

California Statewide Automated Welfare System

# **Design Document**

CA-201483 | DDID 1967 | DDCR 5035 Update EDBC Summary Page for Address Validation

|         | DOCUMENT APPROVAL HISTORY |                    |
|---------|---------------------------|--------------------|
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|         | Reviewed By               | Yale Yee, Amy Gill |

| DATE       | DOCUMENT<br>VERSION | REVISION DESCRIPTION  | AUTHOR     |
|------------|---------------------|---|------------|
| 08/02/2019 | 1.0                 | Initial Document  | Linda Zeng |
| 08/27/2019 | 2.0                 | Updated Sections 2.3, 2.4, and 2.5 for Fiscal (EBT Account Detail, EBT Card Detail, and Issuance Method Detail)             | Duke Vang  |
| 10/10/2019 | 3.0                 | Updated per ClearBest:<br>Section 2.1.3 and Figure 2.3.2.1  | Linda Zeng |
| 2/10/2020  | 4.0                 | Updated screen mockups for Issuance Method, EBT Account Detail, and EBT Card Detail to only include the validation messages | Duke Vang  |
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### 1 OVERVIEW

When a user creates an Electronic Benefits Transfer (EBT) account, if a Payee's mailing address exceeds character limits, C-IV and CalSAWS have different processes for processing account creation.

C-IV prevents the Eligibility Determination and Benefits Calculation (EDBC) from being accepted until the issue is resolved.

CalSAWS allows the end user to accept the EDBC, and the existing business process for Los Angeles County is specified that staff will follow up on the discrepancy and manually correct the address and issue the EBT card.

### 1.1 Current Design

When a user creates an EBT account, the user is able to accept the EDBC when the Payee's mailing address Line 1, Line 2, or City exceeds character limits.

After EDBC is accepted, mailing addresses that exceed character limits are included as part of a daily Issuance Exception Report to Los Angeles County staff members who manually correct the address lines and issue EBT cards individually to Payees.

### 1.2 Requests

Per DDCR 5035, migrate C-IV functionality from C-IV SCR 7296 to CalSAWS where validation messages will be displayed when the Payee mailing address exceeds character limits and will prevent EDBC from being accepted until the issue is resolved.

### 1.3 Overview of Recommendations

The EDBC Summary page will display validation messages that notify the user to modify the Payee mailing address when the address lines exceed character limits.

## 1.4 Assumptions

None

### 2 RECOMMENDATIONS

A validation message will display upon the user clicking the "Accept" button on the EDBC Summary page if the Payee's current mailing address Line 1, Line 2, or City exceeds character limit.

### 2.1 EDBC Summary

### 2.1.1 Overview

Current design of the EDBC Summary page allows the user to accept the EDBC when Payee's mailing address Lines 1, 2, or City exceeds character limits.

Updates will be made so that validation messages will be displayed to the user upon clicking "Accept," prompting them to correct the address lines.

## 2.1.2 [Program] EDBC Summary Mockup

## **CalFresh EDBC Summary**

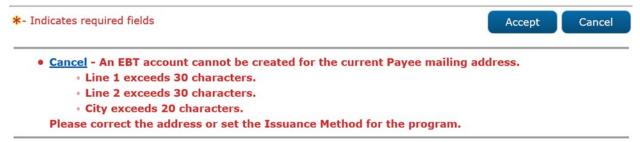


Figure 2.1.1 – [Program] EDBC Summary with Validation Messages Mockup

### 2.1.3 Description of Changes

- Add a new validation upon clicking the "Accept" button on EDBC Summary page when the below conditions are met:
  - a. Program is EBT Eligible.
  - b. There is no Issuance Method set for the program.
  - c. There is no EBT Account for the case.
  - d. The program status on the EDBC being run is Active.
  - e. At least one of the following is true:
    - i. The program Payee's current Mailing Address Line 1 exceeds 30 characters
    - ii. The program Payee's current Mailing Address Line 2 exceeds 30 characters
    - iii. The program Payee's current Mailing Address City exceeds 20 characters

Validation Message:

Cancel - An EBT account cannot be created for the current Payee

mailing address.

- Line 1 exceeds 30 characters.
- Line 2 exceeds 30 characters.
- City exceeds 20 characters.

Please correct the address or set the Issuance Method for the program.

2. The validation will reference the "Cancel" button on the page.

### Note:

- 1. User will not be able to accept EDBC until the corrections are made and an Issuance Exception report will not be generated.
- 2. 'Line 1 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 1 exceeds 30 characters. 'Line 2 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 2 exceeds 30 characters. 'City exceeds 20 characters.' will only be listed if the program Payee's current Mailing Address City exceeds 20 characters.

### 2.1.4 Programs Impacted

- CalWORKs
- CAPI
- CalFresh
- Homeless Permanent
- Homeless Temporary
- Immediate Need
- RCA
- General Assistance/General Relief
- Nutritional Benefit

### 2.1.5 Page Location

• Global: Eligibility

• Local: Customer Information

• Task: Run EDBC

## 2.1.6 Security Updates

N/A

## 2.1.7 Page Mapping

N/A

### 2.1.8 Page Usage/Data Volume Impacts

N/A

### 2.2 [Program] EDBC (Manual)

### 2.2.1 Overview

Current design of the EDBC (Manual) page allows the user to accept the EDBC when Payee's mailing address Lines 1, 2, or City exceeds character limit.

Updates will be made so that validation messages will be displayed to the user upon clicking "Accept," prompting them to correct the address lines.

## 2.2.2 [Program] EDBC (Manual) Mockup

## **CalFresh EDBC (Manual)**

\*- Indicates required fields

Accept

Cancel

- Cancel An EBT account cannot be created for the current Payee mailing address.
  - Line 1 exceeds 30 characters.
  - · Line 2 exceeds 30 characters.
  - · City exceeds 20 characters.

Please correct the address or set the Issuance Method for the program.

Figure 2.2.1 – [Program] EDBC (Manual) Mockup with Validation Messages

### 2.2.3 Description of Changes

- Add a new validation upon clicking the "Accept" button on EDBC Summary page when the below conditions are met:
  - a. Program is EBT Eligible.
  - b. There is no Issuance Method set for the program.
  - c. There is no EBT Account for the case.
  - d. The program status on the EDBC being run is Active.
  - e. At least one of the following is true:
    - i. The program Payee's current Mailing Address Line 1 exceeds 30 characters
    - ii. The program Payee's current Mailing Address Line 2 exceeds 30 characters
    - iii. The program Payee's current Mailing Address City exceeds 20 characters

### Validation Message:

Cancel - An EBT account cannot be created for the current Payee mailing address.

- Line 1 exceeds 30 characters.
- Line 2 exceeds 30 characters.

• City exceeds 20 characters.

Please correct the address or set the Issuance Method for the program.

- 2. The validation will reference the "Cancel" button on the page.
- 3. Update the validation logic to check the current (instead of high-dated) mailing address on the Issuance Method and EBT Account Detail pages.

### Note:

- 1. User will not be able to accept EDBC until the corrections are made and an Issuance Exception report will not be generated.
- 2. 'Line 1 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 1 exceeds 30 characters.
- 3. 'Line 2 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 2 exceeds 30 characters.
- 4. 'City exceeds 20 characters.' will only be listed if the program Payee's current Mailing Address City exceeds 20 characters.'

### 2.2.4 Programs Impacted

- CalWORKs
- CAPI
- CalFresh
- Homeless Permanent
- Homeless Temporary
- Immediate Need
- RCA
- General Assistance/General Relief
- Nutritional Benefit

## 2.2.5 Page Location

• Global: Eligibility

• Local: Customer Information

• Task: Manual EDBC

### 2.2.6 Security Updates

N/A

### 2.2.7 Page Mapping

N/A

### 2.2.8 Page Usage/Data Volume Impacts

N/A

#### 2.3 EBT Account Detail

### 2.3.1 Overview

Update the address validation check on the EBT Account Detail page to not allow the Card Holder's Address Line 1 or Address Line 2 to exceed 30 characters or the City to exceed 20 characters.

### 2.3.2 EBT Account Detail Mockup



Figure 2.3.2.1 – EBT Account Detail Activate

## 2.3.3 Description of Changes

- Add new validation on the "Activate" button on the EBT Account Detail page. The validation will check the Primary Cardholder mailing address effective the current System Date and will display the following validation message if any of the following conditions are true (see figure 2.3.2.1):
  - a. The Primary Cardholder Mailing Address Line 1 exceeds 30 characters.
  - b. The Primary Cardholder Mailing Address Line 2 exceeds 30 characters.
  - c. The Primary Cardholder Mailing Address City exceeds 20 characters.

### Validation Message:

Cancel – An EBT account cannot be created for the current Payee mailing address for one or more of the following reasons:

- Line 1 exceeds 30 characters.
- Line 2 exceeds 30 characters.
- City exceeds 20 characters.

Please correct the Payee mailing address.

Note: 'Line 1 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 1 exceeds 30 characters. 'Line 2 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 2 exceeds 30 characters. 'City exceeds 20 characters.' will only be listed if the program Payee's current Mailing Address City exceeds 20 characters.

### 2.3.4 Page Location

• Global: Case Info

Local: Case SummaryTask: EBT Account List

## 2.3.5 Security Updates

N/A

### 2.3.6 Page Mapping

N/A

## 2.3.7 Page Usage/Data Volume Impacts

N/A

### 2.4 EBT Card Detail

### 2.4.1 Overview

Update the address validation check on the EBT Account Detail page when updating the Cardholder's Mailing Address to not allow Address Line 1 or Address Line 2 to exceed 30 characters or the City to exceed 20 characters.

