CalSAWS

California Statewide Automated Welfare System

Design Document

CA-55378

Impose CW MAP Reduction within the allotted timeframe when Immunization Page is not updated for children in the Assistance Unit is under age 6

	DOCUMENT APPROVAL HISTORY	
CalSAWS	Prepared By	Tom Lazio –Eligibility Jamie Ng, Phong Xiong -Correspondence
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/13/2019	1.0	Initial Draft	T. Lazio
12/31/2019	1.1	Updated Overview, Sections 1.2, 1.3, 1.4, 2.1, 2.1.1 and 2.1.2. Removed recommendation for 'hard stop' to prevent users from EDBC when no immunization record exists due to migration impact.	T. Lazio
01/22/2020	1.2	Updated Overview, Sections 1.2, 1.3, 1.4, 2.1 and 2.2 Existing functionality for CW 2200 generation and due date will remain unchanged.	T. Lazio
01/30/2020	1.3	Updated Sections 1.3, 1.4 and 2.1. Added clarification for when 30/45 day penalty grace period is applied versus 45 day penalty grace period.	T. Lazio
03/23/2020	1.4	Added Section 2.3: Add CW 2209 Form Added Assumptions 10 and 11 in Section 1.4 Updated recommendations 1 and added recommendation 3 in Section 1.3 Updated penalty verbiage in Section 2.1.2.	J.Ng T.Lazio
04/08/2020	1.5	Per committee request, the following updates were made: Added recommendation 1 and updated recommendation 2 in Section 1.3.	T. Lazio

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
		Added Section 2.1 Updated Section 2.2.2	
05/14/2020	3.0	Per Committee request and CRPC 2098, the following sections were updated: Section 1.1 Section 1.2 Section 1.3 Section 1.4 Section 2.1.1 Section 2.1.2 Section 2.2.2 Section 2.3.1 Section 2.3.2	T. Lazio J. Ng M. Keehn
5/24/2021	3.1	Content Revision 2 – Updates to the following sections: Section 1.4 Section 2.3.1 Added section 2.3.3 Section 2.4.1 Section 2.4.2.1 Section 2.4.2.2	P. Xiong

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1 OVERVIEW

CalWORKs policy (EAS 40-105.4) requires that immunization verification is submitted by the participant when a child in the Assistance Unit is under age 6. A pending CalWORKs (CW) application can be approved pending verification of immunization records. However, if up-to-date records are not provided at the time the case is approved, a penalty is imposed 30 or 45 days after determination of eligibility with a timely Notice of Action.

This SCR will accommodate the need to impose the MAP reduction penalty within the allotted timeframe on CW cases without immunization record verification for children in the Assistance Unit (AU) who are under age 6.

1.1 Current Design

A pending CalWORKs application can be approved pending verification of immunization records.

CalSAWS displays a soft validation message when running EDBC informing users that "There is no ongoing immunization record for the following child(ren): (Name of Child)" when there exists a child under 6 years old in the case that does not have a immunization record for the benefit month.

If the immunization verification is still pending once 10 days have passed from the Request Date on the Verification Detail page, a MAP grant reduction is imposed at the beginning of the benefit month.

If a child under the age 6 has an Immunization verification that is "Refused", EDBC currently sets the status to 'Denied'/'Discontinued' (Intake/Ongoing) for the CW program persons.

1.2 Requests

Per CalWORKs policy (EAS 40-105.4), verification of immunization is required for all children in the AU under the age of 6 by the CW participant within the established timeframe of 30 to 45 days. Therefore, CalSAWS must include functionality to automatically provide the required time for parent/caretaker applicants/participants to submit verifications after the case has been approved or reauthorized before 'FTP-Immunization' MAP reduction penalty is imposed.

Per CRPC 2198, CalSAWS should impose the 'FTP-Immunization' MAP reduction penalty in the amount of the parent(s) or caretaker relative within the established timeframe of 30 to 45 days for immunizations that are 'refused' and should not 'Deny' (Intake) or 'Discontinue' (Ongoing) the CW program persons.

1.3 Overview of Recommendations

1. Impose 'FTP-Immunization' MAP reduction penalty in the amount of the biological/adoptive parent(s) or caretaker relative exerting parental control that are receiving aid.

2. Update CW EDBC to <u>not</u> Deny (Intake) or Discontinue (Ongoing) CW persons when the immunization record has a status of 'Refused'.

3. Impose 'FTP-Immunization' MAP reduction penalty within the established timeframe of 30 to 45 days while Immunization records remain pending or refused**.**

4. Update trigger of the existing CalWORKs no school/ immunization verification NOA.

5. Add CW 2209- IMMUNIZATION GOOD CAUSE REQUEST FORM to the Template Repository for LRS/CalSAWS.

1.4 Assumptions

1. Months on aid will continue to count towards the 48-month CW time limit of parent(s)/caretaker relative while 'FTP-Immunization' MAP reduction penalty is imposed.
2. The WTW program will be created for the penalized parent(s)/caretaker relative that are required to participate in the program.
3. The existing soft validation for missing immunization detail record will remain unchanged.

4. User is responsible for adding/updating the immunization record for children in the CW AU under age 6.

5. The existing logic for the soft validation message for the pending or refused immunization verification will remain unchanged.

6. CalWORKs applicants can be approved while verifications of immunization records are still pending.

7. User is responsible for generating the CW 2200 form when the immunization verification is pending.

8. The existing functionality which auto populates the due date and allows the user to edit the due date on the immunization verification record will remain unchanged.
9. An EDBC will lift MAP reduction and restore aid once verifications have been received for the children under 6 in the AU, children under 6 meet good cause exemption criteria or the youngest child in the AU turns six years old. In the case where verifications have been received for the children under 6 in the AU, the MAP grant amount will be increased the first of the benefit month following the month in which verifications are received. In the case of the youngest child in the AU turning six years old, the MAP grant amount will be increased the first of the youngest child's birth month.

10. In C-IV, immunizations will continue to be a manual process and the functionality defined in this SCR will be adopted as part of migration.

11. Listings of CW cases with children in the Assistance Unit (AU) under age 6 without immunization record verification where there are two parents living in the home and only one parent has role of 'MMO' with role reason of "FTP Immunization will be provided with SCRs CA-214541 and CIV-106750.

12. There will be no changes to the monthly EDBC sweep jobs that run at 10 day cutoff which look at the immunization verifications (i.e. job numbers JB00E161M and JB00E169M) and lift immunization penalty when the child turns 6 (i.e. job number JB00E162M).

13. Logic to generate NOA Reason for Missing school verification will not be changed. (Logic to generate missing immunization verification is updated in Section 2.3).

14. The existing functionality of no penalty being applied to the biological/adoptive parent(s) or caretaker relative through EDBC if the child's verified Immunization Status is "Up to date", "Exempt", or there is a Immunization Verification Detail indicating good cause will remain unchanged.

15. When a CW case consists of both a senior parent and minor parent, both the minor biological parent and caretaker senior parent with parental control would be penalized for failure/refusal to submit immunization verification.

16. When there is a minor parent in the case, there will always be a senior parent as well.

17. If there are two senior parents, the senior parent who is the primary applicant and 'Has Parental Control' over child under 6 will be listed in the NOA.

18. The CalWORKs No School/Immunization Verification NOA from section 2.3 is updated only in English. For all non-English speaking customers receiving this NOA, they will also receive the GEN 1365.

19. A new SCR (CA-229147) has been created to add CW 2209 to the CalWORKs No School/Immunization Verification NOA form generation and add the threshold languages for the CalWORKs No School/Immunization Verification NOA.

2 RECOMMENDATIONS

2.1 Update EDBC Rules to Impose MAP Grant Reduction on Biological/ Adoptive Parent(s) or Caretaker Relative

2.1.1 Overview

1) Update CW EDBC to impose 'FTP-Immunization' MAP reduction penalty in the amount of the following program participants:
   (a) Parent(s) of the child under the age of 6 in the AU with 'pending' or 'refused' immunization record
   (b) Caretaker relative with parental control over the child under the age of 6 in the AU with 'pending' or 'refused' immunization record.

2) Update CW EDBC to no longer set the status of Deny (Intake) or Discontinue (Ongoing) for CW persons when the immunization record has a status of 'Refused'.

2.1.2 Description of Changes

1) Update CW EDBC logic to impose the role of 'MMO' with the role reason of 'FTP-Immunization' for any the following active participants aided on the case:

   (a) Parent participant(s) with a relationship type of 'Parent (Biological/ Adoptive)'to the MEM participant(s) under the age of 6 in the AU with a 'pending'or 'refused' immunization record.

   (b) Caretaker participant with a relationship type NOT 'Parent(Biological/ Adoptive)' that 'Has Parental Control' over the MEM participant(s) under the age of 6 in the AU with a 'pending' or 'refused' immunization record.

2) Update CW EDBC logic to disable setting the program status of 'Denied'(Intake) or 'Discontinued' (Ongoing) for the CW program persons when the immunization record has a status of 'Refused' per CRPC #2198

2.1.3 Programs Impacted

CW

2.1.4 Performance Impacts

N/A

2.2 Update EDBC Rules for Timeframe for Imposing MAP Grant Reduction

2.2.1 Overview

Update the CW EDBC verification logic, which determines when a Failure to Provide (FTP) Status Reason can be set for an immunization record, to use the existing verification logic with some specific updates. The immunization FTP Status Reason will cause a MAP benefit reduction.

When determining whether an FTP Status Reason can be set, verified data records use the following decision flow:

1) Determine if the data record is a mandatory report for the benefit month. This will be true if the data record is one of the following. (**This step will be adjusted for immunization.**)
   a) Period required for an initial applicant
   b) Period required based on a period report, e.g., SAR7 or RE.
   c) A mandatory mid-period report (This does not apply to an immunization record.)
2) If the data record is *not* a mandatory report for the benefit month being processed, no FTP Status Reason will be set. No further processing is needed.
3) If the verification status is 'Refused', the FTP Status Reason is set. No further processing is needed. (**This step will be adjusted for immunization**.)
4) If the verification status is 'Not Applicable', no FTP Status Reason will be set. No further processing is needed.
5) If the immunization record is not verified, determine whether the FTP Status Reason can be set with 10-day notice based on the following factors:
   a) Extension period defined by the user (Example: good cause)
   b) Automatic grace periods based on the data type (**This step will be adjusted for immunization.**)

The following CW immunization scenarios distinguish how grace periods would be determined based on period required changes. Assume a CW household initially applies for aid Jan 2019. The CW program is SAR with a redetermination period of Jan – Dec 2019.

Scenario 1: After intake, a subsequent immunization record which is a voluntary mid-period report is only considered a Period Required change (mandatory) once the redetermination is due and is eligible for a 45 day grace period.

A Mom and child apply for CW Jan 5th, 2019.

1. The child's intake immunization record is verified.
2. The child is due for a DTaP booster May 2019. The CW household voluntarily reports that the booster was received, however they do not provide verification. The user creates a new immunization record with a Begin Date of May 1, 2019. The verification has a Request Date = May 1, 2019 and a Due Date = May 30, 2019. The client does not provide this verification. If the benefit months of May – Dec 2019 are processed, the immunization record with a Begin Date = May 1, 2019 is not assessed because it is a non-mandatory Mid-Period change until Jan 2020 (the start of the new redetermination period).
3. When the RE is received on Dec 13, 2019, the verification for the immunization booster is still not provided. The user processes CW for Jan 2020 on Dec 23, 2019 and establishes the RE period from Jan – Dec 2020.
   a. Because the immunization booster is needed for a child who is already a recipient in CW, the immunization will be consider 'verified' during the grace period which ends Feb 7, 2020 (45 days from Dec 23, 2019 which is the RE approval date for the Jan – Dec 2020 RE period). If the Mom does not verify the immunization, the Mom will be penalized beginning the March 2020 benefit month.

Scenario 2: After a mid-period applicant is approved, the subsequent immunization record is considered a Period Required change due to Redetermination (RE) and is eligible for a 45 day grace period.

A family applies for CW in Jan 2019. A child moves into the home Aug 5th, 2019.

1. The child is added to the AU beginning September 2019 and the immunization record is verified.
2. The child is due for a DTaP booster at redetermination. However, when the RE is received on Dec 13, 2019, the verification for the booster is not received. The user creates a new immunization record with a Begin Date of Nov 1, 2019. The verification has a Request Date = Dec 13, 2019 and a Due Date = Jan 12, 2019. The user processes CW for Jan 2020 on Dec 20, 2019 and establishes the RE period from Jan – Dec 2020.
   a. Because the immunization booster is needed for a child who is already a recipient in CW, the immunization will be consider 'verified' during the grace period which ends Feb 4, 2020 (45 days from Dec 20, 2019). If the parents have still not verified the

immunization, the parents will be penalized beginning the March 1st , 2020 benefit month.

3. If the user processes the benefit months of Nov or Dec 2019, the system does not try to automatically assess the immunization record with a Begin Date Nov 1, 2019. This is because the immunization record is considered a non-mandatory Mid-Period change. This record does not get assessed until the Jan 2020 benefit month (as described above) because this is the first month for which it is Period Required.

Scenario 3: A mid-period applicant who is reported/applied during the data month for the upcoming RE period and is eligible for a 30 day grace period.

A family applies for CW in Jan 2019. A child moves into the home Nov 5th, 2019. The child has not previously received MC.

1. The child is added to the AU beginning Dec. 2019 with an initial approval date of Nov 6, 2019. The user created a new immunization record with a Begin Date of Nov 1, 2019. The verification has a Request Date = Nov 5, 2019 and a Due Date = Dec 5, 2019.
    a. Because the immunization booster is needed for a child who was a new applicant in CW, the immunization will be consider 'verified' during the grace period which ends Dec 7, 2019 (30 days from Nov 6, 2019). If the parents have still not verified the immunization, the parents will be penalized beginning the Jan 2020 benefit month.

2.2.2 Description of Changes

Update CW EDBC verification logic for immunization to use the standard verification logic/decision process with the following alterations:

1) Leverage existing logic to determine whether an immunization record is Period Required for the benefit month based only on the Redetermination period (see Overview point 1 above). This applies only to immunization records. A change in the immunization record is not required to be reported on the SAR7, but is required to be reported at redetermination. Given this, the normal logic used to determine whether an immunization record is period required cannot be used exactly "as is" since a SAR CW program would be based on 6-month periods rather than a 12-month period. Because of this the following definitions will be used to determine whether an immunization record is period required:

> (a) Period Required for an applicant: An immunization record will be consider Period Required for an applicant if the following condition is met:

<blockquote>
<blockquote>
<p>i. the immunization record Begin Date is prior to the initial approval date for the child under age 6.</p>
<p>(b) Period Required for Redetermination: An immunization record will be considered Period Required for the redetermination if the immunization record Begin Date is prior to the Report Month for the redetermination period.</p>
</blockquote>
</blockquote>

<ol start="2">
Update verification logic to treat an immunization record with a verification status of 'Refused' the same as a status of 'Pending' (see Overview point 3 above). This change is based on Consortium Request for Policy Clarification (CRPC) #2198.

<ol start="3">
Update the verification logic to define the automatic grace period for a verification of an immunization record as follows (see Overview point 5.b. in Section 2.2.1 above):
<blockquote>
<p>(a) If the immunization record is Period Required for a new applicant, the grace period will be either 30 or 45 days. If the child under the age of 6 has Medi-Cal in the prior month, it is 45 days else 30 days. The end of the grace period will be calculated by adding the grace period days to either 1) the initial approval date of the child or 2) the Immunization Verification Request Date, whichever date is later.</p>
<p>(b) If the immunization record doesn't meet the first requirement (point 3.a) but is Period Required due to a Redetermination period report, the grace period will be 45 days. The end of the grace period will be calculated by adding the grace period to either 1) the EDBC Run Date establishing the new Redetermination period for the benefit month (this can be determined by identifying the EDBC with a 'RE' run reason for a benefit month that is within the current Redetermination period) or 2) the Immunization Verification Request Date, whichever is later.</p>
</blockquote>

2.2.3 Programs Impacted

CW

2.2.4 Performance Impacts

N/A
</blockquote>

2.3 Update CalWORKs No School/Immunization Verification NOA Reason

2.3.1 Overview

This effort is updating the trigger of the existing CalWORKs no school/ immunization verification Reason Fragment.

Reason Fragment Name and ID:
CW_CH_MISSING_SCHOOL_IMMUNZTN_VERIF_A994_EN.xdp 7331

State Form/NOA: M40-181E (11/2014)

Current NOA Template: M40-181E (11/2014) CHANGE: SAWS REVERIFICATION-IMMUNIZATIONS/SCHOOL ATTENDANCE

Current Program(s): CalWORKs

Current Action Type: Change

Current Fragment Level: Program

Currently Repeatable: No

Includes NA Back 9: Yes

Existing Languages:

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

Below is verbiage of the reason fragment:

TYPE	Fragment ID	Fragment File Name	Fragment Text
Reason	7331	CW_CH_MISSING_SCHOOL_IMMUNZTN_VERIF_A994_EN.xdp	We needed certain facts to check your eligibility. We asked you to {MissingSchoolVerifications}.
			You did not do this and you did not ask the County for help getting this proof, so your needs and/or the needs of {NoLongerEligPerson} were not counted in figuring the amount of your cash aid.
			You may restore the cash aid you lost by giving us proof of immunization or school attendance.
			If you are ages 16 through 17, this also means you have lost your Welfare to Work exemption. You will get another notice telling you of the welfare to work program rules.

2.3.2 Update CalWORKs NOA Generation

Update the NOA logic to generate the reason fragment for immunization when below condition is met:

- The AU has 'MMO' role with the role reason of 'FTP-Immunization'

Note: Existing logic to generate NOA for missing school verification will not be changed.

2.3.3 Update CalWORKs NOA Variable Popluation

The CalWORKs missing school immunization reason fragment only has two variables, as shown below. Only the second variable will be updated.

