC-EA Tracking Report.	CA State All County Access
CalFresh Reversal View	Gives the worker the ability to view a CalFresh SSI/SSP Reversal record.	CA State All County Access



California Statewide Automated Welfare System

Design Document

CA-209488 | CIV-104597

ACL 19-99 Child Care Immediate and
Continuous Eligibility to Stage One

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/19/19	1.0	Initial Creation	Connor Gorry
01/02/20	1.1	Clarified variable population on the last pages of both CCP 7 and CCP 8	Connor Gorry

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1 OVERVIEW

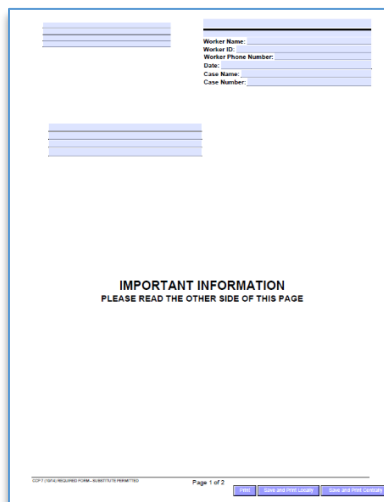
ACL 19-99 dated October 2019 outlines three stages of CalWORKs Child Care. The changes made with this SCR are relevant to Stage One, which provides Child Care to CalWORKs families as they first engage in the program.

ACL 19-99 adds a new Form , 'CalWORKs Stage One Child Care Authorization Form' (CCP 8) and revises the 'CalWORKs Child Care Request Form and Child Care Payment Rules' (CCP 7).

1.1 Current Design

CIV currently has version 10/2014 of the CCP 7 in the Template Repository. CalSAWS does not have the CCP 7 form in the system.

With this effort the updated CCP 7 (10/19) version will be implemented in both CIV and CalSAWS. The new CCP 8 (10/19) will be added to both CIV and CalSAWS. CCP 7 and CCP 8 will be in the Template Repository.



CalWORKs CHILD CARE REQUEST FORM AND REIMBURSEMENT RULES

CalWORKs Child Care Coverage
Eligible CalWORKs recipients can get their child care paid for by the state. To be eligible, you must be working or participating in an approved county welfare-to-work (WTW) activity. This includes any county approved CalWORKs activities or employment listed in your WTW plan. For your child care to be reimbursed, you must be found eligible for child care, and your provider has to meet certain requirements. The child care must be with an eligible provider. These are licensed child care providers, or providers who are not licensed but have their background checked and become registered through a program called "TrustLine". A grandparent, aunt, or uncle of the children, does not need a background check, but must turn in a form called a Declaration of Exemption From TrustLine Registration And Health And Safety Self-Certification (CCP1).

The state reimburses child care for children under 13, and for older children with disabilities that prevent them from being left alone. In two-parent families, if a parent is home and able to care for the children, the state will not reimburse the child care. The parent is considered available to provide care unless he/she is working, doing a county approved WTW activity, or has a condition, verified by a doctor, that prevents him/her from caring for the child. For 11 or 12 year old children, the preferred child care placement is in a program such as the After-School Education and Safety Program. To get information on these programs, go to www.cdc.ca.gov/sbaas, or you may call the Child Care Resource and Referral Agency listed below.

You must tell your worker as soon as possible if you need child care.
IMPORTANT: The state will not pay for retroactive CalWORKs child care provided more than 30 calendar days before the date you ask your worker to provide child care. If you pick a provider who must be registered with TrustLine, the state cannot pay them until they are registered. Once registered, the state can pay them for actual care provided up to 120 calendar days from the day you asked for child care reimbursements. This is why you must tell your worker as soon as possible when changing your provider, to make sure the TrustLine-registration process gets started immediately.

Child Care Request
To ask for child care, sign and return this form to your worker.

Please check one of the following:

☐ I need child care assistance at this time so I can go to work or attend my WTW activity.

☐ I do not need child care at this time. I understand that I must request child care from my worker if I need it in the future.

☐ Before or after school care such as the After-School Education and Safety Program will meet all ☐ or part ☐ of my child care needs for my 11 or 12 year old child. If this does not meet all of your child care needs, additional child care can be provided.

