

# CalSAWS

California Statewide Automated Welfare System

## **Design Document**

CA-207101 | DDID 115 & 658

Update "Source" dropdown field on New  
Programs Detail and Application Registration  
Summary pages

|                |                                  |                           |
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| <b>CalSAWS</b> | <b>DOCUMENT APPROVAL HISTORY</b> |                           |
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| DATE       | DOCUMENT VERSION | REVISION DESCRIPTION | AUTHOR      |
|------------|------------------|----------------------|-------------|
| 04/23/2020 | 1.0              | Original document    | Sadia Islam |
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# 1 OVERVIEW

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This System Change Request (SCR) documents the changes required to the “Source” dropdown field on the New Programs Detail and the Application Registration Summary pages.

## 1.1 Current Design

In CalSAWS, the “Source” field is a dropdown that captures the source of the program application. This field is available on the New Programs Detail and the Application Registration Summary pages.

On the New Programs Detail page, the “Source” field is mandatory as indicated by an asterisk, with several values available for selection.

On the Application Registration Summary page, the “Source” field is not mandatory, with only a few values available for selection.

## 1.2 Requests

Per Design Difference ID (DDID) 115, update the “Source” dropdown field on the New Programs Detail page.

Per DDID 658, update the “Source” dropdown field on the Application Registration Summary page.

## 1.3 Overview of Recommendations

1. Update the “Source” dropdown field on the New Programs Detail page to update dropdown values and make the field non-mandatory.
2. Update the “Source” dropdown field on the Application Registration Summary page to update dropdown values.

## 1.4 Assumptions

1. Historical records will continue to display the removed values in the Source field.

## 2 RECOMMENDATIONS

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### 2.1 New Programs Detail

#### 2.1.1 Overview

The New Programs Detail page allows the user to add a program(s) for a participant during the application process. The "Source" dropdown field will be updated on this page.

#### 2.1.2 Page Mockup

N/A for dropdown value changes

#### 2.1.3 Description of Changes

Update the New Programs Detail page as follows:

1. Relabel the following existing values:
  - a. "YBN" to "Self-Service Portal"
  - b. "IHSS" to "IHSS/CMIPS II"
2. Remove the following values:
  - a. C4Y
  - b. CMIPS II
3. Add the following values:
  - a. Outreach
  - b. Outstation
4. Order all dropdown values to display in alphabetical order.
5. Modify the "Source" dropdown field to be a non-mandatory field.

#### 2.1.4 Page Location

- **Global: Case Info**
- **Local: New Application**
- **Task: N/A**

#### 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 Application Registration Summary

### 2.2.1 Overview

The Application Registration Summary page allows the user to access an application for a potential participant. The “Source” dropdown field will be updated on this page.

### 2.2.2 Page Mockup

N/A for dropdown value changes

### 2.2.3 Description of Changes

Update the Application Registration Summary page as follows:

1. Relabel the following values:
  - a. “IHSS” to “IHSS/CMIPS II”
  - b. “YBN” to “Self-Service Portal”
2. Remove the value of “CMIPS II”
3. Add the following values:
  - a. CBO
  - b. CSC
  - c. CalHEERS
  - d. CWS
  - e. Email
  - f. Fax
  - g. Other
  - h. Outreach
  - i. Outstation
  - j. Phone
  - k. RCC
  - l. SAWS
  - m. SPE
4. Order all dropdown values to display in alphabetical order.

### 2.2.4 Page Location

- **Global: Case Info**
- **Local: New Application**
- **Task: Application Registration**

### 2.2.5 Security Updates

N/A

### 2.2.6 Page Mapping

N/A

### 2.2.7 Page Usage/Data Volume Impacts

N/A

## 3 REQUIREMENTS

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### 3.1 Migration Requirements

| DDID #    | REQUIREMENT TEXT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Contractor Assumptions | How Requirement Met            |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------|
| 115 & 658 | <p><b>Original:</b></p> <p>#115 The CONTRACTOR shall update "Source" dropdown field on the New Programs Detail page as follows:</p> <ol style="list-style-type: none"><li>1) Relabel "YBN" to the name of the new self-service portal</li><li>2) Removed the value of "C4Y"</li><li>2) Relabel "IHSS" to "IHSS/CMIPS II"</li><li>3) Modify the "Source" dropdown field to be a non-mandatory field.</li><li>4) Add the following values in the "Source" dropdown field:<ol style="list-style-type: none"><li>a) Outreach</li><li>b) Outstation</li></ol></li><li>5) Remove the value of "CMIPS"</li></ol> <p>#658 The CONTRACTOR shall update the Application Registration Summary page as follows:</p> <ol style="list-style-type: none"><li>1) Migrate the following values in the "Source" dropdown:<ol style="list-style-type: none"><li>a) CBO</li><li>b) CSC</li><li>c) CalHEERS</li><li>d) Email</li><li>e) Fax</li></ol></li></ol> |                        | Source dropdown field updated. |