Variable Name	Population	Formatting
MissingSchoolVerifications	*Not updated with this SCR. Populates with either the missing proof of immunization or missing school verifications. Field Type: Text For Example, "FTP Immunizations"	Arial Font 10
NoLongerEligPerson	Populates the penalized child. **If the penalized person has a minor parent in the case, then populate both the senior and minor parent. **There is a minor parent in the case if MINOR_PARNT_CODE = "AM" from either EDBC or PGM_DETL tables. Field Type: Text For Example, "Jane Doe" or "John Doe, Jane Doe"	Arial Font 10

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

2.4 Correspondence: Add the CW 2209 Form

2.4.1 Overview

The CW 2209- IMMUNIZATION GOOD CAUSE REQUEST FORM will be added to the Template Repository for LRS/CalSAWS.

State Form: CW 2209- IMMUNIZATION GOOD CAUSE REQUEST FORM (12/14)
Programs: CW
Attached Forms: N/A
Forms Category- LRS/CalSAWS: Form
Template Repository Visibility: All Counties

Languages:
English and Spanish

2.4.2 Description of Change

Create and add CW 2209- IMMUNIZATION GOOD CAUSE REQUEST FORM (12/14) in LRS/CalSAWS to template repository.

2.4.2.1 Create CW 2209 Form XDP

Create XDP for CW 2209 Form in English and Spanish.

Form Header: N/A, This Form will only be available to print locally.
Form Title: IMMUNIZATION GOOD CAUSE REQUEST FORM
Form Number: CW 2209 (12/14)
Include NA Back 9: No.
Imaging Form Name: Immunization Good Cause Request Form
Imaging Form Document Type: Notification/NOA
Form Mockups/Examples: See Supporting Documents #2 & #3

2.4.2.2 Add Form Variable Population for CW 2209

Form Body Variables:

Variable Name	Population	Formatting	Editable	Template Repository Population	Populates with Form Generation

~~Case~~ Client Name	No population. Free-fill field. Field Type: Text For Example, "John Doe"	Arial Font 10	Yes	No	No
Case Number	No population. Free-fill field. Field Type: Text For Example, "809337372"	Arial Font 10	Yes	No	No
~~Name of Participant~~ Date	No population. Free-fill field. Field Type: Text For Example, ~~"John Doe"~~ "01/16/2021"	Arial Font 10	Yes	No	No
Name of Participant's children	No population. Free-fill field. Field Type: Text For Example, "Jane Doe"	Arial Font 10	Yes	No	No
Other Good Cause Reason	No population. Free-fill field. Field Type: Text For Example, "Exempt"	Arial Font 10	Yes	No	No
Client Signature	No population. Free-fill field.	Arial Font 10	Yes	No	No

	Field Type: Text For Example, "Jane Doe"				
Date of Client Signature	No population. Free-fill field. Field Type: Text For Example, "01/16/2021"	Arial Font 10	Yes	No	No
Client Phone Number	No population. Free-fill field. Field Type: Text For Example, "123-456-7890"	Arial Font 10	Yes	No	No
Worker's Name	No population. Free-fill field. Field Type: Text For Example, "Jane Doe"	Arial Font 10	Yes	No	No
Date of Worker Signature	No population. Free-fill field. Field Type: Text For Example, "01/16/2021"	Arial Font 10	Yes	No	No
Worker Phone Number	No population. Free-fill field. Field Type: Text	Arial Font 10	Yes	No	No

	For Example, "123-456-7890"				

Variables Requiring Translations: N/A

2.4.2.3 Add Form Control

The CW 2209 Form needs to be returned but have no due date. The form is triggered in Template Repository.

Due Date: None

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

2.4.2.4 Add CW 2209 Form to Template Repository

Add the CW 2209 Form to Template Repository with the following Document Parameters:

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

2.4.2.5 Add CW 2209 Form Print Options and Mailing Requirements

The following Print options will be included for the CW 2209 Form.

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Y	Y	Y	N	Y	N

Mailing Requirements:
N/A, Local Print only

Additional Requirements:
Special Paper Stock: None
Enclosures: None
Electronic Signature: No

2.5   Automated Regression Test

2.5.1   Overview

Create new automated regression test scripts to validate the new immunization validations and NOAs when running EDBC.

2.5.2   Description of Changes

1. Create cases with each of the following program configurations.

	Config 1	Config 2	Config 3	Config 4	Config 5	Config 6
Intake	1 Parent 1 Child Under 6	1 Parent 1 Child Under 6	1 Parent 1 Child 6 or Over	1 Parent 1 Child 6 or Over	2 Parents 1 Child Under 6	2 Parents 1 Child Under 6
Mid-Period	-	-	Child Under 6	Child Under 6	-	-
Medi-Cal	No	Yes	No	Yes	No	Yes
Verif Due Date	30 days	45 days	30 days	45 days	30 days	45 days

For each configuration,
   a. Add the CalWORKs program for the specified persons. Run EDBC without adding an Immunization record. Confirm that the immunization validation displays.
   b. Add a Pending immunization record and Run EDBC to activate the CalWORKs program.
   c. Run EDBC for the benefit month after the verification due date. Confirm that the parent applicant(s) becomes MMO with a reason of FTP-Immunization. Also confirm that the Change NOA generates.
   d. Mark the immunization record as Verified. Run EDBC for the next month and confirm that MEM benefits are restored for the parent applicant(s).
2. Create cases with each of the program configurations listed above (section 2.5.2.1). For each configuration,
   a. Add the CalWORKs program for the specified persons.
   b. Add a Refused immunization record and Run EDBC to activate the CalWORKs program.
   c. Run EDBC for the benefit month after the verification due date. Confirm that the primary applicant (parent) becomes MMO with a

reason of FTP-Immunization. Also confirm that the Change NOA generates.

    d. Run EDBC for the benefit month in which the child would become 6 years old. Confirm that benefits are restored for the parents.

3. Create cases with each of the program configurations listed above (section 2.5.2.1), with a caretaker relative with that Has Parental Control over the Child Under 6 in place of one of the Parents. For each configuration, perform the same actions as outlined in that section, and confirm the same result.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Eligibility	CalWORKs policy (EAS 40-105.4) which specifies timeframes for immunization verifications.	Policy 40-105.docx
2	Correspondence	CW 2209 Mockup (English)	CW 2209 IMMUNIZATION GOC
3	Correspondence	CW 2209 Mockup (Spanish)	CW2209 Spanish.pdf
4	Eligibility	CRPC 2198 which clarifies treatment of 'Refused' immunizations	CRPC%202198%20-%20Immunization%2(

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.5.2.13	The LRS shall allow COUNTY-specified Users to collect immunization information at the individual level.	This SCR will impose the MAP reduction penalty for missing immunizations for

		children under the age of 6 based on the CalWORKS policy timeframe.

CalSAWS

California Statewide Automated Welfare System

Design Document

SCR CA-207026

Migrate C-IV Contact Center Functionality

	DOCUMENT APPROVAL HISTORY	
CalSAWS	Prepared By	Jared Kuester
	Reviewed By	Raji Sanuvala, Michael T. Wright, Pandya P. Amitkumar

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/18/2021	0.1	Initial version	Jared Kuester
03/25/2021	0.2	Content Revision 1	Jared Kuester
4/27/2021	0.3	Content Revision 2	Jared Kuester
5/31/2021	0.4	Content Revision 3	Vallari Bathala

Contents

1 OVERVIEW

The C-IV County Amazon Connect contact centers will be migrated to communicate with the CalSAWS application. This contact center solution will only be used by the 39 C-IV Counties.

1.1 Current Design

The C-IV County contact centers authenticate callers, and provides self service to customers by communicating with the C-IV application. All data dips are pulled from the C-IV Application database.

Text messages requesting E-Signatures and the subsequent replies send two different phone numbers, (866) 613-3777 for customers in Los Angeles County and (844) 859-2100 for all other counties, for customers to use for any questions.

1.2 Requests

As part of the migration from the C-IV Application to CalSAWS, the Amazon Connect contact center will be modified to interact with the CalSAWS database.

All E-Signature text messages will be modified to use a single phone number for all counties.

1.3 Overview of Recommendations

The recommendations migrating the Amazon Connect contact cetner solution are as follows –

1. Update the Self Service Lambdas from Java to Node.js to communicate directly with the CalSAWS application database.
    a. This includes updating the IVR PIN lambdas to accept 4 and 6 digit PINs.
    b. Update Custom_ResendFormWebserviceLambda to not allow reprinting of forms generated before 9/26/2021.
    c. Add new Phone Number lookup lambda, and Get Case List lambda
2. ~~Update the Custom CCP to validate user against Amazon Connect.~~
2. Update Custom CCP.
    a. Update the CCPAgent, CCPSupervisor, and CCPMessageSender to CalSAWS Identity Provider roles.
    b. Update the CCP Environemnt Variable to open CalSAWS rather than C-IV.
3. Update the Prompts to remove the "4 digit" IVR PIN reference, and update C4Yourself to BenefitsCal.
4. Modify the Authentication Method in the IVR to no longer require Case Number as CalSAWS case numbers contain letters.
    a. See attached Call Flows for details.
5. Update batch job PB00A400 and the web service to use (844) 859-2100, for E-Signature text messages for all Counties.

1.4 Assumptions

- This only applies to the 39 C-IV Counties.
- The only update to the Call Flows is the removal of the mention of a "4 digit" IVR PIN.
- Users can authenticate with either a 4 or 6 digit PIN after the migration.
- Existing IVR PINS will remain 4 digit, but any PIN generated after the migration to CalSAWS will be 6 digit.
- Voice Authentication is not impacted by the authentication method change
- End to end Voice Authentication deletion testing will be available with this SCR.

2 RECOMMENDATIONS

The Migration to CalSAWS will consist of the following actions

2.1 Update the Self Service Lambdas

The existing Self Service lambdas will be updated from Java to Node.js. They will also be updated to no longer interact with the IVR Web Service, but to gather the information from the CalSAWS database directly. This will require updating the Lambda to also include the business logic that resides in the IVR Web Service.

2.1.1 List of Lambdas to update.

The following list are all the Self Service Lambdas currently in use

Lamabda Name	Function
Custom_CaseLookupWebserviceLambda	Looks up case information after a successful Voice Authentication.
Custom_CaseValidationWebserviceLambda	Validates the case number entered exists in the county called.
Custom_ChangePINWebServiceLambda	Change existing IVR PIN
Custom_DeleteVoiceprintWebserviceLambda	Send request to Nuance Servers to delete the voice print, and updates BVP_CODE column to N.

Lamabda Name	Function
Custom_GenerateFormWebServiceLambda	Generates Benefit history document (CFS 142).
Custom_GetSentFormsInfoWebserviceLambda	Retrieves information on SAR7 and TMC form.
Custom_ResendFormWebserviceLambda	Requests to resend either SAR7 or TMC.
Custom_PersonLookupWebserviceLambda	Checks if a caller has a Voice Print or not based on caller ID.
Custom_RequestPINWebserviceLambda	Requests a new IVR PIN
Custom_UpdateBvpInfoWebServiceLambda	Updates BVP_CODE column to Y after successful voice enrollment.
Custom_ConfirmAppointmentWebserviceLambda	Updates CONFIRM_IND column to Y
Custom_GetAppointmentsWebserviceLambda	Retrieves past and future appointments information.
Custom_RescheduleAppointmentWebserviceLambda	Reschedules a future appointment within the same month.
Custom_LoginProcessorLambda	Invokes other lambdas for login in San Bernardino county only.
Custom_GetEBTOrderReplacementWebserviceLambda	Cancel existing EBT and submits request for a new one in San Bernardino county only.
Custom_GetEBTPersonIdCaseByDOBWebserviceLambda	Get person ID and Case Information for EBT replacement via DOB for San Bernardino county only.

Lamabda Name	Function
Custom_PredictiveHandlingLookupLambda	Returns the PH_CODE for San Bernardino county callers.
Custom_UpdateCallerResponseWebserviceLambda	Updates CALLER_RESP to Y or N
Custom_GetDistrictOfficeWebServiceLambda	Get District Office ID for Riverside county only.
Custom_LoginWebserviceLambda	Authenticates callers via Case Number and IVR PIN.
Custom_UpdateExitReasonForCallWebserviceLambda	Update IVR_EXIT_RSN column to match caller's reason for calling.
Custom_GetCalFreshProgramInfoWebServiceLambda	Invoked by LoginProcessor to retrieve CalFresh benefits information.
Custom_GetCalWORKsProgramInfoWebServiceLambda	Invoked by LoginProcessor to retrieve CalWORKs benefits information.
Custom_GetMedicalProgramInfoWebServiceLambda	Invoked by LoginProcessor to retrieve MediCal benefits information.
Custom_GetWTWProgramInfoWebServiceLambda	Invoked by LoginProcessor to retrieve Welfare to Work benefits information.
Custom_DoLoginWebServiceSBLambda	Authenticaes San Bernardino county callers with Case and PIN
Custom_DoLoginWithSSNAndDOBWebServiceLambda	Authenticaes San Bernardino county callers with SSN and DOB.

Lamabda Name	Function
Custom_ValidateIVRESignatureWebServiceLambda	Marks a document as e-signed
Custom_CancelAppointmentWebServiceLambda	Cancels upcoming appointment.
Custom_OutboundResendFormWebServiceLambda	Resends SAR7 document.
Custom_SetAppointmentReminderCompleteWebServiceLambda	Update the appointment reminder call as completed.
Custom_SetDocumentReminderCompleteWebServiceLambda	Updates the document reminder call as completed.

2.1.2   Prevent Reprint of Converted Forms.

When a customer invokes the Custom_OutboundResendFormWebServiceLambda, the IVR System needs to validate wether or not the requested form was converted or not. If the form has an original generation date before 9/26/2021, the system should proceed down the Failed path of the Lambda.
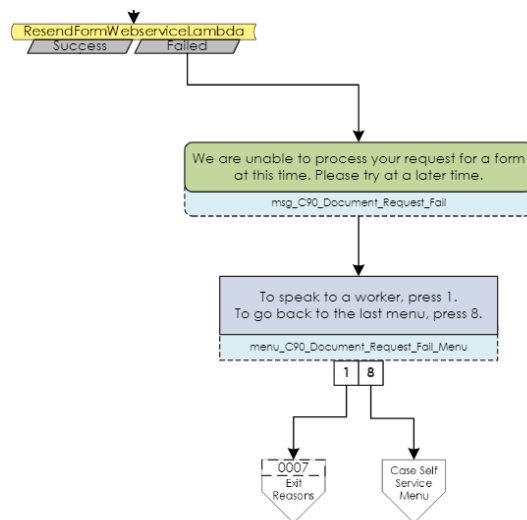

Figure 2.1.2 – Request Reprint call flow.

2.1.3   Add new Validate Caller and Get Case List Lambdas.

Create a new lambda that will validate a caller's identity when they enter their phone number, Social Security Number, Date of Birth, and/or IVR PIN. Once validated this lambda will return the customer's case number and IVR PIN. If the customer does not have an IVR PIN, the IVR will attempt to generate a new IVR PIN for the customer if they entered their Social Security number, otherwise they will be sent to a queue to speak to an eligibility worker.

If a customer is associated to more than one case, the get case list lambda will return a list of cases the customer is on where their person status is not "Out of Home". The customer will then be asked to choose from the list of cases which one they are calling about.

2.2   Update Custom CCP

When a contact center worker logs into the Custom CCP, the application checks what security permission the worker has. ~~This security check needs to be modified to interact with Amazon Connect rather than C-IV.~~ This security check needs to be modified to no longer exist in C-IV but as a CalSAWS Identity Provider role.

2.2.1   Update CCP security rights to CalSAWS Identity Provider Roles.

The CCPAgent, CCPSurpervisor, and CCPMessageSender rights currently exist in C-IV. This functionality will be replicated as a CalSAWS Identity Provider role.

If an Amazon Connect agent exists in the CalSAWS Identiy Provider they will have the CCPAgent automatically. If a supervisor needs access to the Team Performance Panel they will need to have the CCPSupervisor role applied to their account in the CalSAWS Identity Provider. If a manager needs access to the Message of the Day Sender panel, they will need the CCPMessageSender role applied to their account.

2.2.2   Update CCP Environment Variables.

When an authenticated call is delivered to an agent, the Custom CCP will open the Case Summary page. If an unauthenticated caller arrives, the Custom CCP will open the Person Search page.

The CCP_Screen_Pop Environment Variable will be updated to the following.

```
https://web.calsaws.net/c-iv/
```

2.3   Update the ~~IVR PIN~~ Call Flow Prompts

CalSAWS currently uses a 6 digit IVR PIN, and C-IV Counties use a 4 digit PIN. Existing C-IV customers will still have an IVR PIN, but if they choose to change it, or a new PIN is requested, it will be a six digit PIN. The Call Flow needs to be updated to reflect this change. This change will impact all C-IV county call flows.

The IVR also mentions the C4Youself portal in multiple locations. These prompts will be updated to now direct the customer to BenefitsCal. For more information on the new prompts please see the attached Call Flows.