I understand that CalWORKs child care is available for me to work and to attend my county approved WTW activity. If I need help to find and/or choose a child care provider, I can contact the local Child Care Resource and Referral agency listed below:

Name: _____ Telephone: _____

Address: _____

I understand that I must tell my worker as soon as I need child care. I understand that CalWORKs will help reimburse for child care only after I ask for the child care. My worker's telephone number is: (_____) _____.

I understand that after I ask for child care, I have to give my worker certain information to see whether I am eligible. I understand that I need to request child care within 30 calendar days from the first day I received child care services from my provider.

I understand that if I choose a child care provider who is required to be TrustLine-registered, the provider is not eligible for reimbursement if they do not obtain TrustLine-registration.

I understand that my child care provider has to meet certain requirements to be reimbursed, and if my child care provider does not meet these requirements, I must pay for any child care services I get from that person.

I have read this notice or have had it read to me. I understand that if I have any questions or need additional information regarding this notice, I can ask my worker.

CASE NAME	CASE NO.
SIGNATURE	DATE
WORKER NAME	PHONE

CCP 7 (10/14) REQUIRED FORM - SUBSTITUTE PERMITTED Page 2 of 2

[Print](#) [Save and Print Locally](#) [Save and Print Centrally](#)

CCP 7 (10/14) – Child Care Request Form and Reimbursement Rules

1.2 Requests

1. The CCP 7 form must be revised to match the newly revised version. 12 month eligibility to Stage One child care is effective 10/1/2019.
2. Add the CCP 8 to the Template Repository.

1.3 Overview of Recommendations

1.3.1 Update CCP 7 in C-IV

Update CCP 7 to the CCP 7 (10/19) version for C-IV in Template Repository.

1.3.2 Add CCP 7 to the CalSAWS Template Repository

Add the CCP 7 (10/19) in the CalSAWS to the Template Repository.

1.3.3 Add CCP 8 to the Template Repository in C-IV and CalSAWS

Add the CCP 8 (10/19) to the C-IV and CalSAWS Template Repositories.

1.4 Assumptions

1. Threshold language versions including Spanish of the CCP 7 and the CCP 8 will be added in a future SCR.

2 RECOMMENDATIONS

There are three recommendations made by this SCR, per regulation ACL 19-99:

1. Replace the currently utilized CCP 7 (10/14) with state form CCP 7 (10/19) in the C-IV System (C-IV).
2. Add the CCP 7 (10/19) version to the CalSAWS Template Repository.
3. Implement the new state form CCP 8 (10/19) to the C-IV and CalSAWS Template Repositories.

2.1 Update CCP 7 in C-IV

2.1.1 Overview

Update the CCP 7 in the Template Repository to the newest State version, CCP 7 (10/19). CCP 7 is now two full pages long, and provides the client with more information than did CCP 7 (10/14). Important additions include sections on Care Rights, TrustLine registration, and technicalities for two-parent families.

State Form: CCP 7 (10/14)

Current Programs: CW/Child Care

Current Attached Form(s): None

Current Forms Category: Administrative

Existing Languages:

Armenian, Arabic, Cambodian, Chinese, English, Farsi, Togalog, Hmong, Korean, Lao, Russian, Spanish, and Vietnamese

2.1.2 Update the CCP 7 XDP

CCP 7 XDP will be updated to the newest state version CCP 7 (10/19). This version will include the C-IV Mailing Cover Letter. **The final page of CCP 7 will continue to populate as its current version does.** For a full before/after view of the updates made to CCP 7, [please see Supporting Documents #2](#)

Form Header: N/A, this Form includes a Mailing Cover Letter.

Form Title: CalWORKs Child Care Request Form and Child Care Payment Rules

Form Number: CCP 7 (10/19)

Attached Forms: COVER.xdp

Forms Category: Administrative

Include NA Back 9: No

Form Mockups/Examples: [See Supporting Documents #1](#)

Updated Languages:

English

State of California – Health and Human Services Agency California Department of Social Services

CALWORKS CHILD CARE REQUEST FORM AND CHILD CARE PAYMENT RULES

NOTICE: You may be eligible for CalWORKs Stage One Child Care
The county pays for child care for children under age 13, and for children up to age 21 with disabilities.

MY CHILD CARE RIGHTS

- I have a right to receive child care services to help meet my family's needs. For example: housing search, domestic violence or mental health counseling, court and medical appointments, or other similar activities.
- I have a right to child care so that I can go to any Welfare-to-Work (WTW) activity or work.
- My child care will be authorized for 12 months, so that my children get stable, reliable care.
- I have the right to have child care in place before I need to show up for required activities or appointments.
- I have a right to full-time child care, unless I choose part-time care.
- I have a right to child care as a WTW volunteer, if I choose to participate in activities but don't have to.
- If I don't want child care now, I can ask for it later.