### 2.4.2 EBT Card Detail Mockup



Figure 2.4.2.1 – EBT Card Detail Update EBT

## 2.4.3 Description of Changes

- Add new validation on the "Update EBT" button on the EBT Card Detail page. The validation will check the Primary Cardholder mailing address effective the current System Date and will throw the following validation message if any of the following conditions are true (see figure 2.4.2.1):
  - a. The Primary Cardholder Mailing Address Line 1 exceeds 30 characters.
  - b. The Primary Cardholder Mailing Address Line 2 exceeds 30 characters.
  - c. The Primary Cardholder Mailing Address City exceeds 20 characters.

### Validation Message:

Update EBT – The Payee mailing address cannot be updated for one or more of the following reasons:

- Line 1 exceeds 30 characters.
- Line 2 exceeds 30 characters.
- City exceeds 20 characters.

Please correct the Payee mailing address.

Note: 'Line 1 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 1 exceeds 30 characters. 'Line 2 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 2 exceeds 30 characters. 'City exceeds 20 characters.' will only be listed if the program Payee's current Mailing Address City exceeds 20 characters.

## 2.4.4 Page Location

Global: Case Info

Local: Case Summary

• Task: EBT Account List

Page: EBT Account Detail

## 2.4.5 Security Updates

N/A

### 2.4.6 Page Mapping

N/A

## 2.4.7 Page Usage/Data Volume Impacts

N/A

### 2.5 Issuance Method

### 2.5.1 Overview

Update the address validation check on the Issuance Method page when setting up a new EBT Account to not allow the Primary Cardholder's Address Line 1 or Address Line 2 to exceed 30 characters or the City to exceed 20 characters.

## 2.5.2 Issuance Method Mockup

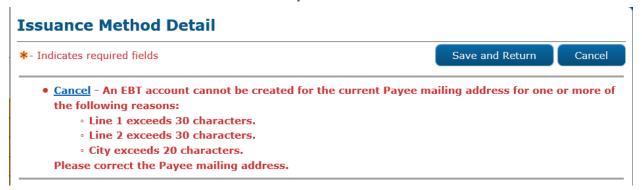


Figure 2.5.2.1 – Issuance Method EBT

### 2.5.3 Description of Changes

- 1. Add new validation on the "Save and Return" button on the Issuance Method Detail page when the Issuance Method is EBT. The validation will check the Primary Cardholder mailing address effective the current System Date and will throw the following validation message if any of the following conditions are true (see figure 2.5.2.1):
  - a. The Primary Cardholder Mailing Address Line 1 exceeds 30 characters.

- b. The Primary Cardholder Mailing Address Line 2 exceeds 30 characters.
- c. The Primary Cardholder Mailing Address City exceeds 20 characters.

### Validation Message:

Cancel – An EBT account cannot be created for the current Payee mailing address for one or more of the following reasons:

- Line 1 exceeds 30 characters.
- Line 2 exceeds 30 characters.
- City exceeds 20 characters.

Please correct the Payee mailing address.

Note: 'Line 1 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 1 exceeds 30 characters. 'Line 2 exceeds 30 characters.' will only be listed if the program Payee's current Mailing Address Line 2 exceeds 30 characters. 'City exceeds 20 characters.' will only be listed if the program Payee's current Mailing Address City exceeds 20 characters.

## 2.5.4 Page Location

• Global: Case Info

Local: Case Summary

• Task: Case Summary

• Page: Program Detail

## 2.5.5 Security Updates

N/A

## 2.5.6 Page Mapping

N/A

### 2.5.7 Page Usage/Data Volume Impacts

N/A

## 3 REQUIREMENTS

### 3.1 Migration Requirements

DDID # REQUIREMENT TEXT

Contractor Assumptions How Re

How Requirement Met

1967

As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twentynine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements.

The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement.

As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process.

- Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management.
- For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the **CONSORTIUM** and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones.

C-IV functionality is migrated and validation messages are added at EDBC, Manual EDBC, EBT Account Detail, EBT Card Detail, and Issuance Method to modify Payee mailing address Line 1, Line 2 or City if it exceeds character limits.



California Statewide Automated Welfare System

# **Design Document**

CA-58624 | DDID 1967 Exempt Retirement Plan Property Dropdown

| Cal <b>SAWS</b> |             | DOCUMENT APPROVAL HISTORY |  |
|-----------------|-------------|---------------------------|--|
|                 | Prepared By | Yale Yee                  |  |
|                 | Reviewed By | Amy Gill                  |  |

| DATE       | DOCUMENT<br>VERSION | REVISION DESCRIPTION  | AUTHOR   |
|------------|---------------------|---|----------|
| 08/29/2019 | 1.0                 | Initial Draft   | Yale Yee |
| 2/17/2020  | 1.1                 | Added Content Revision for the order of items in the dropdown in 2.1.3. | Yale Yee |
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### 1 OVERVIEW

Certain retirement plan property types will be exempt in CalWORKs (CW), Refugee Cash Aid (RCA), Diversion (DV), Immediate Need (IN), Homeless – Temp (HT), and Homeless – Perm (HP) programs.

## 1.1 Current Design

'Retirement Plans' is a generalized Liquid Property type, and not specifically defined (i.e. 401(k), 403(b), 457, 529, IRA and ESA). Retirement plan properties are exempt in CW, RCA, DV, IN, HT, and HP.

## 1.2 Requests

Per ACIN I-58-15, retirement plan property types (401 (k), 403 (b), 457, 529, IRA and ESA) will be excluded for CW recipients and applicants. Migrate the functionality from CIV SCR 397 to CalSAWS to add a new dropdown for Retirement Plan Type.

### 1.3 Overview of Recommendations

- 1. A new dropdown will be added to the Liquid Property Detail page.
- 2. A validation will display on Run EDBC if the new dropdown is not populated.

## 1.4 Assumptions

1. The existing logic for retirement plan properties will remain the same for all other programs, regardless if a Retirement Plan Type is selected.

## 2 RECOMMENDATIONS

A new dropdown will be added for the different types of retirement plans.

## 2.1 Liquid Property Detail

### 2.1.1 Overview

A new dropdown field, Retirement Plan Type, will be added when Retirement Plans is selected as the Liquid Property Type.

## 2.1.2 Liquid Property Detail Mockup

## **Liquid Property Detail**

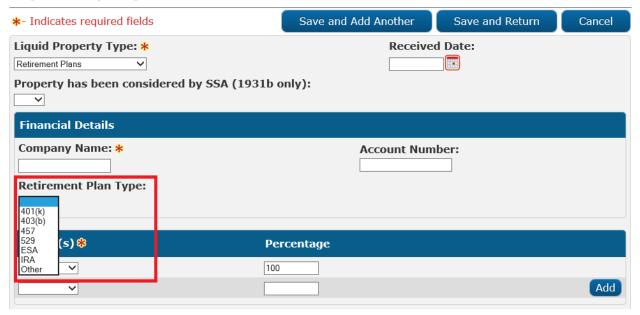


Figure 2.1.1 – Retirement Plan Type Dropdown (Edit mode)

## **Liquid Property Detail**

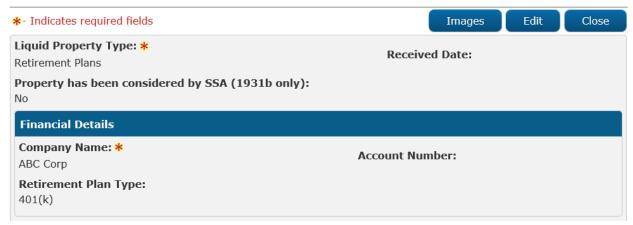


Figure 2.2.1 – Retirement Plan Type (View mode)

## **Liquid Property Detail**

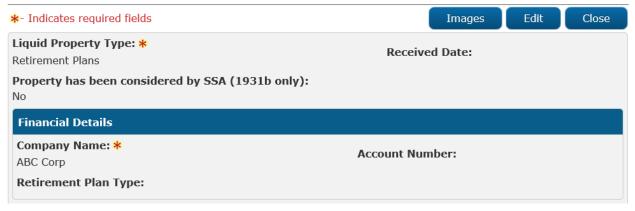


Figure 2.3.1 – Retirement Plan Type (No Selection)

## 2.1.3 Description of Changes

- On the Liquid Property Detail Page under the Financial Details section, add a new non-required field called Retirement Plan Type with a dropdown that consists of seven Retirement Plan Types, in the following order:
  - a. 401(k)
  - b. 403(b)
  - c. 457
  - d. 529
  - e. IRA
  - f. ESA
  - g. IRA
  - h. Other

2. This field will display dynamically when Retirement Plans is the selected option in the Liquid Property Type field.

### 2.1.4 Page Location

• Global: Eligibility

• Local: Customer Information

• Task: Property

## 2.1.5 Security Updates

N/A

## 2.1.6 Page Mapping

Create a PMCR for the new field.

## 2.1.7 Page Usage/Data Volume Impacts

N/A

### 2.2 Run EDBC

### 2.2.1 Overview

A validation will be added to the Run EDBC page when a Retirement Plan Type is not selected with a Retirement Plan.