Please enter your IVR PIN. If you do not have or do not remember your IVR PIN, please press Star to continue.

digits_C90_Collect_PIN

PIN
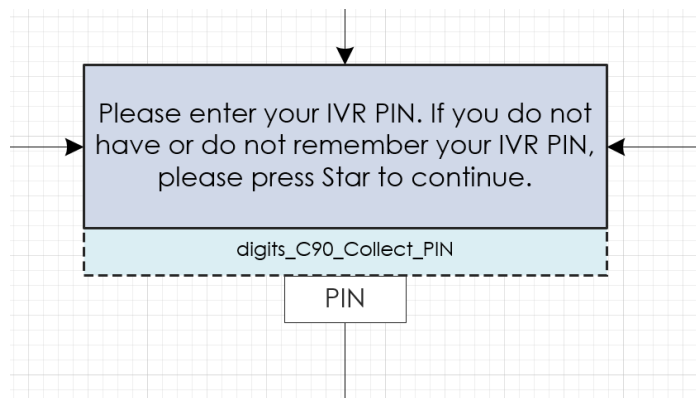
Figure 2.3.1 – Collect PIN prompt.
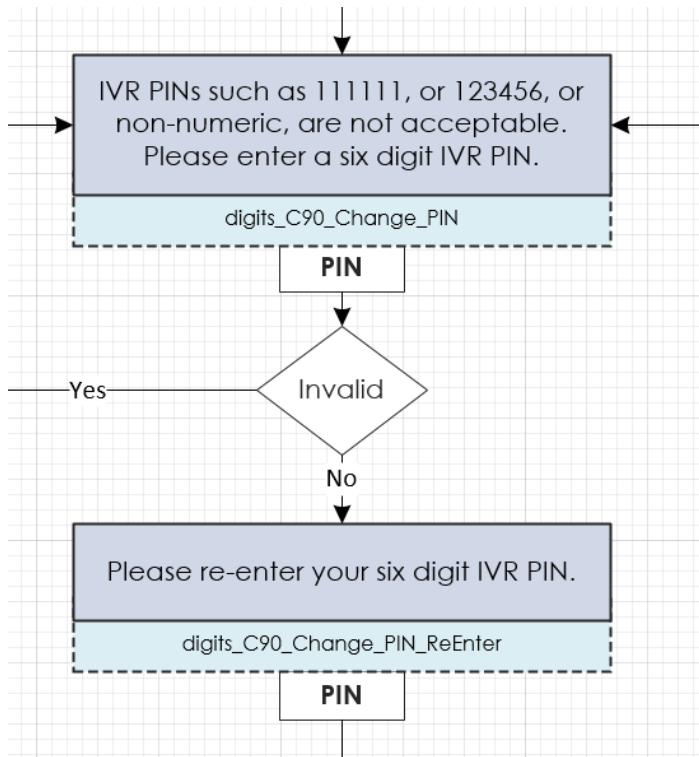
Figure 2.3.2 – Change PIN Prompts.

2.4 Modify IVR Authentication Method

New Cases generated in CalSAWS will contain letters as well as numbers. Customers will no longer be able to enter their case number if it contains letters, so the IVR will no longer prompt them to enter it.

The IVR will now prompt the customer to enter their phone number and their social security number. If the customer does not have, or doesn't know their social security number they will be prompted for their date of birth, and/or their IVR PIN. A customer will only be prompted for their date of birth or IVR PIN if the IVR is unable to narrow down the customer to a single person in the CalSAWS database.

For additional information please see the attached call flows.

2.5 Update E-Signature Text Message Phone Number

2.5.1 Overview

The real-time web service is responsible for sending the initial text when "Text" is selected for 'Signature Capture Type' in the Electronic Signature page. The CalSAWS Text Messaging solution sends an English or Spanish

text message to the customer with phone numbers for customers to contact in case of questions. Batch Job PB00A400 sends reminder texts to the customer if the E-Signature process is not. Update both the web service and batch job to use one phone number for all counties, including Los Angeles County.

2.5.2 Description of Changes

1. Update the web service which sends text messages to the customer requesting an E-Signature and handles the subsequent replies to the customer's responses
   a. Update messages that have a 'Phone Number' parameter in the message to use (844) 859-2100 for all counties
   b. Update phone numbers in both English and Spanish for the following message types:
      i. E-signature request
      ii. E-signature complete
      iii. E-signature invalid code
      iv. E-signature code expired
      v. E-signature no longer required
2. Update batch job PB00A400 which sends text messages for incomplete E-Signature
   a. Update messages that have a 'Phone Number' parameter in the message to use (844) 859-2100 for all counties
   b. Update phone numbers in both English and Spanish for the E-signature Not Complete message type.

2.5.3 Execution Frequency

Real-Time (During Business Hours)

2.5.4 Key Scheduling Dependencies

None

2.5.5 Counties Impacted

All Counties

2.5.6 Data Volume/Performance

No known data volume impacts.

2.5.7 Failure Procedure/Operational Instructions

N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	IVR	Butte County Call Flow	C04 County Call Flow_CalSAWS.vsdx C04 Verbiage Sheet.xlsx
2	IVR	Humbold County Call Flow	C12 County Call Flow_CalSAWS.vsdx C12 Verbiage Sheet.xlsx
3	IVR	Kern County Call Flow	C15 County Call Flow_CalSAWS.vsdx C15 Verbiage Sheet.xlsx
4	IVR	Kings County Call Flow	C16 County Call Flow_CalSAWS.vsdx C16 Verbiage Sheet.xlsx
5	IVR	Marin County Call Flow	C21 County Call Flow_CalSAWS.vsdx C21 Verbiage Sheet.xlsx
6	IVR	Monterey County Call Flow	C27 County Call Flow_CalSAWS.vsdx C27 Verbiage Sheet.xlsx
7	IVR	Riverside County Call Flow	C33 County Call Flow_CalSAWS.vsdx C33 Verbiage Sheet.xlsx
8	IVR	San Bernardino County Call Flow	C36 County Call Flow_CalSAWS.vsdx C36 Verbiage Sheet.xlsx
9	IVR	Shasta County Call Flow	C45 County Call Flow_CalSAWS.vsdx C45 Verbiage Sheet.xlsx
10	IVR	Stanislaus County Call Flow	C50 County Call Flow_CalSAWS.vsdx C50 Verbiage Sheet.xlsx
11	IVR	Sutter County Call Flow	C51 County Call Flow_CalSAWS.vsdx C51 Verbiage Sheet.xlsx
12	IVR	Yuba County Call Flow	C58 County Call Flow_CalSAWS.vsdx C58 Verbiage Sheet.xlsx
13	IVR	Non-CSC Call Flow	C90 County Call Flow_CalSAWS.vsdx C90 Verbiage Sheet.xlsx
14	IVR	eSign Call Flow	eSign Call Flow_CalSAWS.vsdx
15	IVR	Outbound Call Flow	Outbound Call Flow_CalSAWS.vsdx Outbound Verbiage Sheet.xlsx
16	IVR	RCC Call Flow	RCC Call Flow_CalSAWS.vsdx
17	IVR	Text Help Call Flow	Text Help Call Flow_CalSAWS.vsdx Text Help Verbiage Sheet.xlsx

APPENDIX

Amazon Connect - https://aws.amazon.com/connect/features/

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-207312 | DDID 1476, 1775, 2303

Consolidate Central Print Process for all 58 Counties

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

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
01/25/2021	1.0	Initial Revision	Rainier Dela Cruz
02/24/2021	1.1	Updates per QA comments	Rainier Dela Cruz
03/01/2021	1.2	Added assumption about the GEN 1365.	Rainier Dela Cruz
03/10/2021	1.3	Added recommendations to update the Generate NOA batch jobs to run for all counties.	Rainier Dela Cruz
03/18/2021	1.4	Removed recommendation to conduct central print testing. The recommendation is being moved to CA-218205.	Rainier Dela Cruz
04/28/2021	1.5	Removed the recommendation to shift the current insertion barcode and added a recommendation to add a QR barcode on the upper left edge of the document, like the insertion barcode in C-IV.	Rainier Dela Cruz
5/10/2021	1.6	Added recommendation to schedule the FTP Jobs for the C-IV Counties and create the jobs for the CalWIN Counties.	Rainier Dela Cruz
06/02/2021	1.7	Added recommendation to move the packets other than Non-MAGI and Mixed Household RE packets to priority 5. Add recommendation to add the priority 5 FTP jobs for the Migration Counties.	Rainier Dela Cruz
06/07/2021	1.8	Updated the technical note in Section 2.2.2 for clarity.	Rainier Dela Cruz
06/08/2021	1.9	Updated the form number for the New Worker Letter and added a recommendation for add the packet names for the CF RE, CW RE, and CW/CF RE packets.	Rainier Dela Cruz
06/10/2021	2.0	Removed the recommendation for the new QR insertion barcode. This recommendation will be moved to	Rainier Dela Cruz

		CA-229866.	

Table of Contents

1 OVERVIEW

1.1 Current Design

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

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

1.2 Requests

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

1.3 Overview of Recommendations

1. Update the mailing priority for forms and NOAs.

2. Update the Generate NOA batch processes to run for all counties.

3. Schedule the bundling and print file batch processes for the C-IV Counties.

4. Create new bundling and print file batch processes for the CalWIN Counties.

5. Update the bundling batch property to increase the maximum page limit for the flat mail and standard mail envelopes.

6. Update the naming convention for the bundles to not include the agency code for the migration counties.

7. ~~Update the location of the insertion barcode to match~~ Add a new 2D QR insertion barcode on the upper left edge of the document, like the insertion barcode in C-IV.

8. ~~Conduct central print testing with the new CalSAWS print vendor.~~ Schedule the print file transfer batch processes for the C-IV Counties.

9. Create the print file transfer batch processes for the CalWIN Counties.

1.4 Assumptions

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

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

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

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

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

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

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

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

9. SCR **CA-218205** will turn on the functionality to include the GEN 1365 with all correspondence generated. The central print testing of the GEN 1365 and the updates to the mailing priorities will be conducted with this SCR.

10. SCR **CA-226573** will update the IP address of the file transfer batch job to the IP address of the new print vendor.

11. The mailing priority for the Non-MAGI Screening and Turning 65 Packets will be updated from priority 04 to priority 05 with SCR **CA-227257.**

2   RECOMMENDATIONS

2.1   Update the Mailing Priority

2.1.1   Overview
Update the current mailing priority of the forms and NOAs.

2.1.2   Description of Change

1. Update the print dynamic NOA logic to set the mail priority to 01 for MAGI NOAs.

2. Update the mailing priority for the SAR 7 Addendum/SAR 2/SAR 7 form to priority 00.

3. Update the CF 285 as follows:
    a. Update the mailing priority to 05.
    b. Update the form to use the CalSAWS standard header (Header 1) when the form is generated for a case managed in Los Angeles County and to use Migration Counites' RE Packet header when the form is generated for a case managed in a migration county. By default, the Migration Counites' RE Packet header is displayed. The county code is passed in and the scripting determines which header is visible. For example, if the form is generated by Los Angeles County, the CalSAWS standard header is displayed, and the Migration Counites' RE Packet header is hidden. If the form is generated outside the context of the case (generating a blank template), use the worker that is generating the forms to determine the county code. An example of the CalSAWS standard header and the Migration Counites' RE Packet header are below.

COUNTY OF

_____
_____
_____

APPLICATION FOR CALFRESH BENEFITS

_____
_____
_____

STATE OF CALIFORNIA

HEALTH AND HUMAN SERVICES AGENCY
CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Date: _____
Case Name: _____
Case Number: _____
Worker Name: _____
Worker ID: _____
Worker Phone Number: _____
Customer ID: _____

_____
_____
_____

Figure 2.1.2 – Migration Counties' RE Packet Header

4. Update the mailing priority for the CF 32 and the M40-107D forms to priority 01.

5. Update the mailing priority for the DCFS 6055, W-9, SAR 3, PA 6062 to priority 01.

    Note: Currently, these forms have a mailing priority of 1, instead of 01.

6. Update the mailing priority for the following packets for the Migration Counties from 04 t0 05:
    a. CalFresh Recertification Packet
    b. CalWORKs Redetermination Packet
    c. CalWORKs/CalFresh RE Packet
    d. MAGI RE Packet
    e. TNB 4 Recertification Packet

    Note: The packets with mailing priority 04 are bundled and sent out in a full size flat mail envelope. The packets with mailing priority 05 are bundled and sent out in a half size flat mail envelope. The packets above will be going in a half size flat mail envelope. therefore, the mailing priority will need to be updated from 04 to 05.

2.2   Update to Generate NOA Batch Jobs

2.2.1   Overview

The Generate NOA batch jobs find NOAs that are in 'Pending Review', 'Accepted – Print Centrally', or 'Hold for Pickup' where a PDF has not been generated and generates the PDF. It will also update the status from

'Pending Review' or 'Accepted – Print Centrally' to 'Printed Centrally'. The current batch jobs in CalSAWS only run for Los Angeles County. Update the batch jobs to run for all counties.

2.2.2 Description of Change

1. Update the Generate NOA batch sweep (PB19P599) to a '00' batch job and configure it to run for all counties.

2. Update the Dynamic NOA Balancing batch job (PB19P600) to a '00' batch job and configure it to run for all counties.

3. Update the Generate NOA thread jobs (PB19P601 – PB19P760) to a '00' job and configure them to run for all counties.

4. Add additional Generate NOA thread jobs so the total number of thread jobs is 300.
   Technical Note: *The additional thread jobs, as well as the existing jobs, will be configured to run for all counties. The distribution of the threads is done by the balancer. The balancer will evenly distribute the threads amongst the counties, however, depending on the number of NOAs being processed, this distribution can change.*

2.2.3 Execution Frequency

No change.

2.2.4 Key Scheduling Dependencies

No change.

2.2.5 Counties Impacted

All Counties.

2.2.6 Data Volume/Performance

Approximately 1,200,000 records are processed monthly by Generate NOA batch jobs. Please note that the number of records processed by each job is an approximation, and this number may vary.

2.2.7 Failure Procedure/Operational Instructions

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

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

2.3.1 Overview

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

2.3.2 Description of Change

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

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

2.3.3 Execution Frequency

These batch jobs run daily.

2.3.4 Key Scheduling Dependencies

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

2.3.5 Counties Impacted

C-IV Migration Counties.

2.3.6 Data Volume/Performance

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

2.3.7 Failure Procedure/Operational Instructions

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

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

2.4.1 Overview

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

2.4.2 Description of Change

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

2.4.3 Execution Frequency

These batch jobs run daily.

2.4.4 Key Scheduling Dependencies

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

2.4.5 Counties Impacted

C-IV Migration Counties.

2.4.6 Data Volume/Performance

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

2.4.7 Failure Procedure/Operational Instructions

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

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

2.5.1 Overview

The print file transfer batch jobs are responsible for sending the bundles over to the print center to be printed. The jobs exist for the C-IV Migration Counties but are not scheduled to run. Schedule the file transfer batch jobs.

2.5.2 Description of Change

1. Schedule the batch jobs for the C-IV Migration Counties:
   a. PBXXP500
   b. PBXXP501
   c. PBXXP504
   d. PBXXP420
   e. PBXXP421
   f. PBXXP424

   Note: *The 'XX' denotes the county code. For example, PB36P500 is the file transfer job for San Bernardino County.*

2. Create the following batch jobs for the C-IV Migration Counties:
   a. PBXXP505
   b. PBXXP425

2.5.3 Execution Frequency

These batch jobs run daily.

2.5.4 Key Scheduling Dependencies

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

2.5.5 Counties Impacted

C-IV Migration Counties.

2.5.6 Data Volume/Performance

Approximately 5,000 bundles are transferred monthly by the PBXXP500 job.

2.5.7 Failure Procedure/Operational Instructions

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

2.6 Create the Bundling Batch Jobs for the CalWIN Migration Counties

2.6.1 Overview

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

2.6.2 Description of Change

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

2.6.3 Execution Frequency

These batch jobs run daily.

2.6.4 Key Scheduling Dependencies

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

2.6.5 Counties Impacted

CalWIN Migration Counties.

2.6.6 Data Volume/Performance

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

2.6.7 Failure Procedure/Operational Instructions

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

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

2.7.1 Overview

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

2.7.2 Description of Change

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

2.7.3 Execution Frequency

These batch jobs run daily.

2.7.4 Key Scheduling Dependencies

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

2.7.5 Counties Impacted

CalWIN Migration Counties.

2.7.6 Data Volume/Performance

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

2.7.7 Failure Procedure/Operational Instructions

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

2.8 Create the Print File Transfer Batch Jobs for the CalWIN Migration Counties

2.8.1 Overview

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

2.8.2 Description of Change

1. Create the following print file transfer batch jobs for the CalWIN Migration Counties:
   a. PBXXP500
   b. PBXXP501
   c. PBXXP504

d. PBXXP505
e. PBXXP420
f. PBXXP421
g. PBXXP424
h. PBXXP425

Note: *The 'XX' denotes the county code. For example, PB34P500 is the file transfer job for Sacramento County.*

2.8.3 Execution Frequency

These batch jobs run daily.

2.8.4 Key Scheduling Dependencies

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

2.8.5 Counties Impacted

CalWIN Migration Counties.

2.8.6 Data Volume/Performance

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

2.8.7 Failure Procedure/Operational Instructions

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

2.9 Update the Bundling Batch Job Property

2.9.1 Overview

Currently in CalSAWS, the maximum number of pages for the standard mail envelopes is 8 and the maximum number of pages for the flat mail envelopes is 20. Update the bundling batch properties to increase the maximum number of pages for the flat mail and standard mail envelopes.

2.9.2 Description of Change

1. Update the batch property to:
   a. Add a maximum page limit of 49 physical pages for the full size flat mail envelope used for mailing priority 04.

b. Add a maximum page limit of 24 physical pages for the half size flat mail envelope used for mailing priority 05.

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

2.10 Update the Bundle Naming Convention

2.10.1 Overview

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

2.10.2 Description of Change

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

2. Update the name construction logic to include the agency code in the bundle name for only the bundles created for Los Angeles County. An example of a Los Angeles County bundle name is '**01272021_102401_19_DP_1_SM_NO_001.pdf**'. An example of a bundle name for a Migration County is '**01272021_102401_36_1_SM_NO_001.pdf**'.

3. Add the packet name for the CalFresh Recertification, CalWORKs Redetermination, and the CW/CF Redetermination Packets for the Migration Counties to the Redetermination Bundle Names Codes Table (CT 10448).
   Note: The values from this codes table is used when constructing the bundle names for the packets. The packets are in mailing priority 04 and 05. For the CF 285, since it is not a packet and is in mailing priority 05, it will not have the form name in the bundle name.