WHO CAN BE MY CHILD CARE PROVIDER?
You can choose who will take care of your child(ren). You can choose a child care center, a licensed family child care provider, or a family member, friend or neighbor. If you choose a family member, friend or neighbor, they may need to get fingerprinted. Please see the **TrustLine** section on the back of this form.

HOW DO I ASK FOR CHILD CARE?
You can get child care by asking your county worker, at your On-line CalWORKs Appraisal Tool (OCAT) assessment, or by submitting this form or any request in writing. You should ask for child care as soon as you know you will need it. Child care will be approved when you get approved for cash aid.

HOW DO I FIND CHILD CARE?
The local Child Care Resource and Referral Agency (R&R) can help you find the best child care option for your family. You can visit or contact them using the information below, or you can call the California Resource and Referral Network at: **1-800-KIDS-793**.

R&R Agency Name: _____ Telephone: _____
Address: _____ Website: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- Do you want child care for any of your children now? ☐ Yes ☐ No
- You are eligible for full-time child care (30 or more hours per week). Would you rather have full-time child care? ☐ Yes ☐ No
- Will you need child care if you start working, going to school, training, job search, counseling, housing search, or other activity? ☐ Yes ☐ No

CCP 7 (10/19) Required Form - Substitute Permitted

A new section informs clients of their Child Care Rights from the start.

Some Child Care FAQ's

A new section for contact info for a client's local Resource and Referral Agency.

These five questions help to get the client enrolled in with the correct services.

Outline of the steps for a Child Care provider to register through TrustLine. Additional information pertaining to two-parent families has also been added.

Client initials in this section to certify their understanding of the requirements for receiving Child Care benefits. If the client had the form read to them in another language, it's noted here.

Case information section remains unchanged from previous version.

State of California – Health and Human Services Agency California Department of Social Services

If you answered **No** to questions 1, 2, or 3 above:

- Is somebody watching your children who does not want to get paid? ☐ Yes ☐ No
- Are all of your children in Head Start, another free or low-cost child care program, or school? ☐ Yes ☐ No

Even if you don't need child care now, you can ask for child care at any time.

CHILD CARE RULES: TRUSTLINE
Your child care provider must be eligible before they can get paid. An eligible provider is a licensed child care provider, a provider who has cleared the TrustLine fingerprinting and background check process, or a provider who doesn't have to get TrustLine registered. If you choose a child care provider who is required to be TrustLine registered, the county will only pay your provider if they clear TrustLine. Once your child care provider is TrustLine registered, the county will pay for child care for up to 120 days from the date you asked for child care or when the child care began, whichever is later. A grandparent, aunt, or uncle of the child(ren) does not need to be TrustLine registered but must turn in a form called a Declaration of Exemption from TrustLine Registration and Health and Safety Self-Certification (CCP1).

TWO-PARENT FAMILIES
In two-parent families, if one parent is able and available to care for the child(ren), the county will not pay for child care. A parent is considered available to provide care unless they are working (or sleeping after working), doing a county-approved WTW activity, or have a condition verified by a doctor, that prevents them from caring for the child(ren).

CERTIFICATIONS Please initial the below certifications.

_____ I understand that if I choose a child care provider who is required to be TrustLine registered, the provider is not eligible for any reimbursement if they do not get TrustLine registered.

_____ I understand that I do not have to go to any Welfare-to-Work (WTW) appointment or activity unless I have found child care that will accept child care payment from the County.

_____ I understand that I must tell my worker as soon as I need child care. I understand that I need to ask for child care within 30 calendar days from the first day I received child care services for my provider to get fully paid.

_____ I have read this notice, or had it read to me in _____. If I have any questions or need additional information about this notice, I can ask my worker.

My worker can be reached at: _____

Case Name	Case No.
Client Signature	Date
Case Worker Name	Phone

CCP 7 (10/19) Required Form - Substitute Permitted Page 2 of 2

2.1.3 Turn Off Threshold Language Forms

Threshold languages must be turned off until translations for the revised CCP 7 are added in an additional future SCR. The languages **not** being updated with this effort are Armenian, Arabic, Cambodian, Chinese, Farsi, Tagalog, Hmong, Korean, Lao, Spanish, Russian, and Vietnamese.