### 2.2.2 Run EDBC Mockup

### **Run EDBC**



Figure 2.1.1 – Retirement Plan Property Validation

## 2.2.3 Description of Changes

- Add a validation to the Run EDBC page to display when there exists a
  pending or active person in the CW, RCA, DV, IN, HT, or HP program
  with a liquid property of type 'Retirement Plans' without a 'Retirement
  Plan Type' specified.
  - a. The validation message will read as: "[Person] has a
     Retirement Plan without a specified Retirement Plan Type."
     The text will be in a red font and will not prevent EDBC from being run.

## 2.2.4 Page Location

• Global: Eligibility

• **Local**: Customer Information

• Task: Run EDBC

## 2.2.5 Security Updates

N/A

## 2.2.6 Page Mapping

N/A

## 2.2.7 Page Usage/Data Volume Impacts

N/A

## 2.3 Updated EDBC for Retirement Plan Type

### 2.3.1 Overview

EDBC will exempt the Retirement Plan Type of '401 (k), 403(b), 457, 529, IRA and ESA'.

EDBC will not exempt the Retirement Plan Type of 'Other'.

Existing EDBC logic to exempt retirement plans will be updated.

## 2.3.2 Description of Changes

- 1. Update EDBC to not exempt Retirement Plan Type of 'Other'.
- 2. Update EDBC to exempt Retirement Plan types of '401(k), 403(b), 457, 529, IRA and ESA'.
- 3. Update EDBC to not exempt the Liquid Property Type if a Retirement Plan type is not selected.

## 2.3.3 Programs Impacted

CW, RCA, DV, IN, HT, HP

## 2.3.4 Performance Impacts

None

## 3 REQUIREMENTS

## 3.1 Migration Requirements

| DDID# | REQUIREMENT TEXT   | Contractor Assumptions  | How Requirement<br>Met   |
|-------|--|---|--|
| 1967  | As Side-by-Side sessions were focused on comparing the front end (online pages) functionality of the application, the CONTRACTOR shall budget an allowance of twentynine thousand, one hundred fifty-five hours (29,155) to accommodate for any Unforeseen differences in the code base that result in additional requirements.  The requirements for the allowance of hours must be finalized and approved by the CONSORTIUM for the CONTRACTOR to meet design, build and System Test milestones, subject to the requirements meeting requirements in the LRS Agreement.  As the requirements for the designated SCRs are identified, the SCRs will be calculated by the CONTRACTOR and reviewed and prioritized by the CONTRACTOR and reviewed and prioritized by the CONSORTIUM for approval through the County Change Control Board process. | Estimates will include the necessary Tasks in the software development lifecycle required to implement the CalSAWS DD&I SCR including deployment and change management.      For the new requirements to be included with CalSAWS DD&I UAT preparation activities (targeted to begin April 2021 for C-IV), the requirements for the unforeseen Differences allowance hours must be finalized. approved by the CONSORTIUM and added to the CalSAWS DD&I SOR by July 1, 2020 for the CONTRACTOR to meet design, build and System Test milestones. | A new non-required field called Retirement Plan Type with a dropdown that consists of seven Retirement Plan Types ( 401 (k), 403 (b), 457, 529, IRA, ESA, and Other ) is added. EDBC is excluding these retirement types (except Other) in CW, RCA, DV, IN, HT, and HP |

### 4 OUTREACH

### 4.1 Lists

Provide a list of currently pending or active CW, RCA, DV, IN, HT, and HP persons with a liquid property of type 'Retirement Plans' without a 'Retirement Plan Type' specified.

**List Name:** Persons\_With\_Retirement\_Plans **List Criteria:** Currently pending or active CW, RCA, DV, IN, HT, and HP persons with a liquid property of type 'Retirement Plans' without a 'Retirement Plan Type' specified.

### **Standard Columns:**

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

### Additional Column(s):

• **Frequency:** One time

The list will be posted to the following location:

| System  | Path  |
|---------|---|
| CalSAWS | CalSAWS Web Portal>System Changes>SCR and SIR Lists>2020>CA-58624 |



California Statewide Automated Welfare System

# **Design Document**

CA-207235 | DDID 1172, 1240, 1859 Migrate CMSP Functionality

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|---------|---------------------------|----------|
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|            |                     |  |                      |
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### 1 OVERVIEW

The County Medical Services Program (CMSP) provides health coverage for uninsured low-income, indigent adults that are not otherwise eligible for other publicly funded health care programs.

CMSP is the "program of last resort". Therefore, an applicant must be proven ineligible for all other programs (such as Medi-Cal) before qualifying for CMSP.

CMSP is current administered by 35 Migration counties.

## 1.1 Current Design

CMSP functionality is not enabled in CalSAWS.

## 1.2 Requests

Per DDID 1859, migrate the C-IV CMSP functionality, which includes eligibility, online, and batch functionality for the applicable Migration Counties.

### 1.3 Overview of Recommendations

- 1. Update CMSP data collection on the following pages:
  - a. New Programs Detail
  - b. Medi-Cal Detail
  - c. Medi-Cal Person Detail
  - d. Medi-Cal Person History
  - e. Person History Detail
  - f. Eligibility Non-Compliance Detail
  - g. Other Program Assistance Detail
  - h. Medi-Cal EDBC Summary, Override, and Manual EDBC pages
  - i. Run EDBC
- 2. Migrate CMSP Eligibility functionality from C-IV.
- 3. Migrate CMSP Batch functionality from C-IV.

### 1.4 Assumptions

- 1. The CalSAWS code is based on the C-IV code from the 13.12d release and includes all CMSP functionality included in that release. The purpose of this SCR is to migrate CMSP changes since the C-IV 13.12d release to CalSAWS.
  - a. This code includes Path2Health.
- 2. CMSP Notices of Action will be added with DDID 1062 (CA-207384).
- 3. CMSP Reports will be added with DDID 1056 (CA-207389).
- 4. State Interface File Exchange testing will be performed with DDID 1970.
- 5. The following CMSP negative actions reasons are available in CalSAWS:
  - a. Does Not Live in County (CMSP)
  - b. Moved Out of County (CMSP)
  - c. Requested Disc. (CMSP) Add Person
  - d. Requested Disc. (CMSP) Reapply with Budget Change
  - e. Requested Disc. (CMSP) Verbal

- 6. The following CMSP aid codes are available in CalSAWS:
  - a. 84 CMSP Full No SOC
  - b. 85 CMSP Full SOC
  - c. 88 CMSP Non-Fed Full No SOC
  - d. 89 CMSP Non-Fed Full SOC
  - e. 50 CMSP Restricted
  - f. 8F CMSP LTC
- 7. The following CMSP test types on the Medi-Cal EDBC (regular and manual) are available in CalSAWS:
  - a. CMSP Income
  - b. CMSP Income Sneede
- 8. The following validation that displays, when the user selects a CMSP aid code when the person does not have an open CMSP application, exists in CalSAWS for manual and regular Medi-Cal EDBC:
  - a. "Aid Code Cannot override to CMSP aid code without an open CMSP application."

### 2 RECOMMENDATIONS

## 2.1 Update CMSP Indicator for Yolo County

### 2.1.1 Overview

A column in a codes table (CT15) indicates whether a specific county is participating in CMSP.

### 2.1.2 Description of Changes

1. Update the CMSP indicator for Yolo County to 'Y'.

Note: The following counties are currently indicated as participating in CMSP:

- Alpine
- Amador
- Butte
- Calaveras
- Colusa
- Del Norte
- El Dorado
- Glenn
- Humboldt
- Imperial
- Inyo
- Kings

- Lake
- Lassen
- Madera
- Marin
- Mariposa
- Mendocino
- Modoc
- Mono
- Napa
- Nevada
- Plumas
- San Benito

- Shasta
- Sierra
- Siskiyou
- Solano
- Sonoma
- Sutter
- Tehama
- Trinity
- Tuolumne
- Yuba

#### 2.1.3 Programs Impacted

**CMSP** 

#### 2.1.4 Performance Impacts

N/A

#### 2.2 CMSP Application Indicator on New Programs Detail

#### 2.2.1 Overview

The CMSP Application indicator is used to create a CMSP Application when creating a Medi-Cal Program.

#### 2.2.2 New Programs Detail Mockup

#### **New Programs Detail**

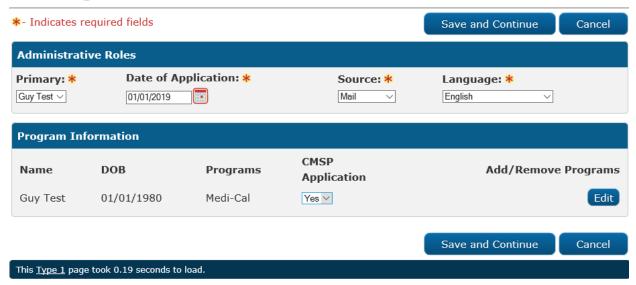


Figure 2.2.1 – CMSP Application Indicator on New Programs Detail page

#### 2.2.3 Description of Changes

1. Add a non-mandatory CMSP Application Indicator with values of 'Yes' and 'No'. The default value is 'No'. The indicator will display when the Medi-Cal program is selected, and the county opted in for CMSP functionality.

#### 2.2.4 Page Location

Global: Case Info

Local: N/A

Task: N/A

### 2.2.5 Security Updates

N/A

### 2.2.6 Page Mapping

Create a PMCR for the CMSP Application field.