4. Update the outgoing envelope type for mailing priority 09 to standard mail when creating the bundle name.
   Note: Currently, the only form with mailing priority 09 is the DCFS 1800 (Blue Payment Voucher). The outgoing envelope type will be updated from 'BV' to 'SM' for the record in the document template table.

2.11 Update the Insertion Barcode Location

2.11.1 Overview

The insertion barcode is used by the central print vendor to identify which documents to insert in an envelope. Currently in CalSAWS, this barcode is located at the lower left edge of the document. The new central print vendor has requested the insertion barcode be moved to the top 1/3 of the document. Update the location of the insertion barcode to match a new QR insertion barcode be place at the upper left edge of the document, like the insertion barcode in C-IV.

2.11.2 Description of Change

1. Update the location of the insertion barcode to match Add a new 2D QR insertion barcode on the upper left edge of the document, like the insertion barcode in C-IV.

2. Conduct central print testing with the **current** print vendor to test the new location of the insertion barcode. As part of central print testing, generate Approval, Benefit Change, Denial and Discontinuance NOAs for CalFresh, CalWORKs and Medi-Cal, generate all the RE packets, and generate the following forms:

   Note: The central print testing with the new print vendor to test the new location of the insertion barcode will be conducted with SCR **CA-218205.**

Form Number	Form Name
CSF 163*	New Worker Letter
PA 2492	Payment Verification System (PVS) Participant Contact Letter
CW 2200	Request for Verification
SAR 2	Reporting Changes for Cash Aid and CalFresh
MC Reminder Notice	MC Reminder Notice
SAR 7	Eligibility Status Report
PA 6174	CalFresh Solicitation Letter
CF 386	Notice of Missed Interview
PA 6050	Customer Service Center PIN Mailer
PA 6049	Customer Service Center ID Card

CF 377.2	CalFresh Notice of Expiration of Certification
CF 1	Notice to CalFresh Recipients
NA 960X SAR	CW/RCA/CF SAR 7 - Not Received
MC 355	Medi-Cal Request for Information
MC 355 Reminder	Medi-Cal Request for Information Reminder Notice
PA 2418B	IEVS-IFDS/NHR Statement Regarding Employment for Discontinued Participants
CF 29A	CalFresh Initial Appointment Letter
AR 2	Reporting Change for CalWORKs and CalFresh
SAWS 30	Notification of New Employment
SSP 14	Authorization for Reimbursement of Interim Assistance Initial Claim or Post-eligibility Case
NA 820	Approval of Transportation
TEMP NA 1232-1	EBT Account - CalFresh Notice

***Note:** The ADM 101-LA was updated to CSF 163 with SCR CA-215133.

2.12 Central Print Testing

2.12.1 Overview

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

2.12.2 Description of Change

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

4. Create a test bundle for mailing priority 1 for Los Angeles County and Migration Counties.

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

5. Create a test bundle for mailing priority 2 for Los Angeles County.
    a. Generate a test bundle that consists of the PA 6049 (Customer Service Center ID Card form).

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

7. Create a test bundle for mailing priority 4 for Los Angeles County and Migration Counties.
    a. Generate a test bundle that consists of Los Angeles County only packets with mailing priority 4.
    b. Generate a test bundle that consists of Migration Counties only packets with mailing priority 4.

~~c. When generating the test bundles, include the following packets:~~
  ~~i. MAGI Redetermination Packet~~
  ~~ii. Non-MAGI Redetermination Packet~~
  ~~iii. Mixed Redetermination Packet~~
  ~~iv. CF Recertification Packet – Migration Counties test bundle only~~
  ~~v. CW Recertification Packet – Migration Counties test bundle only~~
  ~~vi. CW/CF Recertification Packet – Migration Counties test bundle only~~

~~8. Create a test bundle for mailing priority 7 for Los Angeles County.~~
  ~~a. Generate a test bundle that consists of forms with mailing priority 7 for Los Angeles County.~~

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

3   SUPPORTING DOCUMENTS

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

4 REQUIREMENTS

4.1 Migration Requirements

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

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

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214740 | DDID 2297

FDS: API - Case API

	DOCUMENT APPROVAL HISTORY	
CalSAWS	Prepared By	Avi Bandaranayake
	Reviewed By	Amy Gill

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/18/20	1.0	Initial Draft	Avi Bandaranayake
2/22/21	1.1	Updating section 2.1.4, removing worker object from response.	Avi Bandaranayake
3/4/2021	1.2	Updated person object to include a phone number object. Updated return objects. Added Header details.	Avi Bandaranayake
5/20/2021	1.3	Updated technical specification. Please see supporting html file. Updated response object for clarity.	Avi Bandaranayake
6/1/2021	1.4	Updated response object to include Gender. Please see supporting html file.	Avi Bandaranayake

Table of Contents

1   OVERVIEW

1.1   Current Design

There is no Application Programming Interface (API) available to external partners which allows access to read case data from the CalSAWS system.

1.2   Requests

Create a service that will allow the 58 Counties to search for cases by case number, EBT card/account number, individual demographic information, or participant phone number.

1.3   Overview of Recommendations

Create a new endpoint that will retrieve case information.

1.4   Assumptions

1. Results are limited to county level data.
2. Results returned will be paginated to 20 values by default.
3. Limit parameter will allow a maximum of 250 values returned by default. Requesting a larger value will result in a 400 error response.
4. Code table values for this API can be found in the Appendix.
5. Code table values are limited to those available as of the API release date.
6. Requests and Responses will use Code Table values as described in the Appendix.
7. Offset and limits will apply only if paginated results are available.
8. Offset beyond the max available will return a 404 error.
9. Offset and limits will only apply to the root element
10. Sorting and ordering only applies to the root element.
11. Null or empty values will not be returned in the response objects.
12. Requests sent with improper data types will result in 400 error with a stack trace.

4

2 RECOMMENDATIONS

2.1 Case API

2.1.1 Overview

This API will expose case data from the CalSAWS system.

2.1.2 Description of Changes

The Case API will include the following filters, data elements, and error handling. Please refer to the **cases.html** document for the technical specifications and data element definitions.

Additional examples and specific error messages may be added during build for the developer portal.

2.1.3 Request

The API will include the following request parameters for case:

1. EBT card number
2. Case number
3. SSN
4. CIN
5. First name
6. Last name
7. DOB
8. Phone number

2.1.4 Response

The Case API will return the following objects and elements.

```
[
  {
    "persId": "string",
    "ssn": "string",
    "lastName": "string",
    "midName": "string",
    "firstName": "string",
    "nameSuffix": "string",
    "dob": "2021-05-20",
    "age": "string",
    "gender": "string",
    "emailAddr": "string",
    "spokenLang": "string",
    "writtenLang": "string",
    "ethnicity": "string",
    "phNumbers": [
      {
        "type": "string",
        "phNum": "string"
```

```
      }
    ],
    "addr": [
      {
        "type": "string",
        "cityName": "string",
        "line1Addr": "string",
        "line2Addr": "string",
        "stateCode": "string",
        "county": "string",
        "regn": "string",
        "zipCodeSuffix": "string",
        "zipCodeNum": "string",
        "country": "string"
      }
    ],
    "cases": [
      {
        "caseNum": "string",
        "caseName": "string",
        "confidentialFlags": [
          {
            "comnt": "string",
            "rmvdDate": "2021-05-20",
            "confidentialFlagTypes": [
              {
                "confidFlagType": "string"
              }
            ]
          }
        ],
        "caseFlags": [
          {
            "caseFlagType": "string",
            "begDate": "2021-05-20",
            "endDate": "2021-05-20",
            "dueDate": "2021-05-20",
            "expireDate": "2021-05-20"
          }
        ]
      }
    ]
  }
]
```

2.1.5 Headers

The following headers are required and included in all operations by the application gateway and do not need to be included in the request.

X-County-Code: This header is added to all requests by the application gateway. The county code header is used to limit returned values to be specific to the county.

X-App-Id: This header is added to all requests by the application gateway. This is a unique App-id that is created for each county application during the onboarding process. This Id should be referenced against a mapping table with staff Ids (one App-Id per staff id) that will in

turn be used for database audit fields (created_by, updated_by) when an application creates or updates data in the CalSAWS system.

2.1.6 Error Messages

1. Bad request. body/parameter {parameter name} is invalid. {Reason}
2. Authorization information is missing or invalid.
3. Bad request. Request body/parameter {parameter name} was not found.
4. Request Timeout.
5. Internal Server Error.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	API	Detailed Endpoint document	cases.html

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
DDID 2297	The CONTRACTOR shall create a service allowing 58 Counties to retrieve case information utilizing a CalSAWS API. The service will allow the 58 Counties to search for cases by case number, EBT card/account number, individual demographic information, or participant phone number. The service will return a list of cases and a list of people on the case including individual	The API complexity accounts for the ability to search for cases utilizing multiple filters and variety of individual level data that will be returned.	Create case API

demographic information and contact information. The case level information will return any confidentiality indicators associated to the case and case flags.		

5 APPENDIX

The API complexity accounts for the ability to search for cases utilizing multiple filters and variety of individual level data that will be returned.

CT 225 Ethnic Code
White, Non-Hispanic
Hispanic
Other Asian/Pacific Islander
American Indian/Alaska Native
Filipino
Black
Chinese
Cambodian
Japanese
Korean
Samoan
Asian Indian
Hawaiian
Guamanian
Laotian
Vietnamese

CT 51 Confidentiality Type
Adoptions Assistance
CWS AAP Mask Address
Domestic Violence
Employee/Employee Relative
Foster Care
High Profile
Human Trafficking
CWS Foster Care/KinGap Mask Address
Minor Consent

| CWS Sealed Mask Address |
| CWS Sensitive Mask Address |

CT 1082 Flag Type
Federal
State
County
Court Case
Study
Civil Rights
Error Prone and High Risk

CT 967 Name Suffix
I
II
III
IV
V
VI
VII
VIII
IX
X
Jr.
Sr.

CT 241: State
AK
AL
AR
AZ
CA
CO
CT
DE
FL
GA
HI
IA
ID

CT 241: State
IL
IN
KS
KY
LA
MA
MD
ME
MI
MN
MO
MS
MT
NC
ND
NE
NH
NJ
NM
NV
NY
OH
OK
OR
PA
RI
SC
SD
TN
TX
UT
VA
VT
WA
WI
WV
WY

CT 15: County
Alameda

CT 15: County
Alpine
Amador
Butte
Calaveras
Colusa
Contra Costa
Del Norte
El Dorado
Fresno
Glenn
Humboldt
Imperial
Inyo
Kern
Kings
Lake
Lassen
Los Angeles
Madera
Marin
Mariposa
Mendocino
Merced
Modoc
Mono
Monterey
Napa
Nevada
Orange
Placer
Plumas
Riverside
Sacramento
San Benito
San Bernardino
San Diego
San Francisco
San Joaquin
San Luis Obispo
San Mateo

CT 15: County
Santa Barbara
Santa Clara
Santa Cruz
Shasta
Sierra
Siskiyou
Solano
Sonoma
Stanislaus
Sutter
Tehama
Trinity
Tulare
Tuolumne
Ventura
Yolo
Yuba
Out of State

CT 244 Region
Countywide
Mountains
Nationwide
Statewide
Valley
West End
Bakersfield
Chowchilla
Corcoran
Districts
Eastern County
Eastern Slope
Fort Bragg
Lower Desert
Madera
Mountain
Region 10
Region 1
Region 11
Region 12

CT 244 Region
Region 13
Region 14
Region 15
Region 16
Region 17
Region 18
Region 19
Region 2
Region 20
Region 21
Region 22
Region 23
Region 24
Region 25
Region 26
Region 27
Region 28
Region 29
Region 3
Region 30
Region 31
Region 32
Region 33
Region 34
Region 35
Region 36
Region 37
Region 38
Region 39
Region 4
Region 40
Region 5
Region 6
Region 7
Region 8
Region 9
Rest of County
Upper Desert
Ukiah
Western County

CT 244 Region
Willits
Western Slope

CT 228: Country
Aruba
Antigua
United Arab Emirates
Afghanistan
Algeria
Azerbaijan
Albania
Armenia
Andorra
Angola
American Samoa
Argentina
Australia
Ashmore & Cartier Islands
Austria
Anguilla
Antarctica
Bahrain
Barbados
Botswana
Bermuda
Belgium
Bahamas
Bangladesh
Belize
Bosnia & Herzegovina
Bolivia
Burma
Benin
Belarus
Soloman Islands
Navassa Island
Brazil
Bassas Da India
Bhutan
Bulgaria

CT 228: Country
Bouvet Island
Brunei
Burundi
Canada
Cambodia
Chad
Sri Lanka
Congo, Republic of
Congo, Democratic Republic of
China
Chile
Cayman Islands
Cocos (Keeling) Islands
Cameroon
Comoros
Colombia
No Mariana Islands
Coral Sea Islands
Costa Rica
Central African Republic
Cuba
Cape Verde
Cook Islands
Cyprus
Canal Zone
Denmark
Djibouti
Dominica
Jarvis Island
Dominican Republic
Ecuador
Egypt
Ireland
Equatorial Guinea
Estonia
Eritrea
El Salvador
Ethiopia
Europa Island
Czech Republic

CT 228: Country
Antarctic Lands
French Guiana
Finland
Fiji
Falkand Islands
Federated States of Micronesia
Faroe Islands
French Polynesia
Baker Island
France
French Southern & Antarctic Lands
Gambia
Gabon
Georgia
Ghana
Gibraltar
Grenada
Guernsey
Greenland
Germany
Glorioso Islands
Guadeloupe
Guam
Greece
Guatemala
Guinea
Guyana
Gaza Strip
Haiti
McDonald Island
Hong Kong
Heard Island & McDonald Islands
Honduras
Howland Island
Croatia
Hungary
Iceland
Indonesia
Man, Isle of
India

CT 228: Country
British Indian Ocean
Clipperton Island
Iran
Israel
Italy
Cote d'Ivoire (Ivory Coast)
Iraq
Japan
Jersey
Jamaica
Jan Mayen
Jordan
Johnston Atoll
Juan De Nova Island
Kenya
Kyrgyzstan
Korea (North)
Kingman Reef
Kiribati
Republic of Korea (South)
Christmas Island
Kuwait
Kazakhstan
Laos
Lebanon
Latvia
Lithuania
Liberia
Slovakia
Palmyra Atoll
Liechtenstein
Lesotho
Luxembourg
Libya
Madagascar
Martinique
Macau
Moldova
Mayotte
Mongolia

CT 228: Country
Montserrat
Malawi
Montenegro
Macedonia
Mali
Monaco
Morocco
Mauritius
Midway Islands
Mauritania
Malta
Oman
Maldives
Mexico
Malaysia
Mozambique
New Caledonia
Niue
Norfolk Island
Niger
Vanuatu
Nigeria
Netherlands
Norway
Nepal
Nauru
Surinam
Netherlands Antilles
Nicaragua
New Zealand
South Sandwich Island
Grenadines, The
Paraguay
Pitcairn Islands
Peru
Paracel Islands
Spratley Islands
Pakistan
Poland
Panama

CT 228: Country
Portugal
Papua New Guinea
Republic of Palau
Guinea-Bissau
Qatar
Serbia
Reunion
Marshall Islands
Romania
Philippines
Puerto Rico
Russia
Rwanda
Saudi Arabia
St Pierre & Miquelon
St Kitts & Nevis (St Christopher & Nevis)
Seychelles
South Africa
Senegal
St Helena
Slovenia
Sierra Leone
San Marino
Singapore
Somalia
Spain
St Lucia
Sudan
Svalbard
Sweden
South Georgia & the South Sandwich Islands
Syria
Switzerland
Trinidad & Tobago
Tromelin Island
Thailand
Tajikistan
Turks & Caicos Islands
Tokelau
Tonga

CT 228: Country
Togo
Sao Tome & Principe
Tunisia
East Timor
Turkey
Tuvalu
Taiwan
Turkmenistan
Tanzania
Undeclared
Uganda
United Kingdom (England)
Ukraine
United States
Burkina Faso
Uruguay
Uzbekistan
St Vincent & the Grenadines
Venezuela
Virgin Islands (UK)
Vietnam
Virgin Islands (US)
Vatican City
Namibia
West Bank
Wallis & Futuna
Western Sahara
Wake Island
Western Samoa
Swaziland
Yugoslavia
Yemen
Zambia
Lybia
Zimbabwe
Unknown

CT 254 Phone Number types
Cell

Fax
Home
IVR
Message
Main
TDD
Toll Free
Work

CT 275 Address
1099 Mailing
Absent Parent
ATTORNEY
Billing
CLAIMEE
Contact
DEFENDANT
Employer
Health Insurance
LIABLE INSURANCE
Mailing
Physical
Union

CT 523: Gender
Another Gender Identity
Female
Transgender: Female to Male
Male
Transgender: Male to Female
Non Binary (neither male nor female)
Decline to State

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-214753 | DDID 2350

FDS: API – Program

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sridhar Mullapudi
	Reviewed By	Avi Bandaranayake

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/10/2020	1.0	Initial Draft	Sridhar Mullapudi
2/22/2021	1.1	Section 2.1.3 request parameter, added new input field.	Avi Bandaranayake
3/23/2021	1.2	Updated Responses Updated Assumptions Added Header section	Avi Bandaranayake
6/1/2021	1.3	Updated response obj to include pgmAdmin info. Please see technical specification html for more details.	Avi Bandaranayake

Table of Contents

1 OVERVIEW

1.1 Current Design

There is no Application Programming Interface (API) available to external partners which allows access to read Program data in CalSAWS.

1.2 Requests

Create a service that can retrieve program information for a given case ID or persons SSN or CIN.