Note: CCP 7 is currently included in the combined CalWORKS/CalFresh and the CalWORKs RE Packets in C-IV. The updated CCP 7 (10/19) will generate in the English versions of these packets only.

Spanish and Threshold languages will continue to generate with their respective translations of CCP 7 (10/14) in these RE Packets only. Spanish and Threshold versions of the updated CCP 7 (10/19) will be added with CIV-105751.

2.2 Add CCP 7 to the CalSAWS Template Repository

The CCP 7 Form must also be added to the CalSAWS template repository.

2.2.1 Overview

The last part of this effort is to add new state form CCP 7 – CalWORKS Child Care Request Form and Child Care Payment Rules – to the CalSAWS Template Repository.

State Form: CCP 7

Programs: CW/Child Care

Attached Forms: Mailing Cover Letter (COVER.xdp)

Forms Category: Forms

Form Mockups/Examples:

For CCP 7 mockup, see [Supporting Documents #3](#)

2.2.2 Create CCP 7 Form XDP

As described prior, CCP 7 is a two page form that provides informs clients of their eligibility for Child Care programs, allows them to make a Child Care request, and describes Child Care payment requirements.

Form Header: N/A, this Form includes a Mailing Cover Letter.

Form Title: CalWORKs Child Care Request Form and Child Care Payment Rules

Form Number: CCP7

Include NA Back 9: No

State of California – Health and Human Services Agency California Department of Social Services

CALWORKS CHILD CARE REQUEST FORM AND CHILD CARE PAYMENT RULES

NOTICE: You may be eligible for CalWORKs Stage One Child Care
The county pays for child care for children under age 13, and for children up to age 21 with disabilities.

MY CHILD CARE RIGHTS

- I have a right to receive child care services to help meet my family's needs. For example: housing search, domestic violence or mental health counseling, court and medical appointments, or other similar activities.
- I have a right to child care so that I can go to any Welfare-to-Work (WTV) activity or work.
- My child care will be authorized for 12 months, so that my children get stable, reliable care.
- I have the right to have child care in place before I need to show up for required activities or appointments.
- I have a right to full-time child care, unless I choose part-time care.
- I have a right to child care as a WTV volunteer, if I choose to participate in activities but don't have to.
- If I don't want child care now, I can ask for it later.

WHO CAN BE MY CHILD CARE PROVIDER?
You can choose who will take care of your child(ren). You can choose a child care center, a licensed family child care provider, or a family member, friend or neighbor. If you choose a family member, friend or neighbor, they may need to get fingerprinted. Please see the **TrustLine** section on the back of this form.

HOW DO I ASK FOR CHILD CARE?
You can get child care by asking your county worker, at your On-line CalWORKs Appraisal Tool (OCAT) assessment, or by submitting this form or any request in writing. You should ask for child care as soon as you know you will need it. Child care will be approved when you get approved for cash aid.

HOW DO I FIND CHILD CARE?
The local Child Care Resource and Referral Agency (R&R) can help you find the best child care option for your family. You can visit or contact them using the information below, or you can call the California Resource and Referral Network at: **1-800-KIDS-793**.

R&R Agency Name: _____ Telephone: (____) _____
Address: _____ Website: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- Do you want child care for any of your children now? ☐ Yes ☐ No
- You are eligible for full-time child care (30 or more hours per week). Would you rather have part-time child care? ☐ Yes ☐ No
- Will you need child care if you start working, going to school, training, job search, counseling, housing search, or other activity? ☐ Yes ☐ No

CCP 7 (10/19) Required Form - Substitute Permitted Page 1 of 2

State of California – Health and Human Services Agency California Department of Social Services

If you answered **No** to questions 1, 2, or 3 above:

- Is somebody watching your children who does not want to get paid? ☐ Yes ☐ No
- Are all of your children in Head Start, another free or low-cost child care program, or school? ☐ Yes ☐ No

Even if you don't need child care now, you can ask for child care at any time.