#### 2.2.7 Page Usage/Data Volume Impacts

N/A

#### 2.3 CMSP Indicator on Medi-Cal Detail

#### 2.3.1 Overview

The CMSP indicator displays information on whether an active person on a Medi-Cal program is currently receiving CMSP.

#### 2.3.2 Medi-Cal Detail Mockup

#### Medi-Cal Detail

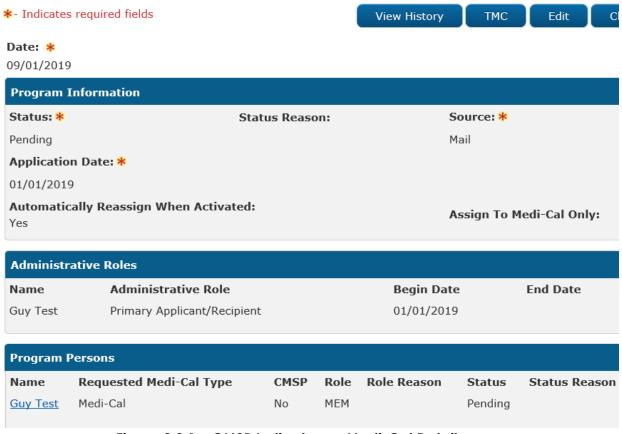


Figure 2.3.1 – CMSP Indicator on Medi-Cal Detail page

#### 2.3.3 Description of Changes

1. Add the CMSP indicator under the Program Persons section on the Medi-Cal Detail page. The indicator will be 'Yes' when an active person on a Medi-Cal program is currently receiving CMSP. Otherwise, the indicator will be 'No'.

#### 2.3.4 Page Location

Global: Case Info

Local: N/A
Task: N/A

#### 2.3.5 Security Updates

N/A

#### 2.3.6 Page Mapping

Create a PMCR for the CMSP field.

#### 2.3.7 Page Usage/Data Volume Impacts

N/A

#### 2.4 CMSP Application Creation on Medi-Cal Person Detail

#### 2.4.1 Overview

The CMSP Application Field allows the user to add a CMSP application after the program was created. And, the application status can be set by the user to set the status of the CMSP application.

The system will display a validation if the user does not select the same person's name when creating a CMSP application.

#### 2.4.2 Medi-Cal Person Detail Mockup

#### **Medi-Cal Person Detail**

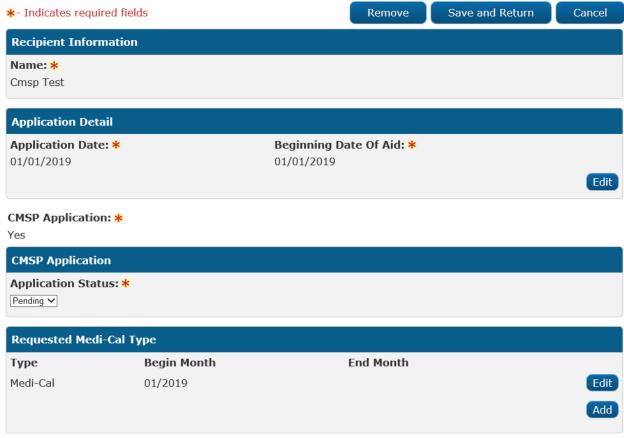


Figure 2.4.1 – CMSP Application/Application Status on Medi-Cal Person Detail page

#### **Medi-Cal Person Detail**



Figure 2.4.2 – Validation to select a CMSP person

#### 2.4.3 Description of Changes

- 1. Add a mandatory CMSP Application field with the values of 'Yes' and 'No'. The default value is 'No'. Selecting 'Yes' will create the CMSP application upon Save and Return of the page.
  - a. The field will become a label when 'Yes' is selected after the CMSP application has been created.
- 2. Add a dynamic dropdown field Application Status with the values of 'Pending' and 'Denied'. The default value is 'Pending'. The field will display

- and will be mandatory when the CMSP Application value is 'Yes,' after the CMSP Application is created.
- 3. Update the Medi-Cal Person Detail page to display the following message when the user does not select the same person's name when creating a CMSP application.

"Name – Persons selected in the CMSP Application field must also be selected in the Name field."

#### 2.4.4 Page Location

Global: Case Info/Eligibility

Local: Case Summary
Task: Case Summary

#### 2.4.5 Security Updates

N/A

#### 2.4.6 Page Mapping

Create a PMCR for the new CMSP fields.

#### 2.4.7 Page Usage/Data Volume Impacts

N/A

#### 2.5 CMSP Person Application on Medi-Cal Person History

#### 2.5.1 Overview

If a CMSP application was created, the CMSP application will display on this page.

#### 2.5.2 Medi-Cal Person History Mockup

#### **Medi-Cal Person History**

 Name
 SSN
 DOB

 Guy Test
 111-11-1113
 01/01/1980

 Person Application History

| Person | Person Application History |                       |          |        |             |  |  |
|--------|----------------------------|-----------------------|----------|--------|-------------|--|--|
| App#   | Application Date           | Beginning Date of Aid | Туре     | Action | Action Date |  |  |
| 1      | 01/01/2019                 | 01/01/2019            | Medi-Cal | Pended | 08/07/2019  |  |  |
| 1      | 01/01/2019                 | 01/01/2019            | CMSP     | Pended | 08/07/2019  |  |  |

| Person | Person Detail History |             |         |               |             |           |  |  |
|--------|-----------------------|-------------|---------|---------------|-------------|-----------|--|--|
| App#   | Role                  | Role Reason | Status  | Status Reason | Begin Month | End Month |  |  |
| 1      | MEM                   |             | Pending |               | 01/2019     |           |  |  |

Close

Figure 2.5.1 – CMSP Person Application on Medi-Cal Person History page

#### 2.5.3 Description of Changes

1. Add the CMSP person application on the Medi-Cal Person History page. The column 'Type', on the person application, will display 'CMSP' when the person has a CMSP Application with an indicator of 'Yes.'

#### 2.5.4 Page Location

Global: Case Info/Eligibility

**Local:** Case Summary **Task:** Case Summary

#### 2.5.5 Security Updates

N/A

#### 2.5.6 Page Mapping

N/A

#### 2.5.7 Page Usage/Data Volume Impacts

N/A

#### 2.6 CMSP Person Application on Person History Detail

#### 2.6.1 Overview

This page provides the details of the CMSP application.

#### 2.6.2 Person History Detail Mockup

#### **Person History Detail**

|               |            |                 |                |           | Close      |
|---------------|------------|-----------------|----------------|-----------|------------|
| Program Type: | Ар         | plication Date: |                | Арр #:    | Туре:      |
| Medi-Cal      | 01/        | 01/2019         |                | 1         | CMSP       |
| Person:       | DO         | B:              |                | SSN:      |            |
| Guy Test      | 01/        | 01/1980         |                | 111-11-11 | 13         |
| Event Date    | Event Type | Reason          | Effective Date |           | Updated By |
| 08/07/2019    | Pended     | <u> </u>        | 01/01/2019     |           | 273953     |

Figure 2.6.1 – CMSP Person Application on Person History Detail

Close

#### 2.6.3 Description of Changes

1. Add the CMSP application Type details. The application type will display 'CMSP' when the person has a CMSP Application with an indicator of 'Yes.'

#### 2.6.4 Page Location

Global: Case Info/Eligibility

Local: Case Info
Task: Case Info

#### 2.6.5 Security Updates

N/A

#### 2.6.6 Page Mapping

N/A

#### 2.6.7 Page Usage/Data Volume Impacts

N/A

#### 2.7 CMSP Selection Field on Eligibility Non-Compliance Detail

#### 2.7.1 Overview

A mandatory MC/CMSP field will dynamically display for certain combinations of non-compliances.

# 2.7.2 Eligibility Non-Compliance Detail Mockup **Eligibility Non-Compliance Detail**

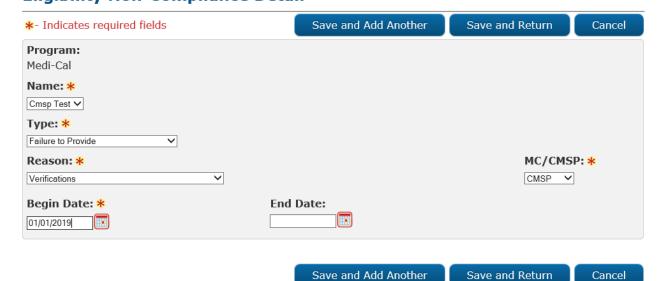


Figure 2.7.1 – CMSP Selection Field on Eligibility Non-Compliance Detail

#### 2.7.3 Description of Changes

1. Add a mandatory MC/CMSP field to dynamically appear when the following combination of non-compliances is selected:

| Туре                   | Reason  |
|------------------------|---|
| Drug/Fleeing Felon     | Fleeing Felon                                 |
| Failure to Provide     | County Residence                              |
| Failure to Provide     | Eligibility Forms                             |
| Failure to Provide     | Verifications                                 |
| Procedural Requirement | Didn't Apply for Other Health Care (CMSP)     |
| Procedural Requirement | Didn't Cooperate with Medi-Cal Linkage (CMSP) |

The values in the dropdown will be 'MC' and 'CMSP'. The default value is 'Select'.

The field will display for Medi-Cal non-compliances.