1.3 Overview of Recommendations

1. Create a new endpoint to retrieve program information.

1.4 Assumptions

1. Results are limited to county level data.
2. Results returned will be paginated to 20 values by default.
3. Limit parameter will allow a maximum of 250 values returned by default. Requesting a larger value will result in a 400 error response.
4. Code table values for this API can be found in the Appendix.
5. Code table values are limited to those available as of the API release date.
6. Requests and Responses will use Code Table values as described in the Appendix.
7. Offset and limits will apply only if paginated results are available.
8. Offset beyond the max available will return a 404 error.
9. Offset and limits will only apply to the root element
10. Sorting and ordering only applies to the root element.
11. Null or empty values will not be returned in the response objects.
12. Requests sent with improper data types will result in 400 error with a stack trace.

2 RECOMMENDATIONS

2.1 Program API

2.2 Overview

This API will expose the program data from the CalSAWS system.

2.3 Description of Changes

1. The Program API will include the following data elements, and error handling. Please refer to the **Program.html** document for the technical specifications and data element definitions.
2. Additional examples and specific error messages may be added during build for the developer portal.

2.4 Request Parameter

The Program API can be used to retrieve program information form CalSAWS. The request must contain one of the following fields:

1. case number
2. view date
3. SSN
4. CIN
5. program code
6. program status

The program API will return the following data elements:

```
[
  {
    "caseNum": "string",
    "caseName": "string",
    "pgmId": "string",
    "pgm": "string",
    "aidCode": "string",
    "programDetail": [
      {
        "status": "string",
        "begDate": "2021-05-18",
        "statRsn": "string",
        "reportingType": "string"
      }
    ],
    "programRedeter": [
      {
        "reDueDate": "2021-05-18",
        "reBegDate": "2021-05-18",
        "reStatRsn": "string"
      }
```

```json
  ],
  "programPerson": [
    {
      "persId": "string",
      "persName": "string",
      "persStat": "string",
      "persStatRsn": "string",
      "persBegDate": "2021-05-18",
      "persContact": [
        {
          "phType": "string",
          "phNum": "string"
        }
      ]
    }
  ],
  "programAdmin": [
    {
      "secondPayeePrefix": "string",
      "adminCode": "string",
      "persId": "string",
      "persName": "string",
      "orgId": "string",
      "orgName": "string",
      "payeeSubTypeCode": "string",
      "authRepNumIdentif": "string",
      "begDate": "2021-06-01",
      "ltcMcRePacketRecipInd": "string"
    }
  ],
  "staffWorker": [
    {
      "worker": "string",
      "workerNum": "string",
      "unitName": "string",
      "unitNumIdentif": "string",
      "officeName": "string",
      "officeNumIdentif": "string",
      "secondPgmAssignInd": "string"
    }
  ]
}
]
```

2.6 Headers

The following headers are required and included in all operations by the application gateway and do not need to be included in the request.

X-County-Code: This header is added to all requests by the application gateway. The county code header is used to limit returned values to be specific to the county.

X-App-Id: This header is added to all requests by the application gateway. This is a unique App-id that is created for each county application during the onboarding process. This Id should be referenced against a mapping table with staff Ids (one App-Id per staff id) that will in

turn be used for database audit fields (created_by, updated_by) when an application creates or updates data in the CalSAWS system.

2.7 Error Message

The Program API will return error messages in the following Scenarios:

1. Bad request. {parameter name} is invalid. {Reason}

2. Authorization information is missing or invalid.

3. Not found. Request {parameter name} - {value} was not found.

4. Request Timeout.

5. Internal Server Error.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	API	Detailed Endpoint document	program.html

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met
DDID 2350	The CONTRACTOR shall create a service for the 58 Counties that returns program information utilizing a CalSAWS API. The service will allow the 58 Counties to do the following: 1) Search for programs associated to a case by providing a case number	The API complexity accounts for the ability to search for programs utilizing multiple filters and variety of individual level data that will be returned.	Create program API

	2) Search for all programs associated to an individual with a provided social security number		
	The service will return a list of programs that meet the provided criteria including the case, program type, program status, program status reason, the individuals on the program, the individual program person status and status reason, the phone numbers for the individuals, and the worker associated to the programs.		

5 APPENDIX

This section contains the code table (CT) values that are currently used in the system. API users can use and expect these values as specified in the technical design

CT 72: Program Status Code
Active
Discontinued
Denied
Pending
Ineligible
Exempt
Deferred
Deregistered
Non-Comp
Good Cause
Waiting to Transfer
Sanction

CT 18: Program Code
AAP
CalFresh
Cal-Learn
CalWORKs
CAPI
CFET
Child Care
Disaster CalFresh
Diversion
Foster Care
General Assistance (Managed)

CT 18: Program Code
General Assistance/General Relief (GR)
GROW
Homeless - Perm
Homeless - Temp
Immediate Need
Kin-GAP
Medi-Cal
Nutrition Benefit
RCA
REP
Welfare to Work

CT 254: Phone Type Code
Cell
Fax
Home
Main
Message
TDD
Toll Free
Work

CT 542: Reporting Type Code
Annual Reporting
Change Reporting
Non Reporting
Quarterly Reporting
Semi-Annual Reporting

| Semi-Annual Reporting Annually |
| TMC Reporting |
| TNB Non Reporting |

| **CT 51: Confidentiality Type Code** |
| Adoptions Assistance |
| Employee/Employee Relative |
| Foster Care |
| Minor Consent |
| Domestic Violence |
| High Profile |
| Human Trafficking |
| CWS AAP Mask Address |
| CWS Foster Care/KinGap Mask Address |
| CWS Sealed Mask Address |
| CWS Sensitive Mask Address |

| **CT 1082: Flag Type Codes** |
| Federal |
| State |
| County |
| Court Case |
| Study |
| Civil Rights |
| Error Prone and High Risk |

| **CT 1892: Completion Reason** |
| CalFresh Restored |
| Conversion |

Data Change	
Deemed Eligible Child	
Eligible to TCF	
No Longer Valid	
Processed	
TMC Eligibility	

CT 184: Aid Codes		
01 - RCA	58 - OBRA-ESO/Pregnancy	D7 - OBRA-LTC-Disabled-SOC
02 - RMA/EMA	59 - Continuing TMC-Full	D8 - OBRA-MI-Pregnancy-No SOC
03 - AAP-Fed	5C - PE HF to MC NP	D9 - OBRA-MI-Pregnancy-SOC
04 - AAP-State	5D - PE HF to MC PPY	E1 - Bridging-Unverified Citizen-1 Month Limited
05 - SED-Non EA	5F - OBRA-Pregnancy	E2 - Infant-19 ACA CHIP Lawful Citizen
06 - Fed AAP Cash Subsidy Out-of-State	5J - Pending SP-DDSD - No SOC-Restrict.	E3 - New Adult Group LTC
07 - AAP-Extended-Fed	5K - FC-EA	E4 - Infant-19 ACA CHIP Undocumented
08 - Foster Care - Cuban/Haitian-Entrants	5R - Pending SP-DDSD - SOC	E5 - Child 1-19 ACA CHIP Premium
09 - CalFresh	5T - Continuing TMC-ESO/Pregnancy	E7 - Infant - Above 267-322%
0C - Access for Infants and Mothers	5V - Trafficking/Crime Victim no SOC	F0 - HCCI - LIHP
0D - MCAP Pregnant Woman-213-322% FPL	5W - 4 Month Cont.-ESO/Pregnancy	F1 - MC No SOC State Inmates
0E Pregnant Women 213 - 322%	5X - Extended TMC, terminated 10/1/2003	F2 - No SOC MC for Undoc State Inmates
0F - TCF	5Y - Extended TMC, terminated 10/1/2003	F3 - MC County Inmate Inpatient Hospital Only
0G MCAP Pregnant Woman - 213 - 322% FPL	60 - Disabled - SSI/SSP	F4 - MC Undoc County Inmates
0H - Transitional Nutrition Benefit	63 - LTC-Disabled	F5 - MCE ST Inmates
10 - Aid to the Aged - SSI/SSP	64 - MN-Disabled-No SOC	F6 - MCE CO Inmates
13 - LTC-Aged	65 - Hurricane Katrina Evacuees	F7 - MCE Existing
14 - MN-Aged-No SOC	66 - Pickle-Disabled	F8 - LIHP - MCE
16 - Pickle-Aged	67 - MN-Disabled-SOC	F9 - HCCI LIHP - CI

17 - MN-Aged-SOC	68 - Disabled-IHSS-SOC	G1 - MC SOC State Inmates
18 - Aged-IHSS	69 - 200% OBRA Infant	G2 - SOC MC for Undoc State Inmates
1A - CAPI-Qualified-Aged	6A - DAC-Blind	G3 - Medi-Cal County Inmate SOC Inpatient Hospital Only
1E - CCE for the Aged	6C - DAC-Disabled	G4 - Medi-Cal County Inmate Undoc SOC Inpatient Hospital Pregnancy+ ESO
1H - FPL-Aged-Full-No SOC	6E - CCE for the Disabled	G5 - County Juvenile Inmate Inpatient Hospital+ Inpatient MH
1U - FPL-Aged-ESO-No SOC	6G - 250% Working Disabled-Full	G6 - County Juvenile Inmate Undoc, ESO Inpatient Hospital, MH & Pregnancy
1V - RCA - TCVAP (State)	6H - FPL Disabled-Full	G7 - County Juvenile Inmate, SOC Inpatient Hospital & Inpatient MH
1X - MSSP without a SOC	6J - SB87 Pending SP-DDSD - No SOC	G8 - County Juvenile IM Undoc, SOC, ESO Inpatient Hospital, MH & Pregnancy
1Y - MSSP with a SOC	6K - CAPI-Non Qualified	G9 - Compassionate Release No SOC State
20 - Blind - SSI/SSP	6M - CAPI-Sponsored	H0 - Child 6-19 133-266%
23 - LTC-Blind	6R - SB87 Pending SP-DDSD - SOC	H1 - Infant 200-250%
24 - MN-Blind-No SOC	6T - CAPI-Limited Term	H2 - Child 1-6 133-150%
26 - Pickle-Blind	6U - FPL-Disabled-ESO/Pregnancy	H3 - Child 1-6 150-250% P
27 - MN-Blind-SOC	6V - DDS Waiver-No SOC	H4 - Child 6-19 100-150%
2A - Abandoned Baby	6W - DDS Waiver-SOC	H5 - Child 6-19 150-250% P
2E - CCE for the Blind	6X - IHO Waiver - No SOC	H6 - Infant 209-266%
2H - FPL-Blind-Full-No SOC	6Y - IHO Waiver - SOC	H7 - Child 1-6 -142%
2K - IHSS Community First Choice Option	71 - Dialysis/Dialysis Supplement	H8 - Child 6-19 - 0-133%
2L - IHSS Plus Waiver	72 - 133% Child-Full	H9 - Child 1-6 143-266%
2M - Personal Care Services	73 - TPN/TPN Suppl.	IE - IE MC Member-Non Sneede MFBU
2N - IHSS Residual	74 - 133% Child-ESO	Indigent Burial
2P - ARC only	76 - 60-Day Postpartum	J1 - Compassionate Release No SOC County
2R - ARC only for NMD	77 - Anti-Rejection Medicine	J2 - Compassionate Release SOC County
2S - ARC - Fed CW	7A - 100% Child-Full	J3 - County Medical Probation No SOC
2T - ARC - State CW	7C - 100% Child-OBRA-ESO	J4 - County Medical Probation SOC
2U - ARC - State CW for NMD	7H - TB	J5 - Compassionate Release LTC Aged County

2V - Trafficking/Crime Victim no SOC	7J - CEC-Full	J6 - Compassionate Release LTC Aged County Restricted
30 - CW-All Other Families (Fed)	7K - CEC-ESO	J7 - Compassionate Release LTC Disabled County
32 - CW-TANF-Timed Out (Fed)	7M - Minor Consent-Family Planning	J8 - Compassionate Release LTC Disabled County Restricted
32 - CW-TANF-Timed Out (State)	7N - Minor Consent-Pregnancy	K1 - CW-Felon-Safety Net-Non-Two Parent
33 - CW-Zero Parent (Fed)	7P - Minor Consent-Outpatient Mental Health	K1 - CW-Safety Net/Felon/WTW Sanct-Non-Two Parent
34 - AFDC-MN-No SOC	7R - Minor Consent-Sexual Assault	K6 - MAGI ACA N/E Adult (19 - 64) County Comp Release/ <138% FPL, Citizen
35 - CW-Two Parent (Fed)	7S - Title XIX, parents 19-64, not blind or disabled, no SOC	K7 - MAGI ACA N/E Adult (19 - 64) County Comp Release/ <138% FPL, Undoc
35 - CW-Two Parent (State)	7U - Title XIX, CalFresh adults from 19 through 64, no SOC	K8 - MAGI ACA NNE Adult (19 - 64) County Comp Release/ <128% FPL, Citizen
36 - Disabled-COBRA-Widow/ers	7V - Trafficking/Crime Victim with a SOC	K9 - MAGI ACA NNE Adult (19 - 64) County Comp Release/ <128% FPL, Undoc
37 - AFDC-MN-SOC	7W - Title XIX, children under age 19 not blind or disabled, no SOC	L1 - LIHP Transitional Aid Code
38 - Edwards v. Kizer	7X - Bridging-Child-1 Month Limited	L6 - Citizen/Lawfully Present 19-64 Years Old 128% Full
39 - Initial TMC-Full	7Y - Bridging-Adult-1 Month Limited	L7 - Undocumented 19-64 Years Old 128% Restricted
3A - (Prior to 12/2013)	80 - QMB	L9 - 21-64 Year Old 138% Full 5 Year Bar
3A - CW-Timed Out-Safety Net-All Other Fam.	82 - MI-Child-No SOC	M0 - Pregnant Women - 60-213% - Undocumented
3C - (Prior to 12/2013)	83 - MI-Child-SOC	M1 - 19-64 Year Old 138% Full
3C - CW-Timed Out-Safety Net-Two Parent	84 - CMSP - Full - No SOC	M2 - 19-64 Year Old 138% Restricted
3D - Cash Based MC	85 - CMSP - Full - SOC	M3 - Parent Caretaker Relative - at or below 109% - Full
3E - CW-All Other Families (Mixed)	86 - MI-Pregnancy-No SOC	M4 - Parent Caretaker Relative - at or below 109% - Restricted
3F - CW-Felon-Safety Net-Two Parent	87 - MI-Pregnancy-SOC	M5 - Child 6-19 - 108-133% - Citizen
3F - CW-Safety Net/Felon/WTW Sanct-Two Parent	88 - CMSP - Non-Fed - Full - No SOC	M6 - Child 6-19 - 108-133% - Undocumented
3G - CW-Zero Parent (State)	88 - CMSP - Pending DDSD - Full - No SOC	M7 - Pregnant Women - 60% - Citizen

3H - CW-Zero Parent (Mixed)	89 - CMSP - Non-Fed - Full - SOC	M8 - Pregnant Women - 60% - Undocumented
3J - Diversion-All Other Families (Fed)	89 - CMSP - Pending DDSD - Full - SOC	M9 - Pregnant Women - 60-213% - Citizen
3K - Diversion-Two Parent (Fed)	8A - QWDI	N0 - Co. Inmate LIHP/MCE Transition to MC
3L - CW-All Other Families (State)	8C - SLMB	N5 - 19-64 Year Old State Inmate - 0-138% - Limited
3M - CW-Two Parent (State)	8D - Qualified Individual 1-135%	N6 - 19-64 Year Old State Inmate - 0-138% - Restricted
3N - AFDC-1931(B) Full	8E - Accelerated Enrollment of Children	N7 - 19-64 Year Old County Inmate - 0-138% - Limited
3P - CW-All Other Families-Exempt MAP (Fed)	8F - CMSP - LTC	N8 - 19-64 Year Old County Inmate - 0-138% - Restricted
3R - CW-Zero Parent-Exempt MAP (Fed)	8K - Qualified Individual 2-175%	P0 - Infant - 0-208% - Undocumented
3T - Initial TMC-ESO/Pregnancy	8N - 133% Excess Property Child-ESO	P1 - Hospital PE Infant - 0-208%
3U - CW-Two Parent (State)	8P - 133% Excess Property Child-Full	P2 - Hospital PE Parent Caretaker Relatives - 0-109%
3V - AFDC-1931(B)-ESO/Pregancy	8R - 100% Excess Property Child-Full	P3 - Hospital PE Adults - 0-138%
3W - CW-TANF-Timed Out (Fed)	8T - 100% Excess Property Child-ESO	P4 - Hospital PE Pregnant Women - 0-213%
3W - CW-TANF-Timed Out (State)	8U - CHDP Gateway Deemed Infant - NO SOC	P5 - Child 6-19 - 0-133% - Citizen
3X - Diversion-All Other Families (State)	8V - CHDP Gateway Deemed Infant - SOC	P6 - Child 6-19 - 0-133% - Undocumented
3Y - Diversion-Two Parent (State)	8W - CHDP Gateway Medi-Cal	P7 - Child 1-6 - 0-142% - Citizen
40 - AFDC-FC (State)	8X - CHDP Gateway HF	P8 - Child 1-6 - 0-142% - Undocumented
42 - AFDC-FC (Fed)	8Y - CHDP	P9 - Infant - 0-208% - Citizen
43 - FC Extended (State)	90 - GA General Relief Independent Living-CNTY	R1 - CW - TCVAP (State)
44 - 200%-Pregnancy Citizen	91 - GA General Relief-B/C Non Independent Living-CNTY	R2 - CF - TCVAP (State)
45 - FC (County)	92 - GA General Relief-R/B Non Independent Living-CNTY	R4-WINS Non-Two-Parent
46 - Fed Funded FC Benefits Out-of-State	93 - GA General Relief-MFG Child-CNTY	R5-WINS Two-Parent
47 - 200%-Infant-Full	94 - GRI Emergency Assistance	R6-WINS CFAP
48 - 200%-Pregnancy-OBRA	95 - Unemployable, Independent Living, Single	R7-WINS Non-Two Parent TCF
49 - FC Extended (Federal)	96 - Unemployable, Facility, Family Group	R8-WINS Two-Parent TCF