CHILD CARE RULES: TRUSTLINE
Your child care provider must be eligible before they can get paid. An eligible provider is a licensed child care provider, a provider who has cleared the TrustLine fingerprinting and background check process, or a provider who doesn't have to get TrustLine registered. If you choose a child care provider who is required to be TrustLine registered, the county will only pay your provider if they clear TrustLine. Once your child care provider is TrustLine registered, the county will pay for child care for up to 120 days from the date you asked for child care or when the child care began, whichever is later. A grandparent, aunt, or uncle of the child(ren) does not need to be TrustLine registered but must turn in a form called a Declaration of Exemption from TrustLine Registration and Health and Safety Self-Certification (CCP1).

TWO-PARENT FAMILIES
In two-parent families, if one parent is able and available to care for the child(ren), the county will not pay for child care. A parent is considered available to provide care unless they are working (or sleeping after working), doing a county-approved WTV activity, or have a condition verified by a doctor, that prevents them from caring for the child(ren).

CERTIFICATIONS Please initial the below certifications.

_____ I understand that if I choose a child care provider who is required to be TrustLine registered, the provider is not eligible for any reimbursement if they do not get TrustLine registered.

_____ I understand that I do not have to go to any Welfare-to-Work (WTV) appointment or activity unless I have found child care that will accept child care payment from the County.

_____ I understand that I must tell my worker as soon as I need child care. I understand that I need to ask for child care within 30 calendar days from the first day I received child care services for my provider to get fully paid.

_____ I have read this notice, or had it read to me in _____ If I have any questions or need additional information about this notice, I can ask my worker.

My worker can be reached at: _____

Case Name	Case No.
Client Signature	Date
Case Worker Name	Phone

CCP 7 (10/19) Required Form - Substitute Permitted Page 2 of 2

CCP 7 (10/19) Mockup For a fully accessible PDF please see [Supporting Documents #1](#)

2.2.3 Add CCP 7 (10/19) to the CalSAWS Template Repository

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

2.2.4 Add CCP 7 Form Print Options and Mailing Requirements

The following Print Options will be included for the CCP 7:

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

***Note:** “Save and Print Centrally” and “Re-print Centrally” buttons will be available for CCP 7 and CCP 8 in CalSAWS. It will be up to the user to follow county protocol on whether to use these functionalities.

Mailing Requirements:

Mail-To (Recipient): Address of the Primary Applicant on the Child Care program

Mailed From (Return): Office Address

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: None

Additional Requirements:

Special Paper Stock: N/A

Enclosures: No

Electronic Signature: No

Post to YBN/C4Y: Yes

***Note:** CCP 7's Form Name has changed slightly since its last iteration. Ensure that the Form Title in C4Y is “CalWORKs Child Care Request Form and Child Care Payment Rules”

2.3 Add CCP 8 to the C-IV and CalSAWS Template Repositories

2.3.1 Overview

The last part of this effort is to add new state form CCP 8 – CalWORKs Stage One Child Care Authorization Form – to the C-IV and CalSAWS template repositories.

State Form: CCP 8

Programs: CW/Child Care

Attached Forms: Standard Cover Letter (COVER.xdp)

Forms Category: In C-IV the Form Category is Administrative; In CalSAWS the Form Category is Forms

Form Mockups/Examples: See [Supporting Documents #3](#)

2.3.2 Create CCP 8 Form XDP

CCP 8 is a two-page Form to be turned in after CCP 7, which authorizes Stage One of the CalWORKs Child Care process.

Form Header: N/A, this Form includes a Mailing Cover Letter.

Form Title: CalWORKs Stage One Child Care Authorization Form

Form Number: CCP8

Include NA Back 9: No.

The mockup shows two pages of the CCP 8 (10/19) Required Form. Page 1 is titled 'CALWORKS STAGE ONE CHILD CARE AUTHORIZATION FORM' and includes sections for 'NOTICE', 'CHILD CARE AUTHORIZATION', 'CHILD CARE PROVIDER INFORMATION', and 'CHILD INFORMATION'. Page 2 is titled 'CHILD CARE RULES: TRUSTLINE' and includes a table for 'Case Name', 'Case No.', 'Client Signature', 'Date', 'Case Worker Name', and 'Phone'.

State of California – Health and Human Services Agency California Department of Social Services

CALWORKS STAGE ONE CHILD CARE AUTHORIZATION FORM

NOTICE: You are authorized for CalWORKs Stage One Child Care. Please complete and return this form when you have found someone to take care of your child(ren).