#### 2.7.4 Page Location

Global: Eligibility

Local: Customer Information

Task: Non-Compliance

#### 2.7.5 Security Updates

N/A

#### 2.7.6 Page Mapping

Create a PMCR for the MC/CMSP field.

#### 2.7.7 Page Usage/Data Volume Impacts

N/A

# 2.8 CMSP EDBC Determination on Medi-Cal EDBC Summary – CMSP Property and Income Budget

#### 2.8.1 Overview

The Medi-Cal EDBC Summary page displays the determination of CMSP, including the property test and income budget information.

# 2.8.2 Medi-Cal EDBC Summary Mockup Medi-Cal EDBC Summary

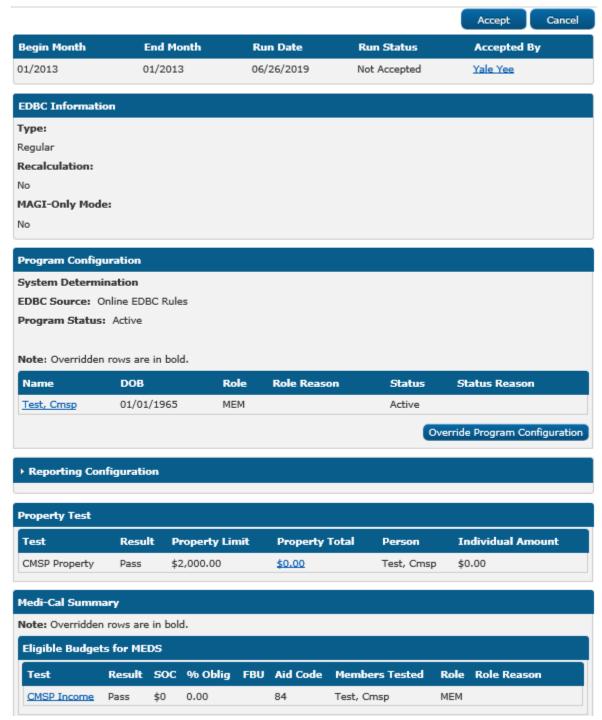


Figure 2.8.1 – CMSP EDBC Determination on Medi-Cal EDBC Summary page

#### 2.8.3 Description of Changes

- Add CMSP Property determination to the Medi-Cal EDBC Summary. The CMSP Property Test will display in the Property Test section. The Property Total hyperlink will navigate to the details of the property on the existing Property Detail page.
- 2. Add CMSP Income determination to the Medi-Cal EDBC Summary. The CMSP Income test will be under the Eligible Budgets for MEDS section. The CMSP Income hyperlink will navigate to the details on the income on the Medi-Cal EDBC CMSP Income page.

#### 2.8.4 Page Location

Global: Eligibility

**Local:** Customer Information

Task: Run EDBC

#### 2.8.5 Security Updates

N/A

#### 2.8.6 Page Mapping

N/A

#### 2.8.7 Page Usage/Data Volume Impacts

N/A

#### 2.9 CMSP Income Determination on Medi-Cal EDBC - CMSP Income

#### 2.9.1 Overview

The CMSP Income page displays details on the CMSP Income determination.

#### 2.9.2 Medi-Cal EDBC – CMSP Income Mockup

#### Medi-Cal EDBC - CMSP Income

|                      |            |            |              |             | Close    |
|----------------------|------------|------------|--------------|-------------|----------|
| Begin Month          | End Month  | Run Date   | Run Status   | Accepted By |          |
| 01/2013              | 01/2013    | 06/26/2019 | Not Accepted | Yale Yee    |          |
| Income Determina     | ation      |            |              |             |          |
| Unearned Income      |            |            |              | \$          | 0.00     |
| Unearned Income D    | eductions  |            |              | -           | 0.00     |
| Net Unearned Incom   | ne         |            |              | =           | 0.00     |
| Earned Income        |            |            |              | \$          | 0.00     |
| Earned Income Dedu   | uctions    |            |              | -           | 0.00     |
| Net Earned Income    |            |            |              | =           | 0.00     |
| Total Net Income     |            |            |              | \$          | 0.00     |
| Combined Income De   | eductions  |            |              | -           | 0.00     |
| Income Adjustments   |            |            |              | +           | 0.00     |
| Allocation and Other | Deductions |            |              | -           | 0.00     |
| Total Net Nonexempt  | t Income   |            |              | =           | 0.00     |
| Unit Size            |            |            |              |             | 1        |
| 300% FPL Limit       |            |            |              | \$          | 3,123.00 |
| 300% Test            |            |            |              |             | Pass     |
| 138% FPL Limit       |            |            |              | \$          | 1,397.00 |
| 138% Test            |            |            |              |             | Pass     |
| Maintenance Need     |            |            |              | \$          | 600.00   |
| Share of Cost        |            |            |              | \$          | 0.00     |

Figure 2.9.1 – CMSP Income Determination on Medi-Cal EDBC – CMSP Income

#### 2.9.3 Description of Changes

Add the Medi-Cal EDBC – CMSP Income page. This page will display the following CMSP Budget details:

- 1. Unearned Income (hyperlink will navigate to the existing EDBC Person Line Item Detail MC Unearned Income page)
- 2. Unearned Income Deductions (hyperlink will navigate to the existing EDBC Person Line Item Detail MC Unearned Income Deductions page)
- 3. Net Unearned Income
- 4. Earned Income (hyperlink will navigate to the existing EDBC Person Line Item Detail MC Earned Income page)
- 5. Earned Income Deductions (hyperlink will navigate to the existing EDBC Person Line Item Detail MC Earned Income Deductions page)

- 6. Net Earned Income
- 7. Total Net Income
- 8. Combined Income Deductions (hyperlink will navigate to the existing EDBC Person Line Item Detail Combined Income Deductions page)
- 9. Income Adjustments (hyperlink will navigate to the existing EDBC Person Line Item Detail Income Adjustments page)
- 10. Allocation and Other Deductions (hyperlink will navigate to the existing EDBC Person Line Item Detail Allocation and Other Deductions page)
- 11. Total Net Nonexempt Income
- 12. Unit Size
- 13. 300% FPL Limit
- 14. 300% Test
- 15. 138% FPL Limit
- 16. 138% Test
- 17. Maintenance Need (hyperlink will navigate to the existing EDBC Person Line Item Detail Maintenance Need page)
- 18. Share of Cost

#### 2.9.4 Page Location

Global: Eligibility

Local: Customer Information

Task: Run EDBC

#### 2.9.5 Security Updates

N/A

#### 2.9.6 Page Mapping

Create a PMCR for the new page.

#### 2.9.7 Page Usage/Data Volume Impacts

N/A

#### 2.10 CMSP 'Test' Types on Medi-Cal EDBC Override Detail

#### 2.10.1 Overview

This page allows the user to add details to an overridden Medi-Cal Test type. The page is accessed by clicking the 'Add' or 'Override' button on the Medi-Cal EDBC Override List page, which is accessed from the 'Override Medi-Cal Summary' button on the Medi-Cal EDBC Summary page. The system will display a validation if the user selects a CMSP aid code when the person does not have an open CMSP application.

#### 2.10.2 Medi-Cal EDBC Override Detail Mockup

#### **Medi-Cal EDBC Override Detail**



Figure 2.10.1 – Medi-Cal EDBC Override Detail page

#### 2.10.3 Description of Changes

- Add a mandatory Certification Determination Month (CDM) and nonmandatory Certification End Date (CED) field with calendar icons.
  - a. The CDM and CED fields are dynamic when the user adds a 'Test' type of 'CMSP Income' or 'CMSP Income Sneede.'

#### 2.10.4 Page Location

Global: Eligibility

**Local:** Customer Information

Task: Run EDBC

#### 2.10.5 Security Updates

N/A

#### 2.10.6 Page Mapping

N/A - CDM and CED fields are already included in Page Mapping.

#### 2.10.7 Page Usage/Data Volume Impacts

N/A

#### 2.11 Medi-Cal EDBC Detail (Manual)

#### 2.11.1 Overview

This page allows the user to add a CMSP Test type on a Manual EDBC. The page is accessed from the 'Add' button on the Medi-Cal EDBC List (Manual) page, which is accessed from the 'Set Medi-Cal Summary' button on the Medi-Cal EDBC Summary (Manual) page.

#### 2.11.2 Medi-Cal EDBC Detail (Manual) Mockup

#### Medi-Cal EDBC Detail (Manual)

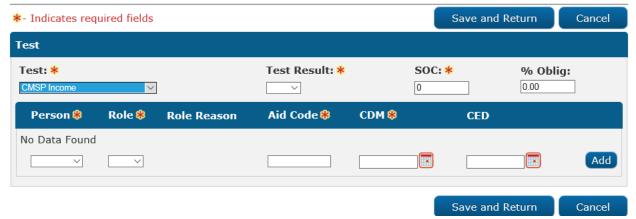


Figure 2.11.1 – Medi-Cal EDBC Detail (Manual) page

#### 2.11.3 Description of Changes

- 1. Add a mandatory Certification Determination Month (CDM) and non-mandatory Certification End Date (CED) field with calendar icons.
  - a. The CDM and CED fields are dynamic when the user adds a 'Test' type of 'CMSP Income' or 'CMSP Income Sneede.'

#### 2.11.4 Page Location

Global: Eligibility

Local: Customer Information

Task: Manual EDBC

#### 2.11.5 Security Updates

N/A

#### 2.11.6 Page Mapping

N/A - CDM and CED fields are already included in Page Mapping.