4A - Out of State AAP	97 - Unemployable, Facility, Single	R9-WINS TCFAP
4C - Voluntary Placement	98 - Aid In Kind	RE - SF Retention
4E - Presumptive Eligibility for Former Foster Care Children	99 - Electronic Theft Replacement Cash Benefit	RR - RR MC Member-Sneede MBU
4F - Kin-GAP (Fed)	9A - SF AGEX	T0 - Infant - 208-266% - Undocumented
4F - Kin-GAP (State)	9G - Return to Residence	T1 - Child 6-19 - 160-266% - Citizen
4G - Kin-GAP (State)	9H - Healthy Families Child	T2 - Child 6-19 - 133-160% - Citizen
4G - Kin-GAP (State) beyond age 18 due to a disability	9I - SF CALM	T3 - Child 1-6 - 160-266% - Citizen
4H - Foster Care Child in CalWORKs	9J - SF PAES	T4 - Child 1-6 - 142-160% - Citizen
4K - Probation Emergency Assistance	C1 - OBRA-MN-Aged-No SOC	T5 - Infant - 208-266% - Citizen
4L - 1931(b) Foster Care	C2 - OBRA-MN-Aged-SOC	T6 - Child 6-19 - 160-266% - Undocumented
4M - FC Continuing Medi-Cal	C3 - OBRA-MN-Blind-No SOC	T7 - Child 6-19 - 133-160% - Undocumented
4N - Extended CalWORKS for NMDs	C4 - OBRA-MN-Blind-SOC	T8 - Child 1-6 - 160-266% - Undocumented
4P - CW Family Reunification-All Families	C5 - OBRA-MN-AFDC-No SOC	T9 - Child 1-6 - 142-160% - Undocumented
4R - CW Family Reunification-Two Parent	C6 - OBRA-MN-AFDC-SOC	X1 - Covered CA Subsidized (APTC and/or State Subsidy) 250-400%
4S - Kin-GAP Extended (Fed)	C7 - OBRA-MN-Disabled-No SOC	X2 - Covered CA Subsidized 100-150%
4T - Kin-GAP (Fed)	C8 - OBRA-MN-Disabled-SOC	X3 - Covered CA Subsidized 151-200%
4V - Trafficking/Crime Victim with a SOC	C9 - OBRA-MI-Child-No SOC	X4 - Covered CA Subsidized 201-250%
4W - Kin-GAP Extended (State)	D1 - OBRA-MI-Child-SOC	X5 - Covered CA Cost Sharing Waiver 100-300%
50 - CMSP - Restricted	D2 - OBRA-LTC-Aged-No SOC	X6 - Covered CA AI/AN CSR Only No Income Test
53 - MI-LTC	D3 - OBRA-LTC-Aged-SOC	X7 - Covered CA Unsub Coverage or Ineligible for Subsidies Above 600%
54 - MC Four Month Continuing	D4 - OBRA-LTC-Blind-No SOC	X8 - Covered CA Lawful Present/MC Ineligible Under 100%
55 - OBRA-LTC	D5 - OBRA-LTC-Blind-SOC	X9 - Covered CA State Subsidy Eligible 400-600%
55 - OBRA-LTC-MI	D6 - OBRA-LTC-Disabled-No SOC	

CT 73: Status Reason Codes		
15% Criteria	Failed to make satisfactory progress in EDU Activity #2	No Child Care during Non-Traditional Hours
16/17 and in School Half Time	Failed to make satisfactory progress in EDU Activity #3	No Child Care Transportation Available
1st Instance	Failed to make satisfactory progress in GED Activity	No Dep Mut Child
1st instance sanction	Failed to make satisfactory progress in GED Activity #2	No Deprivation
2nd Instance	Failed to make satisfactory progress in GED Activity #3	No Elig. Child
2nd instance sanction	Failed to make satisfactory progress in GTEP Activity	No Eligible Mem
3 Countable ABAWD Months Used	Failed to make satisfactory progress in GTEP Activity #3	No Eligible Provider
3-Month time limit	Failed to make satisfactory progress in GYEP Activity	No Eviction Notice
3rd Instance	Failed to make satisfactory progress in GYEP Activity #2	No Intent to stay in County
3rd instance sanction	Failed to make satisfactory progress in GYEP Activity #3	No Legal Guardianship
48 Months Time Limit Reached	Failed to make satisfactory progress in LIT Activity	No Linkage - MPPP
60 years of age or older	Failed to make satisfactory progress in LIT Activity #2	No Linkage - No Property Verif
AAP Deferred Payments Accepted	Failed to make satisfactory progress in LIT Activity #3	No Linkage - Over Resources
AAP Denied	Failed to make satisfactory progress in MHS Activity	No Linkage - Property Waiver
AAP Discontinued	Failed to make satisfactory progress in MHS Activity #2	No Linkage SP-DDSD Denied
AAP Suspended	Failed to make satisfactory progress in MHS Activity #3	No Linkage to MC
ABP101 Form Not Received	Failed to make satisfactory progress in NCP Activity	No longer in Care
ABP898 Form Not Received	Failed to make satisfactory progress in NCP Activity #2	No longer preg or cust parent
ACA Requirement (CMSP)	Failed to make satisfactory progress in NCP Activity #3	No longer receiving aid
Accepted Diversion	Failed to make satisfactory progress in OST Activity	No NB Eligibility
Actively seeking employment	Failed to make satisfactory progress in OST Activity #2	No Need for Child Care
Acts beyond teen's control	Failed to make satisfactory progress in OST Activity #3	No Open Application

ADD Pers Refused Finger PRNT	Failed to make satisfactory progress in SIP Activity	No QR7 for Prior Month
Added to CW AU	Failed to make satisfactory progress in SIP Activity #2	No Reference CF EDBC
Adopted	Failed to make satisfactory progress in SIP Activity #3	No Remaining Benefits
Adult in home to provide care	Failed to make satisfactory progress in STEP Activity #2	No SAR7 for Prior Month
Age	Failed to make satisfactory progress in SYE Activity	No Show QC/QA
Age 18 Requirements	Failed to make satisfactory progress in SYE Activity #2	No Show/FTP # 2
Age 19, chose not to continue	Failed to make satisfactory progress in SYE Activity #3	No Show/FTP #1
Age 19, inelig. to part.	Failed to make satisfactory progress in WIA Activity	No Show/FTP #3
Age Requirement	Failed to make satisfactory progress in WIA Activity #2	No SOC 162 On File (NRLG Only)
Agency(s) staffing issues	Failed to make satisfactory progress in WIA Activity #3	No SSI/SSP
Aided Non-parent Relative caring for at risk child	Failed to make satisfactory progress in YTH Activity	No Stage 1 Available for Other Reasons
Already Got Exception	Failed to make satisfactory progress in YTH Activity #2	No Stage 1 Funding Available
Already received HA in another AU	Failed to make satisfactory progress in YTH Activity #3	No Stage 1 Provider for Children
Already received Once-in-a-Lifetime	Failed to meet work req.	No Trans-Pgm Barriers-Not Fund
Any subst. and compelling reason	Failed to provide progress report for DRC Activity	No transportation
Appear in court or incarcerated	Failed to provide progress report for DRC Activity #2	No Utility Shut-Off
Application denied	Failed to provide progress report for DRC Activity #3	No Valid CF Determination
Application Opened in Error	Failed to provide progress report for DVS Activity	No Valid Emergency
Applied for or Receiving Unemployment	Failed to provide progress report for DVS Activity #2	Non Co-Op Chld/Med Supp
Approved for CW	Failed to provide progress report for DVS Activity #3	Non Fed Caretaker
ARC child jurisdiction has been changed	Failed to provide progress report for EDU Activity	Non Government
ARC program not Available for County	Failed to provide progress report for EDU Activity #2	Non-Coop: AFIRMSFIS
Attained age 20	Failed to provide progress report for EDU Activity #3	Non-Parent Caretaker

Auto-test	Failed to provide progress report for GED Activity	Non-Parent Caring for Disabled HH Member
Back Rent and Rent Exceeds TMHI	Failed to provide progress report for GED Activity #2	Non-Payment of Premium
Back Rent Exceeds Assistance	Failed to provide progress report for GED Activity #3	Non-Payment of Premium - Low Income FPL
BDA After the Month	Failed to provide progress report for GTEP Activity	Not a Permanent Place
Biological Parent Right Reversed	Failed to provide progress report for GTEP Activity #2	Not accepting a job
Boarder	Failed to provide progress report for GTEP Activity #3	Not Affected by Disaster
Break in child care arrangements	Failed to provide progress report for GYEP Activity	Not Attending School
Break in transportation arrangements	Failed to provide progress report for GYEP Activity #2	Not Caring for Child
CA - Failed to keep Case Manager Appointment	Failed to provide progress report for GYEP Activity #3	Not Currently WPR
Calif. Residence	Failed to provide progress report for LIT Activity	Not Eligible for Cash Aid
CalWORKs	Failed to provide progress report for LIT Activity #2	Not Financially Elig.
CalWORKs and/or CalFresh Approved/Restored	Failed to provide progress report for LIT Activity #3	Not funded
CalWORKS Eligible	Failed to provide progress report for MHS Activity	Not Homeless
CalWORKs Family Reunification	Failed to provide progress report for MHS Activity #2	Not in Disaster Area
CalWORKs Restored	Failed to provide progress report for MHS Activity #3	Not in LA County
CalWORKs-FC	Failed to provide progress report for NCP Activity	Not Part of NB HH
CAPI Missed Interview (New Application/Recertification)	Failed to provide progress report for NCP Activity #2	Not part. in apprvd activity
CAPI RE Not Complete	Failed to provide progress report for NCP Activity #3	Not participating in activity
Care of 2 or More Children Under Age 6	Failed to provide progress report for OST Activity	Not providing proof of satisfactory progress in assigned activity
Care of a child 23 months or younger	Failed to provide progress report for OST Activity #2	Not Seeking Housing
Care of Child Age 12-23 Months	Failed to provide progress report for OST Activity #3	Not signing the WtW Plan
Care of Child Age 24-35 Months	Failed to provide progress report for SIP Activity	Off aid - other reason
Care of Child Under 12 Weeks (additional children)	Failed to provide progress report for SIP Activity #2	Off Aid - Receiving SSI

Care of Child Under 6/12 Months (1st child)	Failed to provide progress report for SIP Activity #3	Off aid due to employment
Care of Dependent Child Under 6	Failed to provide progress report for SYE Activity	Off Cash Aid
Care of First Child	Failed to provide progress report for SYE Activity #2	Offered and not accepted workfare
Care of Subsequent Child(ren)	Failed to provide progress report for SYE Activity #3	Offrd/Not accptd ed.& train.
Caregiver not a California Resident	Failed to provide progress report for WIA Activity	On Aid Another Case
Cares for HH Member Mentally/Physically Impaired	Failed to provide progress report for WIA Activity #2	One Month Diversion
Case Man. services unavail.	Failed to provide progress report for WIA Activity #3	One Month Immediate Need
CF IPV #1	Failed to provide progress report for YTH Activity	OP - Failed to keep Computer Application Class Activity
CF IPV #2	Failed to provide progress report for YTH Activity #2	OP - Failed to keep Office Occupations Activity
CF IPV #3	Failed to provide progress report for YTH Activity #3	OP - Failed to keep Security Officer Assessment
CF Job Quit #1	Failed to provide Proof of Sponsor Disability	OP - Failed to keep Security Officer Training
CF Job Quit #2	Failed to Provide U-Visa Status	Opt Out
CF Job Quit #3	Failed to ProvideT-Visa Status	Optional Child - Receives Child Support
CF Missed Interview (New Application/Recertification)	Failed to Reapply for SSI Reconsideration	Optional Spouse
CF Recert Expired	Failed to show to CAC Appointment	ORR Certified Trafficking Victim
CF Reduced Work #1	Failed to show to CAC Appointment #2	OS - Failed to keep One-Stop Activity
CF Reduced Work #2	Failed to show to CAC Appointment #3	OS - Failed to keep Workforce Investment Act Activity
CF Reduced Work #3	Failed to show to CLA Appointment	Other
CFET Non Part. # 1	Failed to show to CLA Appointment #2	Other CAPI Denial
CFET Non Part. # 2	Failed to show to CLA Appointment #3	Other CAPI Disc.
CFET Non Part. # 3	Failed to show to CORE Appointment	Other Federal
Change to Unemployable	Failed to show to CORE Appointment #2	Other parent participating 35 hours
Child	Failed to show to CORE Appointment #3	Other Program Assistance Data Sweep
Child Applicant Minor Consent	Failed to show to DRC Appointment	Other Property

Child Applicant Minor Consent Over 21	Failed to show to DRC Appointment #2	Other State/Local
Child Applied for Self	Failed to show to DRC Appointment #3	Other Substantial & Compelling Reasons
Child Attends State Preschool	Failed to show to EVA Appointment	Other Unearned
Child Care Request is Denied	Failed to show to EVA Appointment #2	Out of the Home
Child Eligible to Kin-GAP	Failed to show to EVA Appointment #3	Out of the Home - Incarcerated
Child exceeded age	Failed to show to GTEP Appointment	Out of the Home - Primary Applicant
Child not a California Resident	Failed to show to GTEP Appointment #2	Over $100 Limit
Child Not In Placement	Failed to show to GTEP Appointment #3	Over 130% FPL
Child of Foster Care Recipient	Failed to show to GYEP Appointment	Over Income
Child of FRI	Failed to show to GYEP Appointment #2	Over Income & CW Timed Out
Child of FTP Income	Failed to show to GYEP Appointment #3	Over Income-$0 Allotment
Child of FTP Property	Failed to show to ICM Appointment	Over IRT
Child of Kin-GAP Recipient	Failed to show to ICM Appointment #2	Over IRT & CW Timed Out
Child of Member	Failed to show to ICM Appointment #3	Over Program Age
Child Protective Services	Failed to show to JDM Appointment	Over Resources
Child Returned to FC	Failed to show to JDM Appointment #2	Overpayment Recoupment
Child Returns to Home of Removal	Failed to show to JDM Appointment #3	PA 1049 Form Not Received
Child Returns to Parent	Failed to show to JRT Appointment	PA1615 Form Not Received
Child under 16	Failed to show to JRT Appointment #2	PA2418A Form Not Received
Chose Expedited CW	Failed to show to JRT Appointment #3	PA2418B Form Not Received
Chronic Truant	Failed to show to JRY Appointment	PA2418C Form Not Received
CMSP Applicant Only	Failed to show to JRY Appointment #2	PA2492 Form Not Received
Conversion	Failed to show to JRY Appointment #3	Parent

Correct Status for Existing Application	Failed to show to LIT Appointment	Parent Caring for Disabled HH Mem
Cost More Than Limit	Failed to show to LIT Appointment #2	Parent Caring for Disabled HH Member
County opts out of ARC	Failed to show to LIT Appointment #3	Parent Not Absent
County Residence	Failed to show to MHS Appointment	Parent Not Deceased
Court Conviction for Employment 1st Offense	Failed to show to MHS Appointment #2	Parent Not Incap.
Court Conviction for Employment 2nd Offense	Failed to show to MHS Appointment #3	Parent of Married Minor
Court Conviction for Employment 3rd Offense	Failed to show to NCP Appointment	Parent resides in Foster Home
Court Conviction for Housing 1st Offense	Failed to show to NCP Appointment #2	Participating
Court Conviction for Housing 2nd Offense	Failed to show to NCP Appointment #3	Participating in a Program that Exceeds CFET Requirements
Court Conviction for Housing 3rd Offense	Failed to show to Orientation Appointment	Participating in ed. or training
Court Conviction for Income 1st Offense	Failed to show to Orientation Appointment #2	Participating in other activity
Court Conviction for Income 2nd Offense	Failed to show to Orientation Appointment #3	Passed Alt A Test
Court Conviction for Income 3rd Offense	Failed to show to OST Appointment	Passed Regular MPPP
Cure Sanction	Failed to show to OST Appointment #2	Passed SSI MPPP
Current IPV Disqualification 1	Failed to show to OST Appointment #3	Pending Appraisal
Current IPV Disqualification 2	Failed to show to PTS Appointment	Pending Foster Care Case
Current IPV Disqualification 3	Failed to show to PTS Appointment #2	Perm Placement language not est
Customer requested	Failed to show to PTS Appointment #3	Petition Not Filed
CW >$5K	Failed to show to SIP Appointment	Physically/Mentally Incapacitated
CW - No Elig Child	Failed to show to SIP Appointment #2	Post Emp/Job Retention
CW $2K to 5K	Failed to show to SIP Appointment #3	Post Employment
CW <$2K	Failed to show to SOA Appointment	Post Time Limit
CW Denial from outbound ICT	Failed to show to SOA Appointment #2	Post WTW 24 MTC CW Fed Requirements Not Met