CHILD CARE AUTHORIZATION
You have been authorized for: Full-time child care ☐ Part-time child care ☐
Child Care Authorization Start Date: End Date:

CHILD CARE PROVIDER INFORMATION
Please complete the following information about your child care provider:

Child Care Provider Name: Telephone:
Address:
My child will start care on:
My child care provider is: ☐ Licensed ☐ License-exempt
If your child care provider is license-exempt, they may have to go through the TrustLine fingerprinting and background check process. Please see TrustLine section below.
If you have more than one child care provider, please complete the following information for your additional provider:
Child Care Provider Name: Telephone:
Address:
My child will start care on:
My child care provider is: ☐ Licensed ☐ License-exempt
If your child care provider is license-exempt, they may have to go through the TrustLine fingerprinting and background check process. Please see TrustLine section below.

CHILD INFORMATION
Please complete the following information about your child(ren) needing care:

Name: Birth Date:
Name: Birth Date:
Name: Birth Date:
Name: Birth Date:

HOW DO I CHANGE MY CHILD CARE PROVIDER?
You can change child care providers at any time by talking to your county worker. You must inform your worker within 30 days of when you change providers. Your county worker can be reached at:

CCP 8 (10/19) Required Form - Substitute Permitted Page 1 of 2

State of California – Health and Human Services Agency California Department of Social Services

The local Child Care Resource and Referral Agency (R&R) can help you find child care options for your family. You can visit or contact them using the information below, or you can call the California Resource and Referral Network at: 1-800-KIDS-793.

R&R Agency Name: Telephone:
Address: Website:

CHILD CARE RULES: TRUSTLINE
Your child care provider must be eligible before they can get paid. An eligible provider is a licensed child care provider, a provider who has cleared the TrustLine fingerprinting and background check process, or a provider who doesn't have to get TrustLine registered. If you choose a child care provider who is required to be TrustLine registered, the county will only pay your provider if they clear TrustLine. Once your child care provider is TrustLine registered, the county will pay for child care for up to 120 days from the date you asked for child care or when the child care began, whichever is later. A grandparent, aunt, or uncle of the child(ren) does not need to be TrustLine registered but must turn in a form called a Declaration of Exemption from TrustLine Registration and Health and Safety Self-Certification (CCP1).

Case Name	Case No.
Client Signature	Date
Case Worker Name	Phone

CCP 8 (10/19) Required Form - Substitute Permitted Page 2 of 2

CCP 8 Mockup For a fully accessible PDF please see [Supporting Documents #3](#)

2.3.3 Add CCP 8 (10/19) to both Template Repositories

The CCP8 (10/19) Form will be added to C-IV and CalSAWS Template Repositories. The form will not have any pre-population aside from that in the standard cover letters. CCP 8 will be added in English, with support for Spanish and threshold languages to be added in a later SCR.

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

2.3.4 Add Form Variable Population

The final section of CCP 8, in which the recipient must sign and date, will populate consistently with the matching section of CCP 7.

Form Body Variables:

The following variables will populate in the last section of the second page of Form CCP 8.

Variable Name	Population	Formatting	Template Repository Population	Populates with Form Generation
Case Name	Will populate with the name of the recipient. This will match the population of the Case Name in the standard cover sheet.	Arial, Size 9	Y	Y
Case Number	Will populate with the case number. This will match the Case Number that populates in the standard cover sheet.	Arial, Size 9	Y	Y
Worker Name	Will populate with the name of the Case Worker. This will match the Worker Name that populates on the cover sheet.	Arial, Size 9	Y	Y
Worker Phone	Will populate with Case Worker's phone number. This will match the Worker Phone Number that populates in the cover sheet.	Arial, Size 9	Y	Y

2.3.5 Add CCP 8 Form Print Options and Mailing Requirements

The following Print Options will be included for the CCP 8 in C-IV and CalSAWS:

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

***Note:** "Save and Print Centrally" and "Re-print Centrally" buttons will be available for CCP 7 and CCP 8 in CalSAWS. It will be up to the user to follow county protocol on whether to use these functionalities.