#### 2.11.7 Page Usage/Data Volume Impacts

N/A

#### 2.12 CMSP Run Reasons on Run EDBC page

#### 2.12.1 Overview

CMSP Run Reasons will display on the Run EDBC page.

#### 2.12.2 Run Reasons Dropdown Mockup

#### **Run EDBC**

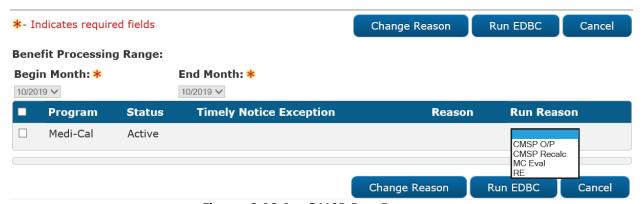


Figure 2.12.1 – CMSP Run Reasons

#### 2.12.3 Description of Changes

- 1. Add the following CMSP Run Reasons on the Run EDBC page. These run reasons are not available for Manual EDBCs.
  - a. CMSP O/P

i. This run reason is used to create a Read-Only EDBC, to allow the user to view a potential overpayment for CMSP.

#### b. CMSP Recalc

 CMSP benefits are locked when the Certification End Date (CED) is established after the user runs and saves the Certification Determination Month (CDM). The user can select this run reason to recalculate the benefits.

#### c. MC Eval

i. When a person's CMSP application is approved, their MC application is denied. If a person then gains potential eligibility to MC, the EDBC will fail both MC and CMSP. The 'MC Eval' run reason allows the system to determine the person to be eligible to MC instead of failing them for 'CMSP Applicant Only.' See Figure 2.12.2 for reference below, which is an example of the Medi-Cal EDBC Summary page for a failed CMSP and Medi-Cal budget.

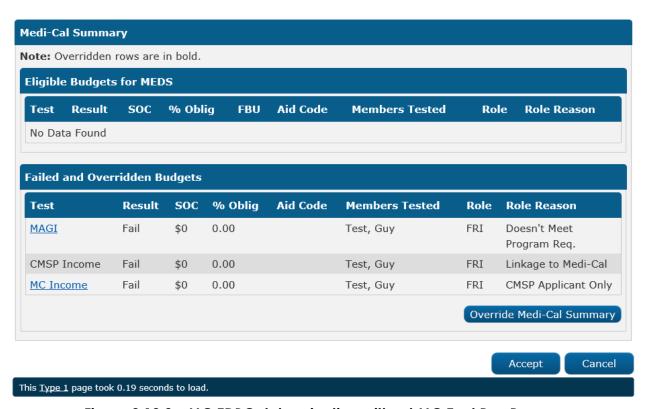


Figure 2.12.2 – MC EDBC determination without MC Eval Run Reason

#### 2.12.4 Page Location

Global: Eligibility

**Local:** Customer Information

Task: Run EDBC

#### 2.12.5 Security Updates

N/A

#### 2.12.6 Page Mapping

N/A

#### 2.12.7 Page Usage/Data Volume Impacts

N/A

# 2.13 C-IV SCR 50363 Solution - CO-78 : CMSP: ACL 14-02 & ACL 14-08 CMSP Policy

#### 2.13.1 Overview

Effective January 1, 2014, CMSP regulations further clarify existing policy that CMSP benefit coverage is in excess of and secondary to any other form of health care benefits coverage. As a part of this clarification beneficiaries who are or who become eligible for MC, Medicare and coverage available under Covered CA with public subsidies shall not be eligible or continue to be eligible under CMSP. However, beginning January 2014 and for each year following, an application for CMSP shall be considered "subject to the Covered CA open enrollment period" when the application is pending disposition. When applications are submitted during a Covered California open enrollment period, applicants for CMSP that are not otherwise eligible for MC can be CMSP eligible.

#### 2.13.2 Description of Changes

Migrate functionality from C-IV SCR 50363:

- 1. Prevent CMSP for persons non-compliant with APTC.
  - a. Add a Medi-Cal non-compliance type of "Non-Payment of Premium" and reason of "Failure to Enroll/Pay APTC Premiums". Note: The "Failure to Enroll/Pay APTC Premiums" non-compliance reason will only be displayed when a Medi-Cal non-compliance type of "Non-Payment of Premium" is selected.
  - b. Add a CMSP budget level closure reason of "Failure to Enroll/Pay APTC Premiums".
  - c. Update EDBC to apply this closure reason to any CMSP budget person who has the corresponding non-compliance. This change is effective for the benefit month of January 2014.
- 2. Add a Medi-Cal Negative Action Reason of "Gets APTC" that will only appear on or after the January 2014 benefit month.

#### 2.13.3 Programs Impacted

**CMSP** 

#### 2.13.4 Performance Impacts

N/A

# 2.14 C-IV SCR 776 Solution - CO-068: ACWDL 14-28 - Eliminate Deprivation as a Medi-Cal Non-Financial Eligibility Criteria

#### **2.14.1 Overview**

Effective January 1, 2014, linkage as, or through, a child/unborn no longer requires that the child/unborn be deprived. Deprivation is no longer required for CMSP.

#### 2.14.2 Description of Changes

- 1. Migrate functionality from C-IV SCR 776 to update the deprivation logic for CMSP effective 01/01/2014:
  - Remove the deprivation of a child as a condition for determining if the child is considered excluded.

#### 2.14.3 Programs Impacted

**CMSP** 

#### 2.14.4 Performance Impacts

N/A

#### 2.15 C-IV SCR 1126 Solution - CO-089: CMSP: Modify Aid Code 50/Asset Test

#### **2.15.1 Overview**

The CMSP Governing Board approved policy changes for CMSP in:

- Property Test limits
- Share of Cost (SOC) calculation
- Enrollment period
- Aid Codes
- Income Cap

#### 2.15.2 Description of Changes

Migrate functionality from C-IV SCR 1126 to update CMSP EDBC logic with the following changes effective for CMSP applications with the first aided month for the application on or after May 01, 2016:

- 1. Increase the maximum income level for CMSP participation to 300% of the Federal Poverty Limit (FPL).
- 2. Waive the property test for applicants with the income at or below 138% of the FPL.
- 3. For the applicants with income above 138% of the FPL and less than or equal to 300% of the FPL, modify the property limits of the Property Test as below:
  - \$20,000 for one person
  - \$30,000 for two persons
  - Increase limit by \$1,500 for each additional person
- 4. Modify the SOC calculation logic so that the beneficiaries with incomes at or below 138% of the FPL will not have a SOC.
- 5. Modify the SOC calculation logic so that the beneficiaries with incomes greater than 138% of the FPL and less than or equal to 300% of the FPL have SOC.
- 6. Modify the Medi-Cal EDBC CMSP Income page to dynamically display the correct percentage descriptions for the FPL Limits and Tests. When the CMSP changes are effective, the display will show 138% and 300% instead of 100% and 200%.

#### **Medi-Cal EDBC - CMSP Income**

|                      |            |            |              |            | Close    |
|----------------------|------------|------------|--------------|------------|----------|
| Begin Month          | End Month  | Run Date   | Run Status   | Accepted B | <b>y</b> |
| 04/2016              |            | 03/21/2016 | Not Accepted | Quan Chad  |          |
| Income Determina     | ntion      |            |              |            |          |
| Unearned Income      |            |            |              | \$         | 0.0      |
| Unearned Income De   | eductions  |            |              | -          | 0.0      |
| Net Unearned Incom   | е          |            |              | =          | 0.0      |
| Earned Income        |            |            |              | \$         | 5,000.0  |
| Earned Income Dedu   | ıctions    |            |              | -          | 90.0     |
| Net Earned Income    |            |            |              | =          | 4,910.0  |
| Total Net Income     |            |            |              | \$         | 4,910.0  |
| Combined Income D    | eductions  |            |              | -          | 0.0      |
| Income Adjustments   |            |            |              | +          | 0.0      |
| Allocation and Other | Deductions |            |              | -          | 0.0      |
| Total Net Nonexemp   | t Income   |            |              | =          | 4,910.0  |
| Unit Size            |            |            |              |            |          |
| 300% FPL Limit       |            |            |              | \$         | 2,943.0  |
| 300% Test            |            |            |              |            | Fa       |
| 138% FPL Limit       |            |            |              | \$         | 1,354.0  |
| 138% Test            |            |            |              |            | Fa       |
| Maintenance Need     |            |            |              | \$         | 600.0    |
| Share of Cost        |            |            |              | \$         | 0.0      |

Figure 2.15.1 – Display 138% and 300% of FPL Limits and Tests

- 7. Apply the discount rate of 75% to the calculated SOC. This is to align the SOC monthly payment to the applicant's cost of premium/co-insurance under Covered California. To calculate the new SOC after discount, multiply the current SOC by (1.0 Discount Rate). See formula below:
  - a. Adjusted Monthly SOC = Current SOC \* (1.0 Discount Rate) Set the 'Discount Rate' to 0.75 effective May 01, 2016 and ongoing. Prior to that, let the 'Discount Rate' be 0.0 (not used).

**Technical Note:** Discount rate may change periodically, so use the codes table to store this value for simplified ongoing maintenance.