| DDID # | REQUIREMENT TEXT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Contractor Assumptions | How Requirement Met |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|
|        | <p>f) Other<br/>g) Phone<br/>h) RCC<br/>i) SAWS<br/>j) SPE</p> <p>2) Add the following values in the "Source" dropdown:<br/>a) DCFS<br/>b) Outreach<br/>c) Outstation</p> <p>3) Relabel "IHSS" to "IHSS/CMIPS II"</p> <p>4) Relabel "YBN" to the name of the new self-service portal</p> <p>5) Remove the value of "CMIPS"</p> <p><b>Revised:</b></p> <p>#115 The CONTRACTOR shall update "Source" dropdown field on the New Programs Detail page as follows:<br/>1) Relabel "YBN" to "Self-Service Portal"<br/>2) Remove the value of "C4Y"<br/>2) Relabel "IHSS" to "IHSS/CMIPS II"<br/>3) Modify the "Source" dropdown field to be a non-mandatory field.<br/>4) Add the following values in the "Source" dropdown field:<br/>a) Outreach<br/>b) Outstation<br/>5) Remove the value of "CMIPS II"</p> <p>#658 The CONTRACTOR shall update the Application Registration Summary page as follows:<br/>1) Migrate the following values in the "Source" dropdown:<br/>a) CBO<br/>b) CSC</p> |                        |                     |



| DDID # | REQUIREMENT TEXT                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Contractor Assumptions | How Requirement Met |
|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------|
|        | <ul style="list-style-type: none"> <li>c) CalHEERS</li> <li>d) Email</li> <li>e) Fax</li> <li>f) Other</li> <li>g) Phone</li> <li>h) RCC</li> <li>i) SAWS</li> <li>j) SPE</li> </ul> <p>2) Add the following values in the "Source" dropdown:</p> <ul style="list-style-type: none"> <li>a) CWS</li> <li>b) Outreach</li> <li>c) Outstation</li> </ul> <p>3) Relabel "IHSS" to "IHSS/CMIPS II"</p> <p>4) Relabel "YBN" to "Self-Service Portal"</p> <p>5) Remove the value of "CMIPS II"</p> |                        |                     |

# CalSAWS

California Statewide Automated Welfare System

## **Design Document**

CA-207225 | DDID 2049

Update Expense Detail page

|                |                                  |                           |
|----------------|----------------------------------|---------------------------|
| <b>CalSAWS</b> | <b>DOCUMENT APPROVAL HISTORY</b> |                           |
|                | Prepared By                      | Sadia Islam               |
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# 1 OVERVIEW

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This System Change Request (SCR) documents the changes to the Expense Detail page in CalSAWS.

## 1.1 Current Design

In CalSAWS, the Expense Detail page is used to add the participant's costs based on the Expense Category selected from the Expense List page. Within the Expense Category of Dependent Care, the "Name of Provider" and "Address of Provider" fields are mandatory fields as indicated by an asterisk.

## 1.2 Requests

Per Design Difference ID (DDID) 2049, update the Expense Detail page when the expense category type is Dependent Care to make the "Name of Provider" field and "Address of Provider" field to be non-mandatory fields.

## 1.3 Overview of Recommendations

1. Update the "Name of Provider" field to be non-mandatory when the Expense Category is Dependent Care.
2. Update the "Address of Provider" field to be non-mandatory when the Expense Category is Dependent Care.

## 1.4 Assumptions

1. There are no other functional areas in the system that require this field to be mandatory.

## 2 RECOMMENDATIONS

### 2.1 Expense Detail

#### 2.1.1 Overview

The Expense Detail page allows the user to add, edit, view or remove expense details for a particular expense type. The user will add the Expense Category of 'Dependent Care' from the Expense List page in order to navigate to the Expense Detail page.

#### 2.1.2 Expense Detail Mockup

The mockup shows a form titled "Expense Detail". At the top right, there are three buttons: "Save and Add Another", "Save and Return", and "Cancel". A red asterisk icon is followed by the text "\*- Indicates required fields". The form contains the following fields:

- Expense Category: \*** (Text input): Dependent Care
- Expense Type: \*** (Text input): Dependent Care
- Dependent: \*** (Dropdown menu): - Select -
- Name of Provider:** (Text input)
- Address of Provider:** (Text input)
- City: \*** (Text input)
- State: \*** (Dropdown menu): - Select -
- ZIP Code: \*** (Text input)
- Frequency: \*** (Dropdown menu): Monthly
- Description:** (Text input)

Figure 2.1.1 – Expense Detail with Dependent Care

#### 2.1.3 Description of Changes

1. Make the following updates when Dependent Care is selected as the Expense Category:
  - a. Update the "Name of Provider" field to be non-mandatory
  - b. Update the "Address of Provider" field to be non-mandatory

#### 2.1.4 Page Location

- **Global: Eligibility**
- **Local: Customer Information**
- **Task: Financial > Expenses**

### **2.1.5 Security Updates**

N/A

### **2.1.6 Page Mapping**

N/A

### **2.1.7 Page Usage/Data Volume Impacts**

N/A

### 3 REQUIREMENTS

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#### 3.1 Migration Requirements

| DDID # | REQUIREMENT TEXT                                                                                                                                                                                       | Contractor Assumptions | How Requirement Met                                                                                                                         |
|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 2049   | The CONTRACTOR shall update the Expense Detail Page when the expense category type is Dependent Care and make the "Name of Provider" field and "Address of Provider" field to be non-mandatory fields. | N/A                    | Update the "Name of Provider" field and "Address of Provider" field to be non-mandatory fields when the Expense Category is Dependent Care. |