Mailing Requirements:

Mail-To (Recipient): Address of the Primary Applicant on the Child Care Program

Mailed From (Return): Office Address

Mail-back-to Address: N/A

Outgoing Envelope Type: Standard

Return Envelope Type: None

Additional Requirements:

Special Paper Stock: N/A

Enclosures: No





Electronic Signature: No

Post to YBN/C4Y: Yes

2.3.5 Add CCP 8 Form To Imaging Doc Type Mapping

The MapFormsToDocTypes.xlsx should be updated as follows: CCP 8 = Child Care Provider Information

3 SUPPORTING DOCUMENTS

Ref #	Document	Functional Area	Description	Attachment
1	CCP 7 (10/19)	CW/CC	The updated state version of CCP 7 – CalWORKs Child Care Request Form and Child Care Payment Rules	 CCP 7 (10/19)
2	CCP 7 Changes and Variables	CW/CC	A table that illustrates the changes to CCP 7 in a before/after format.	 CCP 7 Changes
3	CCP 8 (10/19)	CW/CC	The state version of the new form CCP 8 – CalWORKs Stage One Child Care Authorization Form	 CCP 8 (10/19)
4	COVER.xdp	CW/CC	COVER.xdp will be used by both CCP 7 and CCP 8, in both systems.	 COVER.xdp Preview

4 REQUIREMENTS

Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
CAR-1208	The [CalSAWS] shall accommodate and generate State-mandated forms, notices, and NOAs that cannot be changed.	Per ACL 19-99, this SCR revises state-mandated form CCP 7, and adds state-mandated form CCP 8 to the template repository in both systems.

5 MIGRATION IMPACTS

N/A

6 OUTREACH

N/A



California Statewide Automated Welfare System

Design Document

CA-209360 | CIV-104559 CalWORKs: ACL 19-67:
Changes to Asset and Vehicle Value Limits

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Josias Caveto
	Reviewed By	Jason Francis

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/22/2019	1.0	Initial Draft of the artifact	Josias Caveto
12/18/2019	2.0	Moving Correspondence updates to SCR CA-209033 C-IV-104383	Nithya Chereddy
01/03/2020	3.0	Updates on the design per comments	Josias Caveto

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1 OVERVIEW

The current functionality on the CalWORKs (CWs) program defines cash, bonds, mortgages, or similar assets as personal property and it determines personal property items such as retirement and education accounts in accordance to CalFresh rules when determining property, except for treatment of motor-vehicles.

1.1 Current Design

1. CalWORKs families are allowed to retain countable resources in an amount equal to the amount allowed under SNAP administered in California as CalFresh. CalWORKs families have property provisions that allow all members of the family to have no more than \$2,250 in resources, unless an Assistance Unit (AU) member is 60 years of age or older or disabled, for which the case limit is \$3500.
2. Any nonexempt vehicle is evaluated for the vehicle's equity value, not to exceed a limit of \$9,500. Any equity value that exceeds \$9,500 is counted against the AU's resource limit of \$2,250 for a participant who is below 60 years of age, or \$3,500 for an AU with a member 60 years of age or older or disabled.

1.2 Requests

1. Per ACL 19-67, effective June 1, 2020 and annually thereafter (as of 1/1/2021) the resource threshold will increase by an amount equal to the increase in the California Necessities Index for the most recent fiscal year, therefore the CalWORKs resource limits will no longer be based on CalFresh. The maximum asset limit for a CalWORKs AU will be increased from \$2,250 to \$10,000.
 - a. When a CalWORKs AU includes a member who is 60 years of age or older or disabled, the maximum asset limit will be increased from \$3,500 to \$15,000.
2. Effective June 1, 2020 the maximum allowable equity value of any nonexempt motor vehicle will be increased from \$9,500 to \$25,000.
 - a. Any equity value that exceeds \$25,000 is counted against the AU's resource limit of \$10,000, or \$15,000 for an AU that includes a member who is aged 60 years or older or disabled.
3. For each motor vehicle with an equity value of more than \$25,000, the equity value in excess of \$25,000 shall be counted toward the AU's resources.

1.3 Overview of Recommendations

1. Update EDBC rules (CT 335-84 CalWORKs Property Limit) that apply the resource test to perform calculations based on the new limits.
2. Update EDBC rules (CT 335-AN CW Motor Vehicle Disregard) that apply vehicle property limit amounts to perform calculations based on the new limits.

1.4 Assumptions

1. There are no changes impacting the rules regarding restricted accounts.

2. Current CalWORKs rules that exempt the entire value of a motor vehicle in certain situations will remain unchanged.
3. Forms and NOAs will be updated to reflect the updated values as part of the SCRs CA-209033 C-IV-104383.

2 RECOMMENDATIONS

2.1 Eligibility: Update EDBC rules (CT 335-84 CalWORKs Property Limit) that apply the resource test to perform calculations based on the new limits.