- 8. Aid Code 50 should no longer be applicable to individuals with income less than or equal to 138% of the FPL. See Figure 2.15.1 Aid Code Summary Table.
- 9. Suspend the Aid Code 85. See Figure 2.15.1 Aid Code Summary Table.

| Note: "CA       | Aid Code Summary Table  Note: "CMSP FED" and "CMSP NON FED" are Medi-Cal categories that are internal to the system. |         |           |             |     |  |  |  |
|-----------------|--|---------|-----------|-------------|-----|--|--|--|
|                 | Inputs   |         | С         | outputs     |     | Notes  |  |  |
| MC<br>Category  | Net Non-Exempt<br>Income Amount  | Citizen | Eligible? | Aid<br>Code | soc |  |  |  |
| CMSP<br>FED     | 100% FPL < X <=<br>200% FPL  | Yes     | No        |             |     | Aid code 85<br>Suspended as of<br>05/2016                          |  |  |
| CMSP<br>NON FED | Less than or<br>equal to \$600   | No      | No        |             |     | This path to Aid Code<br>50 <b>Not Applicable</b> as<br>of 05/2016 |  |  |
| CMSP<br>NON FED | 138% FPL < X <=<br>300% FPL  | No      | Yes       | 50          | Yes |  |  |  |
| CMSP<br>NON FED | Less than or<br>equal to 138%<br>FPL   | Yes     | Yes       | 88          | No  |  |  |  |
| CMSP<br>NON FED | 138% FPL < X <=<br>300% FPL  | Yes     | Yes       | 89          | Yes |  |  |  |

Figure 2.15.1 – Aid Code Summary Table

10. Modify the enrollment term for all remaining CMSP Aid Codes (50, 88 and 89) to up to six months.

### 2.15.3 Programs Impacted

**CMSP** 

#### 2.15.4 Performance Impacts

N/A

# 2.16 C-IV SCR 4550 Solution - Update the CMSP logic to ignore DRA/LPR requirements

#### 2.16.1 Overview

A person can only be eligible for CMSP aid codes 88/89 if both of the following are true:

- 1. The person is not meeting the Deficit Reduction Act (DRA) requirements
- 2. The person is not a Lawful Permanent Resident (LPR) with an adjustment date at least 5 years prior to the benefit month.

With the implementation of SCR 1126, the aid code 85 has been suspended. As a result, people who either meet the DRA requirements or are an LPR with an adjustment date at least 5 years prior to the benefit month are unable to receive any CMSP aid.

#### 2.16.2 Description of Changes

1. Update the CMSP logic to allow CMSP applicants to be tested for the CMSP aid codes 88/89 regardless of meeting the DRA requirements or being an LPR with an adjustment date at least 5 years prior to the benefit month. This change is effective May 1, 2016.

#### 2.16.3 Programs Impacted

**CMSP** 

#### 2.16.4 Performance Impacts

N/A

#### 2.17 C-IV SCR 3919 Solution - CO-089: CMSP - Aid Code 50 No SOC Change

#### **2.17.1 Overview**

A person can qualify for CMSP under the aid code 50 with zero SOC.

#### 2.17.2 Description of Changes

1. Migrate functionality from C-IV SCR 3919 to update the aid code determination logic to allow individuals with income less than or equal to 138% of the FPL to be eligible for aid code 50 with no SOC. See Figure 2.17.1 below for reference.

|                     | CMSP Share of Cost Table   |                           |             |                                      |   |  |  |  |  |
|---------------------|--|---------------------------|-------------|--------------------------------------|---|--|--|--|--|
|                     | Aid Code 50  | Aid Code 84               | Aid Code 85 | Aid Code 88                          | Aid Code 89   |  |  |  |  |
| No Share<br>of Cost | Less than or<br>equal to 138%<br>FPL                                 | Not in use -<br>Suspended | Suspend     | Less than or<br>equal to<br>138% FPL | Not<br>Applicable   |  |  |  |  |
| Share of<br>Cost    | Greater than<br>138% of FPL and<br>less than or equal<br>to 300% FPL | Not in use -<br>Suspended | Suspend     | Not<br>Applicable                    | Greater than<br>138% of FPL<br>and less than<br>or equal to<br>300% FPL |  |  |  |  |

Figure 2.17.1 – CMSP Share of Cost Table

#### 2.17.3 Programs Impacted

**CMSP** 

#### 2.17.4 Performance Impacts

N/A

# 2.18 C-IV SIR 6898 Solution - CMSP: FTP Property Non-Compliance does not fail CMSP property budget

#### 2.18.1 Overview

People with over 138% FPL will not have their CMSP property budget waived.

#### 2.18.2 Description of Changes

1. Migrate functionality from C-IV SIR 6898 to update EDBC rules so that CMSP property is not waived for a person who has income over 138% FPL.

#### 2.18.3 Programs Impacted

**CMSP** 

#### 2.18.4 Performance Impacts

N/A

#### 2.19 C-IV SIR 53215 Solution - CalHEERS: CMSP Event Reason not Populated

#### **2.19.1 Overview**

All closing application events are expected to have a reason. If this reason is missing for CMSP, it can prevent the user from doing activities such as adding retro benefit months.

For example, create a case with one person on CMSP for 1/2014. Give the person an eligible MAGI Determination. Run EDBC for 1/2014 in the full MC hierarchy mode and elect MAGI. Save the EDBC. The CMSP application is Denied with no reason.

#### 2.19.2 Description of Changes

1. Modify the code to populate the event reason in the scenario in the example.

#### 2.19.3 Programs Impacted

**CMSP** 

#### 2.19.4 Performance Impacts

N/A

# 2.20 C-IV SIR 51426 Solution - CalHEERS: Pre-ACA not allowed for CMSP applicants

#### 2.20.1 Overview

The pre-ACA (Affordable Care Act) logic requires people to have open applications. It is possible that a person who applies for CMSP will be found eligible for and granted Medi-Cal. In that situation, the person's application will have a Medi-Cal approval and a CMSP denial. It is also possible then that the Denial event has a later created on date. This results in the system identifying the person as having a closed application, thus it will not allow pre-ACA for the person.

For example, create a case for an aged person applying for CalWORKs (CW) for 1/2013. Run EDBC for CW to Deny the person and auto test onto a Pending MC program. Add a CMSP portion to the person's pending application. Run EDBC for MC to grant aged benefits and close the CMSP portion of the application. Attempting to run any EDBCs for 1/2014 onwards results in the system determining post-ACA requirements instead of pre-ACA.

#### 2.20.2 Description of Changes

1. Update the pre-ACA requirement queries to check if either the latest CMSP portion or the latest Medi-Cal portion of the application has an open event.

#### 2.20.3 Programs Impacted

**CMSP** 

#### 2.20.4 Performance Impacts

N/A

## 2.21 C-IV SIR 51008 Solution - CalHEERS: CMSP Application Closes for MAGI Determination Pending

#### 2.21.1 Overview

A person who has a Pending MAGI Determination in their intake month will be set to Pending for 'MAGI Determination Pending'. If that person has also applied for CMSP, the CMSP portion of the application is closed.

For example, create a case with a husband and wife on MC for 1/2014. Have the husband request CMSP. Do not create Vital Statistic records. Run MAGI so the husband is pending and the wife is denied. Run EDBC. The EDBC will show the husband with a Pending Status for 'MAGI Determination Pending'. After saving the EDBC, the CMSP portion of the husband's application is incorrectly closed.

#### 2.21.2 Description of Changes

1. Modify the logic to not close a person's CMSP application when they are Pending for 'MAGI Determination Pending'.

#### 2.21.3 Programs Impacted

**CMSP** 

#### 2.21.4 Performance Impacts

N/A

# 2.22 C-IV SIR 50720 Solution - CalHEERS: CMSP Denial Event Reason not Populated

#### 2.22.1 Overview

When a CMSP person is closed or moves to Medi-Cal, EDBC Save & Continue produces a corresponding closure event for the relevant CMSP application. The closure event's reason comes from the failed CMSP budget on the EDBC.

If a person applies for CMSP and then the user runs EDBC in MAGI-Only mode to receive MAGI aid, no failed CMSP budget is produced on the EDBC results. However, the CMSP application is still denied. The Denial event on the CMSP portion of the application does not have a reason. This can cause issues such as adding retro benefit months to the application.

For example, create a case with one person requesting CMSP. Give them an eligible MAGI Determination. Run EDBC in MAGI-only mode. See that no failed CMSP budget is produced, therefore the CMSP closure event incorrectly has no reason.

#### 2.22.2 Description of Changes

1. Populate the CMSP Denial event when running in MAGI-Only mode.

#### 2.22.3 Programs Impacted

**CMSP** 

#### 2.22.4 Performance Impacts

N/A

### 2.23 C-IV SIR 50094 Solution - CMSP: Update 6 Month Certification Period to 3 Months for Aid Codes 85, 88, and 89

#### 2.23.1 Overview

Currently, the following CMSP aid codes have a six month certification period: 85, 88, and 89.

Effective January 1, 2014, the following aid codes will only have a three month certification period: 85, 88, and 89. Aid code 50 remains unchanged.

#### 2.23.2 Description of Changes

1. Update the following aid codes, effective January 1, 2014, to have a three month certification period:

- a. 85 CMSP Full SOC
- b. 88 CMSP Non-Fed Full No SOC
- c. 89 CMSP Non-Fed Full SOC

#### 2.23.3 Programs Impacted

**CMSP** 

#### 2.23.4 Performance Impacts

N/A

## 2.24 C-IV SIR 105237 Solution - CalHEERS CMSP aid affected by Young Adult Expansion

#### 2.24.1 Overview

Non-citizens less than 26 years of age are allowed to receive full scope benefits. CMSP was not meant to be affected by this change. A person should not receive full scope CMSP aid as a result of the Young Adult Expansion.