CW Duplicate Aid	Failed to show to SOA Appointment #3	Post WTW 24 MTC Failed to Sign Subsequent Fed Plan
CW Duplicate Appl. #1	Failed to show to SOT Appointment	Post WTW 24 MTC Fed Standards Not Met - Participation
CW Duplicate Appl. #2	Failed to show to SOT Appointment #2	Post WTW 24 MTC Fed Standards Not Met - Progress
CW Duplicate Appl. #3	Failed to show to SOT Appointment #3	Postpartum recovery
CW Fraud >$10K	Failed to show to STT Appointment	Potential Non-MAGI Eligibility
CW Ineligible Due to Participant Not in the Home/SSI	Failed to show to STT Appointment #2	Potentially CAPI Eligible
CW IPV - #1	Failed to show to STT Appointment #3	Potentially RCA Eligible
CW IPV - #2	Failed to show to SYE Appointment	Pregnancy Unverified
CW IPV - #3	Failed to show to SYE Appointment #2	Pregnant and Doctor states unable to work
CW Non Part.	Failed to show to SYE Appointment #3	Probation/Parole Violator
CW Non Part. # 2	Failed to show to VOC Appointment	Program App Clean-up
CW Non Part. # 3	Failed to show to VOC Appointment #2	Property/Resource Exceed the Limit
CW RE Incomplete	Failed to show to VOC Appointment #3	Provider TrustLine Denied/Revoked/Closed
CW RE Not Received	Failed to show to WIA Appointment	Public Inst. entire cal. Mnth
CW Time Limit	Failed to show to WIA Appointment #2	QC Did not Cooperate (MC)
CW Timed Out	Failed to show to WIA Appointment #3	QC Failed to Keep 2 Appointments (CF)
Deceased	Failed to show to YTH Appointment	QC Failed to Keep 2 Appointments (CW)
Declined Elig	Failed to show to YTH Appointment #2	QC Failed to Keep Appointment (CF)
Declining WD	Failed to show to YTH Appointment #3	QC Failed to Keep Appointment (CW)
Deemed Child - Fam ReApp	Failed to sign post 24 MTC Fed plan	QC Failed to Respond in 30 Days (CF)
Deemed Eligible	Failed to verify LTC	QC Failed to Respond in 30 Days (CW)
Deprivation Not Established	Failed/Refused Assessment Appt	QC Failed to Return Signed Release (CF)
Did Not Apply for T-Visa	Failed/Refused Assessment Appt #2	QC Failed to Return Signed Release (CW)

Did Not Apply for U-Visa	Failed/Refused Assessment Appt #3	QC Failed to Sign Release (CF)
Did Not Meet ABAWD Work Rules after Regaining Elig	Failed/Refused Job Training	QC Failed to Sign Release (CW)
Did not Reapply after LTC	Failed/Refused Job Training #2	QC Refused to Cooperate (CF)
Did not Request Full Medi-Cal Hierarchy	Failed/Refused Job Training #3	QC Refused to Cooperate (CW)
Did Not Reside in U.S. for 30 days	Failed/Refused Urinalysis Appt	QR
Did not SFIS	Failed/Refused Urinalysis Appt #2	QR 7 Incomplete
Didn't Add Newborn	Failed/Refused Urinalysis Appt #3	QR 7 Not Received
Didn't Apply for SSI	Failed/Refused/Drop out Treatment Program	QR7 Form Not Received
Didn't Apply Medicare	Failed/Refused/Drop out Treatment Program #2	Quit Job
Didn't Apply OHC	Failed/Refused/Drop out Treatment Program #3	Quit Job #1
Didn't Complete/Qualify Health and Safety Certification	Failure to Enroll/Pay APTC Premiums	Quit Job #2 (CF)
Didn't Co-Op JS #1	Failure to Provide	Quit Job #2 (CW)
Didn't Co-Op JS #2	False Residence/ID	Quit Job #3
Didn't Co-Op JS #3	Family Reunification	Quitting a job
Didn't Coop w. MC Linkage	Family Stabilization	RCA Time Expired
Didn't Co-op with SP-DDSD	Father Not Unemployed	RCA Time Limit
Didn't Cooperate	Father of Unborn-PWO	Real Property
Didn't Go to Job # 1	FC Court Dependency Not Dismissed	Received Permanent Residency Card
Didn't Go to Job # 2	Federal Soc Sec Disability Ins (SSDI)	Recertification Withdrawal
Didn't Go to Job # 3	Finger Match found Recvg CW	Recertified to CalFresh
Didn't Meet CW Req	Fleeing Felon	Reduced Earnings
Didn't Meet WTW # 1	FO - Failed to keep Orientation	Reduced Earnings #2
Didn't Meet WTW # 2	Found on SFIS	Reduced Earnings #3
Didn't Meet WTW # 3	Four Month Continuing	Reduced Hours #1
Didn't Recert License	FT - Failed Pathways to Success	Reduced Hours #2
Didn't Register EDD	FT - Failed to keep Career Opportunities Resources & Employment	Reduced Hours #3
Didn't Register EDD #2	FT - Failed to keep Life Skill Activity	Reduced Work Effort
Didn't Register EDD #3	FT - Failed to keep Pathway To Success Activity	Reducing their earnings
Didn't Request Retro	FTP ABAWD Work #1	Referral to sanction

Didn't Sign MC 13	FTP ABAWD Work #2	Refuse to Comply Sponsorship
Didn't Sign SOF	FTP Age Verification	Refused Assign Supp Rights
Didn't Sign WTW	FTP California Residency	Refused DIB
Didn't Sign WTW # 2	FTP County Residence	Refused Inc-Collect Debt
Didn't Sign WTW # 3	FTP County Residence (Negative Action)	Refused Inc-Life Ins
Difficult pregnancy	FTP Eligibility Forms	Refused Job
Disaster CF Missed Interview	FTP Eligibility Forms (CMSP)	Refused Job # 3
Disrupted Adoption	FTP Graduate by 19	Refused Job #2
Diversion	FTP HIC #	Refused job offer/Voluntarily quit job
DM - Failed to keep Domestic Violence Services	FTP Immunization	Refused job offer/Voluntarily quit job
Does Not Live in County (CMSP)	FTP Immunizations	Refused Job Offer/Voluntray Quit job no show
Does Not Meet Minor Consent Requirements	FTP Immunizations Close Program	Refused Job Offer/Voluntray Quit job no show #2
Does Not Meet POEM Determination	FTP Income	Refused Job Offer/Voluntray Quit job no show #3
Does not meet the criteria for GR benefits	FTP Income for NOA	Refused Military Ben
Doesn't Meet Program Req.	FTP INS Document	Refused Retirement
Domestic violence	FTP Multiple Vehicles	Refused SDI
Drug Felon (CW & CF)	FTP Name/Identity	Refused Survivor Benefits
Drug Felon (CW only)	FTP One Vehicle	Refused UIB
Drug/Alcohol program Participant	FTP Other Health Care	Refused VA
Due to employment	FTP Pregnancy	Refused Wkr Cmp
Duplicate Application	FTP Proof Burial Property	Refusing to be fingerprinted
Duplicate Filing #1	FTP Proof Child Support Income	Registered in Error
Duplicate Filing #2	FTP Proof Citizenship	Regular EDBC
Duplicate Filing #3	FTP Proof Dependent Care Expense	Relative declined FC (Youakim)
Earned HS diploma or equivalent	FTP Proof Earned Income	Relative elects SSI/SSP
Earnings - Child	FTP Proof Liquid Property	Relative receiving SSI/SSP
Earnings - Father	FTP Proof Lotto/Gambling Income	Remained on Transitional CalFresh
Earnings - Mother	FTP Proof Marital Status	Rent Amount Exceeds TMHI Limit
Earnings - Other Person	FTP Proof Medical Care Expense	Rent Arrearages exceeds TMHI Limit
Earnings - Stepparent	FTP Proof Medical Condition	REP Non Compliance
EBT Form not received	FTP Proof of Costs	REP Non Compliance #2

EBT Whereabouts Unknown	FTP Proof Personal Property	REP Non Compliance #3
EDBC Changes Not Affecting Eligibility	FTP Proof Real Property	Req Pers Didn't Request Disc
EDBC Income Changes Not Affecting Eligibility	FTP Proof Relationship	Requested Disc. - Verbal
EDBC Property Changes Not Affecting Eligibility	FTP Proof Shelter Expense	Requested Disc. - Written
Edwards v. Kizer (38) - Determined Ineligible for Medi-Cal Only	FTP Proof Student Income	Requested Disc. - Written inc. MC
Edwards v. Kizer (38) - Failure to Cooperate, Medi-Cal Only	FTP Proof Third Party Liability	Requested Disc. (CMSP) - Add Person
Elected MAGI	FTP Proof Unearned Income	Requested Disc. (CMSP) - Reapply with Budget Change
Elected Non-MAGI	FTP Proof Utility Expense	Requested Disc. (CMSP) - Verbal
Eligible to MAGI	FTP Proof Vehicle Property	Requested Exclusion
Eligible to MC	FTP Property	Required Forms Not Received
Eligible to TCF	FTP Property for NOA	Requisite Court Language
End of 3 Consecutive ABAWD Months	FTP QC/QA	Residence Address is CMRA
End of Cert Period	FTP Required Info	Resident for less than 15 days
End of Disaster Period	FTP School Verif	Resident of Waiver County
End of Edwards MC	FTP Sponsor Dependents	Resides in a Federally Approved Geographically Excluded Area
End of HA Episode	FTP Sponsor Income	Resides Out of State/County
End of Temp Shelter	FTP Sponsor Property	Responsible Adult
Ended and/or CalWORKs Case term.	FTP Sponsor SOF	Return to Residence
Enrolled	FTP Third Party Liability	RFTHI Form Not Received
Enrolled - Cured Sanction	FTP Vendor Information	RP - Failed to keep Rapid Employment & Promotion
Enrolled/Waiting	FTP Verification	Sanction Cured
Erroneously referred to Cal-Learn	FTP Verification (CMSP)	Sanction Denied
Essential Person did not apply for GR	FTP-Married Filing Jointly Spouse Information	Sanctioned Individual
Exceeded income	Funding related problems	SAPID; Working Toward High School Diploma
Excess Earned Income	GA Employment Hours over 100	SAR
Excess Inkind Income	GA Time Limit	SAR 22 Form Not Received
Excess Liquid Property	General Assistance Program not Available for County	SAR 7 Incomplete
Excess Unearned Income	Gets AAP	SAR 7 Not Received
Excl Child - MC Linkage	Gets APTC	SB 1569 Recipient Test Fail

Excluded CW Indv with a child < 18 yrs	Gets ARC	Second Parent
Excluded Person	Gets CalWORKs	Seeking permanent housing
Excluded Sanction CW Indv	Gets CalWORKs	Senior Parent
Excluded Time Limited CW Indv	Gets CAPI	Separate CF HH
Exempt	Gets CF Inside HH	Separate P&P
Exempted from the Program	Gets CF Outside HH	Severe Family Crisis
Exhausted Expanded Temp-HA	Gets Duplicate Aid	SFIS Match Fraud 1st Instance
Expelled	Gets FC	SFIS Match Fraud 2nd Instance
Extreme weather, acts of nature	Gets Food Distribution	SFIS Match Fraud 3rd Instance
Fail for POI	Gets IHSS	Shelter Not Valid
Fail for PVS	Gets Kin-GAP	Sold CF for $$
Fail to Comply with NHR	Gets RCA	Sold CF for Drugs #1
Failed Job Search	Gets SSI	Sold CF for Drugs #2
Failed MAGI	Gets SSI/SSP	Sold CF for Weapons
Failed OPS Appointment	Gets Tribal TANF	SP - Failed to keep Self-Initiated Program
Failed OPS Appointment #2	Gets Waiver	Special needs
Failed OPS Appointment #3	GR IPV #1	Special needs child care not avail
Failed Property	GR IPV #2	Sponsor and family resources over limit
Failed to Apply for SSI	GR IPV #3	Sponsor Meeting Needs
Failed to Apply/Accept Rail Road Retirement Income	GROW Non Cooperation #2	Sponsor Met AU's Needs
Failed to attend CMA Appointment	GROW Non Cooperation #3	Sponsor Met Mem's Needs
Failed to attend CMA Appointment #2	Guardianship Ended	Sponsor Status
Failed to attend CMA Appointment #3	Guardianship Not Established	Spouse
Failed to attend JFR	Has $100 in LR	Spouse of Excl Stppnt
Failed to attend JFR #2	Has Dependency	Spouse of FRI
Failed to attend JFR #3	Has No Exception	Spouse of FTP Income
Failed to attend the DVS Appointment	Has No Housing Costs	Spouse of FTP Property
Failed to attend the DVS Appointment #2	Have more than one vehicle	Spouse of Married Minor
Failed to attend the DVS Appointment #3	HH Not Receiving CF	SSA
Failed to complete CLA Activity	Home/facility not Eligible	SSA/SSI Denied within 12 Months
Failed to complete CLA Activity #2	Homeless Participant	SSDI

Failed to complete CLA Activity #3	Household Emergency	SSI
Failed to complete CORE Activity	Illness	SSN Enumeration
Failed to complete CORE Activity #2	Illness of Another Household Member Requiring Their Presence	SSP14 Form Not Received
Failed to complete CORE Activity #3	In appeal	SSS Participant Refusing Services due to Exemption
Failed to Complete Determination	In conciliation	ST - Failed to keep Short-Term Training Activity
Failed to complete DRC Activity	In Conciliation	Stage 2 funding issues
Failed to complete DRC Activity #2	In process of curing sanction	Stepparent
Failed to complete DRC Activity #3	Incapacitated	Stop Aid for Optional Member
Failed to complete DVS Activity	Incarcerated	Striker
Failed to complete DVS Activity #2	Incarcerated Juvenile (MediCal)	Student Half Time or More
Failed to complete DVS Activity #3	Incomplete application	Substance abuse
Failed to complete EDU Activity	Incomplete MAGI Application	Support from Absent Parent
Failed to complete EDU Activity #2	Incomplete re-certification	Support from Other Person
Failed to complete EDU Activity #3	Independent CAPI Living Arrangement	Support from Spouse of Parent
Failed to Complete ES Requirements	Indv Left TFS Household	Support serv temp unavail
Failed to complete EVA Activity	Inelig due to CW determination	Support serv unavailable
Failed to complete EVA Activity #2	Inelig for FPL Pgm	TA - Failed to keep Education Training
Failed to complete EVA Activity #3	Ineligible CF Student	TA - Failed to keep GED Activity
Failed to complete GED Activity	Ineligible Non Citizen	TA - Failed to keep Literacy
Failed to complete GED Activity #2	Institutionalized	TCF Received
Failed to complete GED Activity #3	Insufficient Information For Linkage	Teen experiencing a family crisis
Failed to complete GTEP Activity	Inter-County Transfer	Teen meets Cal-Learn exemption
Failed to complete GTEP Activity #2	Invalid TCF Applicant	Teen Parent Transfer
Failed to complete GTEP Activity #3	Involved in Legal Difficulties	Teen refuses major medical serv.
Failed to complete GYEP Activity	IPV Court Decision Sanction 1	Temporarily ill or incapacitated

Failed to complete GYEP Activity #2	IPV Court Decision Sanction 2	Temporarily Laid Off - Expected to Return Within 60 Days
Failed to complete GYEP Activity #3	IPV Court Decision Sanction 3	Temporary Illness or Disability
Failed to complete ICM Activity	IPV Disqualify Agreed Sanction 1	Terminated due to 0-day sanction
Failed to complete ICM Activity #2	IPV Disqualify Agreed Sanction 2	Terminated due to 30-day sanction
Failed to complete ICM Activity #3	IPV Disqualify Agreed Sanction 3	Terminated due to 60-day sanction
Failed to complete JDM Activity	IPV Disqualify Hearing Waiver 1	Terminated due to other GR reasons
Failed to complete JDM Activity #2	IPV Disqualify Hearing Waiver 2	Terminated due to time limit
Failed to complete JDM Activity #3	IPV Disqualify Hearing Waiver 3	Time Limit Reached
Failed to complete JRT Activity	IPV STATE Hearing Sanction 1	Timed out of Stage 2
Failed to complete JRT Activity #2	IPV STATE Hearing Sanction 2	TMC
Failed to complete JRT Activity #3	IPV STATE Hearing Sanction 3	TMC Report Incomplete
Failed to complete JRY Activity	IPV-Drug	TMC Report Not Recvd
Failed to complete JRY Activity #2	Irregular School Attend.	TNB Recert Expired
Failed to complete JRY Activity #3	JC - Failed to keep Job Readiness Training	Transferred
Failed to complete LIT Activity	JC - Failed to keep Job Readiness Training for Youth	Transferred Income
Failed to complete LIT Activity #2	JD - Failed to keep Job Development Activity	Transferred Property
Failed to complete LIT Activity #3	JS - Failed to keep Intensive Case Management Activity	Transferred to Non-FC Program
Failed to complete MHS Activity	Jurisdiction Terminated (Not Youakim Elig.)	Transferred to Stage 2
Failed to complete MHS Activity #2	Jurisdiction Transfer	Transferred to Stage 3
Failed to complete MHS Activity #3	Lack of Dependent Care	Travel Time Exceeds two hours round trip or two miles walking
Failed to complete NCP Activity	Lack of English Proficiency	Tribal TANF
Failed to complete NCP Activity #2	Lack of supportive services	Turned Down a Job #1
Failed to complete NCP Activity #3	Lack of Transportation	Turned Down a Job #2
Failed to complete OPS Activity	Late Periodic Report SAR 72	Turned Down a Job #3
Failed to complete OPS Activity #2	Late Periodic Report SAR 73	T-Visa Denied

Failed to complete OPS Activity #3	Legal Difficulties	UIB
Failed to complete Orientation Activity	Legal Guardian	UIB Requirement not met
Failed to complete Orientation Activity #2	Less Grant Income	Unaided Sibling
Failed to complete Orientation Activity #3	Lic. or exempt child care not avail	Unallow. Wthdrwl
Failed to complete OST Activity	Linkage to Medi-Cal	Under 18 years old or over 50 years old
Failed to complete OST Activity #2	Liq Res Over Cost of Transp	Undoc Alien
Failed to complete OST Activity #3	Liq Res Plus Inc Meets Eviction Need	Unrelated Person
Failed to complete PTS Activity	Lived w/ Leg.Guard. < 12 Mo.	Unrelated Prim Appl
Failed to complete PTS Activity #2	Lived w/ Leg.Guard. < 6 Mo.	Unrequested Medi-Cal
Failed to complete PTS Activity #3	Lives an Unreasonable Distance from the Program Site	Unrequested Retro Medi-Cal
Failed to Complete Redetermination	Living in a federally determined work surplus area	Unverif: Budget MTH ERN Inc
Failed to Complete SAWS2	Living in a household with a child under 18 years old	Unverif: Restricted Acct. Withd
Failed to complete SIP Activity	MAGI Determination Pending	Unverified T-Visa
Failed to complete SIP Activity #2	Mandatory	Unverified U-Visa
Failed to complete SIP Activity #3	Mandatory/Optional Rules	US Citizen
Failed to complete SIT Activity	Married Minor	USCIS Approved T Visa
Failed to complete SIT Activity #2	MC 176 S Incomplete	USCIS Approved U Visa
Failed to complete SIT Activity #3	MC 176 S Not Received	U-Visa Denied
Failed to complete SOA Activity	MC 194 Form Not Received	VA - Failed to keep Vocational Assessment Appointment
Failed to complete SOA Activity #2	MC Verbal Withdrawal (CMSP snippet)	Veh CNTBL Value Exceeded Limit
Failed to complete SOA Activity #3	Medical Reason	Verbal Withdrawal
Failed to complete SOT Activity	MEDs Respon. Rel	Verified illness < 30 days
Failed to complete SOT Activity #2	Meets age requirements	Veteran's Benefits
Failed to complete SOT Activity #3	Mental health	VISTA volunteer