2.1.1 Overview

The current resource provisions in CalWORKs regulations (which incorporate SNAP/CalFresh property limits) allow all members of the CWs AU to have no more than \$2,250 in resources unless an AU member is 60 years of age or older or disabled, in which case the limit is \$3,500.

2.1.2 Description of Changes

Per ACL 19-67, effective June 1, 2020 the property limit will increase from \$2,250 to \$10,000 for CWs AUs that do not contain a member who is 60 years of age or older or disabled and from \$3,500 to \$15,000 for CWs AUs that do contain a member who is age 60 years of age or older or disabled.

Property Eligibility	Regular	
Data Month Property:	\$	0.00
Benefit Month Property:	\$	400.00
Property Limit:	\$	10,000.00
Result:	Pass	

Figure 1: CalFresh EDBC Summary

This current Property limit amount is \$2,250. The highlighted line in the figure above represents the future Property limit for a family with an applicant or receipt holder who is younger than 60 years of age.

2.1.3 Programs Impacted

CalWORKs

2.2 Eligibility: Update EDBC rules (CT 335-AN CW Motor Vehicle Disregard) that apply on vehicle property limit amount to perform calculations based on the new limits

2.2.1 Overview

Currently, any non exempt vehicle is evaluated for the vehicle's equity value. Any value that exceeds \$9,500 is counted against the AU's resource.

2.2.2 Description of Changes

Per SB 80, effective June 1, 2020, the disregard will be increased from \$9,500 to \$25,000. Any amount in excess of the disregard will be counted against the AU's property limit.

Property History Detail

Save and ReturnCancel

Change Reason

New Change Reason: *
- Select -

New Reported Date: *

Change Reason:
Intake

Reported Date:
10/25/2019

Property Category:
Motor Vehicle

Property Type:
Automobile

Fair Market Value Source: *
Blue Book

Fair Market Value: *
26,000.00

DMV Class Code:

Year/Asterisk Year:

VLF Value:
Calculate

Licensed: *
Yes

Registered: *
Yes

Status: *
Available

Status Reason:

Non-Purchase Acquisition:

Usage: *
Personal

Begin Date: *
10/01/2019

End Date:

End Date Reason:

Amount Received:

Encumbrance:

Encumbrance Source:

Verified: *
Verified

Save and ReturnCancel

Last Updated On 10/25/2019 11:05:08 AM By: 283735

Figure 2: Property History Detail

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Case Info	Eligibility	Empl. Services	Child Care	Resource Databank	Fiscal	Special Units	Reports	Document Control	Tools
-----------	-------------	----------------	------------	-------------------	--------	---------------	---------	------------------	-------

Property Detail

Close

Owner	Property Type	Ownership	Value	Countable Amount
Pedro, Assuncao	Automobile	100.0%	\$26,000.00	1,000.00
Total				\$1,000.00

Close

This [Type 2](#) page took 0.36 seconds to load.

Figure 3 : Property Detail

Name	DOB	Role	Role Reason	Status	Status Reason
Pedro, Assuncao	01/01/1980	MEM		Active	
Son, Child	01/01/2005	MEM		Active	

Override Program Configuration

▸ Reporting Configuration

▸ Work Eligibility

▸ New IRT Calculation

Property Eligibility	Regular
Data Month Property:	\$ 0.00
Benefit Month Property:	\$ 1,000.00
Property Limit:	\$ 10,000.00
Result:	Pass

CalWORKs Applicant Financial Eligibility Test	Regular
---	---------

Figure 4: CalWORKs Property Eligibility

2.2.3 Programs Impacted

- a. CalWORKs

2.3 Automated Regression Test

2.3.1 Overview

The existing regression test scripts that verify the CalWORKs property limits will need to be updated to account for the increased values. At the time of this design submission, this includes the following script only:

- CW - Property Limits

Note: Actual script impacts will be re-assessed during change implementation.

2.3.2 Description of Changes

Update the existing regression test scripts to verify the updated CalWORKs property limits, as applicable, as of the applicable effective date: June 1, 2020.

3 REQUIREMENTS

3.1 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).	<ol style="list-style-type: none">1. The maximum limit for CalWORKs AUs the household will be increased from \$2,250 to \$10,000.2. The maximum allowed non-exempt vehicle equity value is increased from \$9,500 to \$25,000