For example, create a case with a 23 year old applying for CMSP. Make the person undocumented. Run EDBC for a Young Adult Expansion effective benefit month. The person will be eligible for full scope CMSP aid instead of restricted CMSP.

#### 2.24.2 Description of Changes

1. Modify the code to prevent CMSP recipients from being affected by the Young Adult Expansion.

#### 2.24.3 Programs Impacted

**CMSP** 

#### 2.24.4 Performance Impacts

N/A

#### 2.25 CMSPDiscontinuanceSweep

#### 2.25.1 Overview

This job **PB00E147** will create triggers in the sys\_transact table for batch EDBC to process.

#### 2.25.2 Description of Change

- 1. Migrate all C-IV code to CalSAWS for the CMSPDiscontinuanceSweep.
  - a. The records inserted will be cases with an active CMSP person who is at the end of their certification period.

#### 2.25.3 Execution Frequency

Monthly, prior to 10-day cutoff

#### 2.25.4 Key Scheduling Dependencies

No Change

#### 2.25.5 Counties Impacted

CMSP counties

#### 2.25.6 Data Volume/Performance

No Change

#### 2.25.7 Failure Procedure/Operational Instructions

No Change

#### 2.26 CMSPOutboundWriter

#### 2.26.1 Overview

This jobs **PO00E610** reads newly active CMSP recipients from the database and writes the recipients' demographic information to a CSV file.

Job JO00E611 is the FTP job that sends the CSV file to the CMSP state agency.

#### 2.26.2 Description of Change

1. Migrate all C-IV code to CalSAWS for the CMSPOutboundWriter.

- a. Read newly active CMSP recipients from the database and write the recipients' demographic information to a CSV file.
- b. The CSV file should contain the following:
  - i. county\_code
  - ii. aid\_code
  - iii. cin\_num\_identif
  - iv. last\_name
  - v. first\_name
  - vi. mid\_name\_initial
  - vii. dob
  - viii. gender\_code
  - ix. BIC-CARD-ISSUE-DATE
  - x. ssn
  - xi. deceas\_date
  - xii. DATE-DEATH-POSTED
  - xiii. meds\_renewal\_date
  - xiv. residence Address
  - xv. phone Home, Work, Mobile
  - xvi. mailing Address
  - xvii. begin Date
  - xviii. end Date

#### 2.26.3 Execution Frequency

Weekly

#### 2.26.4 Key Scheduling Dependencies

Successor job JO00E611 – Outbound FTP For CMSP Interface. Configuration only.

#### 2.26.5 Counties Impacted

**CMSP** Counties

#### 2.26.6 Data Volume/Performance

No Change

#### 2.26.7 Failure Procedure/Operational Instructions

No Change

### 3 REQUIREMENTS

### 3.1 Migration Requirements

| APTC" in the "Negative Action Reason" field on Negative Action  Detail page.  APTC" in the "Negative Action the required to facilitate the new negative action reason:  - Add eligibility rules to leave the person or program pending when the person is Pending Fligible on CMSP NOA's will  | DDID # | REQUIREMENT TEXT  | Contractor Assumptions   | How<br>Requirement Met   |
|--|--------|---|--|--|
| shall migrate "Gets APTC" in the "Negative Action Reason" field on Negative Action Detail page.  • The following changes will also be required to facilitate the new negative action reason: - Add eligibility rules to leave the person or program pending when the person is Pending Eligible on the corresponding MAGI determination and running negative action with a reason of "Gets APTC (CMSP)" Add logic for a new denial discontinuance NOA for "Gets APTC (CMSP)" Add a new denial discontinuance NOA for "Gets APTC (CMSP)" based on existing C-IV NOA fragment. CalSAWS will utilize the existing C-IV functionality. | 1172   | shall migrate the value of "Failure to Enroll/Pay APTC Premiums" in the "Reason" dropdown on the Eligibility Non-Compliance Detail page when Non Payment of Premium is selected as a Type and Medi-Cal is selected as the | N/A  | Compliance<br>Reason of<br>"Failure to<br>Enroll/Pay APTC  |
| N/A  | 1240   | shall migrate "Gets<br>APTC" in the "Negative<br>Action Reason" field<br>on Negative Action   | The following changes will also be required to facilitate the new negative action reason:  Add eligibility rules to leave the person or program pending when the person is Pending Eligible on the corresponding MAGI determination and running negative action with a reason of "Gets APTC (CMSP)".  Add logic for a new denial discontinuance NOA for "Gets APTC (CMSP)".  Add a new denial discontinuance NOA for "Gets APTC (CMSP)" based on existing C-IV NOA fragment. CalSAWS will utilize the existing C-IV functionality.  Revised: | APTC" Negative Action Reason. Removed Contractor Assumption as CMSP NOA's will be migrated with DDID 1062 (CA- |

| DDID# | REQUIREMENT TEXT   | Contractor Assumptions   | How<br>Requirement Met                                      |
|-------|--|--|---|
| 1859  | The CONTRACTOR shall migrate the CMSP functionality, which includes eligibility, online, and batch functionality for the applicable 58 Counties. | <ul> <li>Any enhancements to the CMSP functionality added to the system post July of 2018 will be estimated by the CONTRACTOR and submitted to the CONSORTIUM for approval and to determine the appropriate method of funding the work.</li> <li>The CalWIN counties will be adopting the C-IV CMSP functionality as is to be ported as part of this requirement.</li> </ul> | Migrated CMSP eligibility, online, and batch functionality. |



California Statewide Automated Welfare System

### **Design Document**

CA-207494 DDID 85

Update Batch that removes WTW Program Worker at Sanction status

|         | DOCUMENT APPROVAL HISTORY |                   |  |
|---------|---------------------------|-------------------|--|
| Calsaws | Prepared By               | Avi Bandaranayake |  |
|         | Reviewed By               | Amy Gill          |  |

| DATE      | DOCUMENT<br>VERSION | REVISION DESCRIPTION                         | AUTHOR               |
|-----------|---------------------|--|----------------------|
| 9/26/19   | 1.0                 | Draft  | Avi<br>Bandaranayake |
| 11/11/19  | 2.0                 | Updated section 1.4 based on review comments | Avi<br>Bandaranayake |
| 2/12/2020 | 3.0                 | Updating batch job number                    | Avi<br>Bandaranayake |
|           |                     |  |                      |
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#### 1 OVERVIEW

This document describes the changes needed in the system to migrate logic associated with worker removal for Welfare-To-Work (WTW) program status changes.

#### 1.1 Current Design

In CalSAWS when the WTW program status is updated to Sanctioned, a financial penalty is applied to the CalWORKs (CW) program through CW EDBC, and the WTW worker is removed from the program. This is done by automatically by a batch job.

There is an additional batch job that will remove any assigned WTW worker if the WTW program status is Deregistered.

#### 1.2 Requests

Make the batch job that removes the worker from the WTW program when the WTW program status is changed to Sanctioned available to the 57 Migration Counties that have opted in to the functionality.

#### 1.3 Overview of Recommendations

Create new Batch Property Change Requests (BPCR) to add counties to the County Code List.

Update batch job to run for the counties in the list.

#### 1.4 Assumptions

- 1. This batch job is currently Los Angeles County (County 19) specific.
- 2. All batch scheduling will be addressed by CA-208599, CA-208600, CA-208601, CA-208602, CA-208603, CA-208604, and CA-208605, for counties that have opted in to the batch job.
- 3. The scheduling SCRs mentioned above will cover the opt in/out functionality and can be verified once implemented.

#### 2 RECOMMENDATIONS

#### 2.1 Life Cycle Reassignment Batch

#### 2.1.1 Overview

Update the Life Cycle Reassignment (PB00M100) batch job to use a county parameter list so that the batch job can run for counties besides Los Angeles County.

#### 2.1.2 Description of Change

- 1. Create a BPCR to update the CountyCodeList property to include all 58 counties.
- 2. Update the Life Cycle Reassignment3 job to use the CountyCodeList to determine which counties the job should run for.

#### 2.1.3 Execution Frequency

No change

#### 2.1.4 Key Scheduling Dependencies

No change

#### 2.1.5 Counties Impacted

All counties

#### 2.1.6 Data Volume/Performance

No change

#### 2.1.7 Failure Procedure/Operational Instructions

No change

### 3 REQUIREMENTS

### 3.1 Migration Requirements

| DDID# | REQUIREMENT TEXT  | Contractor<br>Assumptions   | How Requirement Met   |
|-------|---|---|---|
| 85    | Original: The CONTRACTOR shall migrate the logic for the 58 Counties to not remove the worker assigned to the WTW Program when the WTW program status is sanctioned and to automatically remove the worker assigned to the WTW Program when the WTW program status is deregistered. The 58 Counties have the option to opt in or out of the functionality at the time of migration. | The Batch properties and scheduling will have to be updated for each wave separately. | Update the Life Cycle Reassignment (PB00M100) batch job to use a county parameter list so that the batch job can run for counties besides Los Angeles County. |
|       | Revised: The CONTRACTOR shall enable the logic for the 58 Counties to remove the worker assigned to the WTW Program when the WTW program status is Sanctioned. The 58 Counties have the option to opt in or out of the functionality at the time of migration.  |   |   |