Failed to complete SYE Activity	Mental health/Physical Disabilities	Vital Statistics citizenship verified Data Sweep for restricted benefits
Failed to complete SYE Activity #2	MFG Child	Vital Statistics Unverified
Failed to complete SYE Activity #3	MH - Failed to keep Clinical Assessment	Voluntary (19 years old)
Failed to complete the CAC Activity	MH - Failed to keep Mental Health Services	Voluntary Placement Expired
Failed to complete the CAC Activity #2	Mid-Period Addition	Waiting for Approval
Failed to complete the CAC Activity #3	Minor Cannot Apply for GR	Waiting for CalWORKs
Failed to complete VOC Activity	Minor Consent	Weekly Earnings = Fed Minimum Wage x 30hrs
Failed to complete VOC Activity #2	Minor Parent	Welfare to Work / Alternative Employment Program
Failed to complete VOC Activity #3	Minor Parent Linkage Only	Whereabouts Unknown
Failed to complete WIA Activity	Minor Pnt Liv Arrng	Withdrawal - Written
Failed to complete WIA Activity #2	Minor Pnt Payee Agrmnt	Withdrew (plan to adopt)
Failed to complete WIA Activity #3	Missed EBT Out of ST/CNTY appt	Worker Initiated-Skip CalHEERS
Failed to complete YTH Activity	Mother Not Unemployed	Working
Failed to complete YTH Activity #2	Moved out of county	Working 30 hrs or more weekly
Failed to complete YTH Activity #3	Moved Out of County (CMSP)	Working and Refuses to Verify Employment
Failed to Comply with IFDS	MPPP Declined Eligible	Works Pending and/or Failed Residency Requirements
Failed to Comply with SSI	NC - Failed to keep Non-Custodial Parent Activity	WPR
Failed to enroll in EDU Appointment	Need Met by CF	WR - Failed to keep Day Reporting Center Activity
Failed to enroll in EDU Appointment #2	Need Met by Community Resource	WR - Failed to keep Employment Needs Evaluation Activity
Failed to enroll in EDU Appointment #3	Need Met by HA	WR - Failed to keep Job Fair Activity
Failed to enroll in GED Appointment	Need Met by MC	Written Withdrawal
Failed to enroll in GED Appointment #2	New Application	Written Withdrawal inc. MC
Failed to enroll in GED Appointment #3	NMD Does Not Meet Five Requirements	WT - Failed Family Reunification

Failed to File SSI Hearing	NMD Moved out of Calif.	WT - Failed Job/Training Offered
Failed to keep SSIAP appointment	NMD Non-coop w/6-month Review	YT - Failed to keep CSBG Activity
Failed to make satisfactory progress in DRC Activity	NMD Not Juvenile Court supervised	YT - Failed to keep CSE Activity
Failed to make satisfactory progress in DRC Activity #2	NMD Not living w/Relative	YT - Failed to keep GROW Transition-Age Youth Employment Program (GTEP)
Failed to make satisfactory progress in DRC Activity #3	No Activity	YT - Failed to keep GROW Youth Employment Program (GYEP)
Failed to make satisfactory progress in DVS Activity	No Apparent CW Elig.	YT - Failed to keep Summer Youth Employment Activity
Failed to make satisfactory progress in DVS Activity #2	No Appl - Req Person	YT - Failed to keep Youth Activity
Failed to make satisfactory progress in DVS Activity #3	No CF	
Failed to make satisfactory progress in EDU Activity	No Child Care Available	

CT 255: Program Admin
Authorized Representative
Additional Correspondence Recipient
Payee
Primary Applicant/Recipient
Secondary Payee

10182: Payee SubType
Authorized Rep
Caretaker
Caregiver
Conservator
Emergency Payee
Emergency Rep
In Care Of
Legal Guardian
Public Guardian
Protective Payee
Regular
Senior Parent
Two Party
Vendor

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-216432

Updates to MAGI, Non-MAGI, and Mixed Medi-Cal Prepopulated RE Packets

	DOCUMENT APPROVAL HISTORY	
CalSAWS	Prepared By	Rainier Dela Cruz, Connor Gory
	Reviewed By	Priya Sridharan, William Baretsky, Geetha Ramalingam, Shilpa Suddavanda

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/11/2020	1.0	Initial Revision	Rainier Dela Cruz
03/08/2021	1.1	Added recommendation to update the County Contact/TTY phone number for additional counties and to add a recommendation to update the MAGI Discontinuance for EDR batch job.	Rainier Dela Cruz
04/13/2021	1.2	Added a design clarification on the new portal URL.	Rainier Dela Cruz
04/22/2021	1.3	Updated the key scheduling dependencies for the RE packet batch jobs to state the correct batch job numbers.	Rainier Dela Cruz
04/27/2021	1.4	Added a content revision to update the reprint functionality.	Rainier Dela Cruz
06/02/2021	1.5	Added a content revision to add the National Voter Registration Act Voter Preference Form to all the packets. Updated the assumption about the GEN 1365, updated the Check to Sign indicators to match current functionality and updated the OPA condition in the Non-MAGI Packet driving query to match the current functionality. Updated the population on Medicare Part D to match current functionality.	Rainier Dela Cruz

Table of Contents

1 OVERVIEW

All County Welfare Director Letter (ACWDL) 20-21 and Medi-Cal Eligibility Division Information Letter (MEDIL) 20-39 provided the templates for the prepopulated Medi-Cal (MC) annual renewal forms that are sent to Modified Adjusted Gross Income (MAGI) and Non-MAGI MC beneficiaries who do not have their MC automatically renewed. ACWDL 20-21 provided the updated MAGI MC 216, the updated Non-MAGI MC 210 RV forms and MEDIL 20-39 provided the new Mixed Household MC 217 form.

This system change request (SCR) outlines the updates to the current redetermination (RE) packets and batch processes in CalSAWS and planned for the 21.07 Release. However, the updates will **not** be visible in the system **until the Go-Live of the C-IV counties** in CalSAWS. The updated forms and RE packets will not be available in Template Repository until that date and the updated batch processes will not run until the October 2021 benefit month.

1.1 Current Design

Currently in CalSAWS, there are multiple RE packets available in the Template Repository and are also sent out through the automated batch processes. The following packets are available in the system: MC Redetermination Packet, MC Packet, MAGI MC Packet, Mixed MC RE Packet, MC LTC Packet, MSP Packet, MC 604 IPS Packet, Pre-ACA MC RE Packet.

In C-IV, there are also multiple RE packets available in Template Repository and sent out through the automated batch processes. However, these packets will not be migrated over to the CalSAWS system. The Migration Counties will use the new packets once the counties go live in CalSAWS.

1.2 Requests

Update the MAGI MC Packet, MC Packet, and Mixed MC RE packet with the pre-populated forms provided by ACWDL 20-21 and update the packet names to MAGI RE Packet, Non-MAGI RE Packet and Mixed Household RE Packet.

1.3 Overview of Recommendations

1. Remove the following redetermination packets from Template Repository and associated batch processes: MC Redetermination, MC LTC Packet, MSP Packet, MC 604 IPS Packet and Pre-ACA MC RE Packet.

2. Update the MC 216 form to the 10/20 revision.

3. Update the MC 210 RV form to the 10/20 revision.

4. Add the MC 217 (10/20) form.

5. Update the MC 003 form to the 11/12 revision.

6. Update the PUB 13 to the to the 08/20 revision.

7. Update the PUB 183 to the 09/15 revision and the PUB 184 to the 01/17 revision.

8. Update the MC 216 form in the existing MAGI MC Packet for Los Angeles County and update the name of the packet to MAGI RE Packet.

9. Add a new MAGI RE Packet for the Migration Counties to CalSAWS. The packet will contain the following forms: **MC 216 (10/20), MC 019 (02/15), MC 219 (11/15), MC 372 (09/09), PUB 13 (08/20), PUB 183 (09/15)/PUB 184 (01/17) and MC 003 (11/12)**.

10. Update the MC 210 RV form in the existing MC Packet for Los Angeles County and update the packet name to Non-MAGI RE Packet.

11. Add a new Non-MAGI RE Packet for the Migration Counties to CalSAWS. The packet will contain the following forms: **MC 210 RV (10/20), MC 019 (02/15), MC 219 (11/15), MC 372 (09/09), MC 007 (07/19), DHCS 7077 (12/18), DHCS 7077-A (05/07), PUB 13 (08/20), PUB 183 (09/15)/PUB 184 (01/17) and MC 003 (11/12)**.

12. Update the existing Mixed MC RE Packet to use the new MC 217 form for Los Angeles County and update the packet name to Mixed Household RE Packet.

13. Add a new Mixed Household RE Packet for the Migration Counties to CalSAWS. The packet will contain the following forms: **MC 217 (10/20), MC 019 (02/15), MC 219 (11/15), MC 372 (09/09), MC 007 (07/19), DHCS 7077 (12/18), DHCS 7077-A (05/07), PUB 13 (08/20), PUB 183 (09/15)/PUB 184 (01/17) and MC 003 (11/12)**.

14. Create a new batch process to send out the MAGI RE packet for the Migration Counties.

15. Create a new batch process to send out the Non-MAGI RE packet for the Migration Counties.

16. Create a new batch process to send out the Mixed Household RE packet for the Migration Counties.

17. Update the existing batch process that sends out MAGI, Non-MAGI, and Mixed Household RE packet to remove references to the packets that are being removed.

18. Update the MAGI Discontinuance for Eligibility Determination Request (EDR) batch process to look for the MAGI RE packet and Mixed Household RE packet for both Los Angeles County and Migration Counties.

19. Update the reprint functionality to prevent the MC RE packets that will be removed to be reprinted centrally and locally.

1.4 Assumptions

1. The updates to the redetermination packets and batch processes outlined by this SCR will be part of the 21.07 Release but the changes will not be visible in the system until the Go Live Date of the C-IV Counties and after the existing packets for Los Angeles County has gone out in September for the RE due in November. The new packets will go out for all counties in October for RE due in December.

2. The MAGI, Non-MAGI, and Mixed Household RE packets will be implemented in only English and Spanish. The packets will be implemented in the other CalSAWS supported threshold languages by SCR **CA-223571**.

3. The PUB 183/PUB 184 will be implemented in the other CalSAWS supported threshold languages by SCR **CA-217134**.

4. The update to the Enclosure functionality for the packets will be implemented with SCR **CA-218612**.

5. Los Angeles County will retain their current process of 'pre-stuffed' RE Packets, with only the Coversheet and renewal forms being generated out of CalSAWS. The remainder of the forms will continue to be pre-stuffed, and Los Angeles County will follow their existing processes to make any updates to the pre-stuffed forms.

6. The MAGI, Non-MAGI, and Mixed Household RE packets for Los Angeles County will use the generic journal entry.

7. The MAGI, Non-MAGI, and Mixed Household RE packets for Los Angeles County will be updated to populate the new portal URL with SCR **CA-224200**.

8. The maximum number of pages that can fit in a flat mail envelope is 25 physical pages (50 impression).

9. The GEN 1365 will be included in the packet during the bundling process and the Voter Registration Card will be included at the Print Center.

10. The Medi-Cal RE Packet catch up batch process for the Migration Counties will be implemented with SCR **CA-225011**.

11. Per existing MC RE Packet batch process functionality, if there are multiple MC program blocks on the case, an RE Packet will be sent for each program.

2 RECOMMENDATIONS

2.1 Remove Existing Medi-Cal Redetermination Packets

2.1.1 Overview

This section covers the removal of existing Medi-Cal redetermination packets from Template Repository and turning off the batch processes that sends out the packets.

2.1.2 Description of Change

1. Remove the following redetermination packets from Template Repository the day before the **CalSAWS Go-Live date** of the C-IV counties:
   Technical Note: *The C-IV cutover date is stored in CT2799 – Component Effective Date.*
   a. MC LTC Packet
   b. MSP Packet
   c. MC 604 IPS Packet
   d. MC Redetermination Packet
      Note: *This packet is different from the MC Packet that also currently exists in the system.*
   e. Pre-ACA MC RE Packet

2. Turn off the following redetermination packet batch jobs the day before the **CalSAWS Go-Live date** of the C-IV counties:
   a. Medi-Cal Redetermination Packet - LTC (PB19R531, PB19R525)
   b. MR4 Medi-Cal Redetermination Packet - MSP (PB19R532, PB19R524)
   c. MC 604 IPS Packet (PB00R527, PB19R522)
   d. Medi-Cal Redetermination Packet - DQ (PB19R529)
   e. Medi-Cal Pre ACA Redetermination Packet (PB19R528)

2.2 Update County Contact Numbers

2.2.1 Overview

SCR CA-207432 added the county contact numbers that populate on the existing MC 216. The contact primary number on the County Contact Number listed on the 'Correspondence' page for Mono County is blank and the existing phone numbers for Lake, Mendocino, Modoc, Monterey, and San Joaquin counties are not the up to date phone numbers. Update

the contact primary phone number or TTY/TDD phone number to the phone numbers provided by the counties.

2.2.2 Description of Change

1. Update the contact primary number to **(760) 924-1770** for Mono County.

2. Update the contact primary number to **(707) 995-4200** for Lake County.

3. Update the contact primary number to **(707) 463-7700** for Mendocino County.

4. Update the TTY/TDD phone number (stored in the 'Toll-Free Number' field) to **(800) 863-4155** for Modoc County.

5. Update the contact primary number to **(877) 410-8823** for Monterey County.

6. Update the contact primary number to **(209) 468-1000** for San Joaquin County.

2.3 Update the MC 216 Form

2.3.1 Overview

This section describes the updates to the MC 216 form.

State Form: MC 216

Current Program: Medi-Cal

Current Attached Form(s): N/A

Current Forms Category: Forms

Current Languages: English, Spanish, Armenian, Cambodian, Cantonese, Korean, Mandarin, Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese.

Current Imaging Category: Customer Reporting

Current Imaging Form Name: MC Renewal Form

Template Repository Visibility: All Counties

2.3.2 Description of Change

1. Update the MC 216 form to the 10/20 revision and turn off the threshold languages. The updated version of the MC 216 is not available in Template Repository **until the CalSAWS Go-Live of the C-IV counties**.

   Form Number: MC 216

   Form Name: MAGI MC Renewal Form

   Updated Languages: English, Spanish

   Updated Imaging Form Name: MAGI MC Renewal Form

   Include NA Back 9: N

   Form Mockups/Examples: Please refer to Supporting Documents #1

2. Update the population logic and add dynamic sections.
   a. The variables are populated as follows:

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 1 – Cover Page	**RE Due Date**	The field populates with the redetermination due date. Format: Month Day, Year	Y	Y	Y
Page 1 – Cover Page	**County Phone Number**	The field populates with the contact primary number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX	Y	Y	Y
Page 1 – Cover Page	**County TTY Number**	The field populates with the Toll-Free number on the County Contact Number listed on the Correspondence page.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Format: 1-XXX-XXX-XXXX (excluding 711 phone number)			
Page 1 – Cover Page	Recipient Mailing Address	This field populates with the mailing address of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the documents parameter page when generating from Template Repository.	Y	Y	Y
Page 1 – Cover Page	Notice Date	This field populates with the date when the form was generated. Format: MM/DD/YYYY	Y	Y	Y
Page 1 – Cover Page	Case Number	This field populates with the case name of the current case.	Y	Y	Y
Page 1 – Cover Page	Case Name	This field populates with the case number of the current case.	Y	Y	Y
Page 1 – Cover Page	Worker Name	This field populates with the name of the worker.	Y	Y	Y
Page 1 – Cover Page	Worker Phone Number	This field populates with phone number of the worker. Format: (###) ###-####	Y	Y	Y
Page 1 – Cover Page	Name	This field populates with the name of the person. Format: First, Middle, Last, Suffix	Y	Y	Y
Page 1 – Cover Page	Date of Birth	This field populates with the date of birth of the person.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Format: MM/DD/YYYY			
Page 1 – Cover Page	Portal Name	This field populates with the URL of the Self-Service Portal. If the case is managed in a migration county, this field populates with the URL of BenefitsCal (www.benefitscal.org). If case is managed in Los Angeles County, this field populates with the URL of YourBenefitsNow.	Y	Y	Y
Page 1 – Cover Page	Office Name	This field populates with the name of the office.	Y	Y	Y
Page 1 – Cover Page	Office Address	This field populates with the office address.	Y	Y	Y
Page 1 – Cover Page	Office Hours Begin	This field populates with the start time of the office hours. Format: X:XX am	Y	Y	Y
Page 1 – Cover Page	Office Hours End	This field populates with the end time of the office hours. Format: X:XX pm	Y	Y	Y
Page 2 – Contact Info	Name	This field populates with the name of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the documents parameter page when generating from Template Repository. Format: First, Middle, Last, and Suffix	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Note: The same person is used to populate the address, phone number, email, language fields on page 2 below.			
Page 2 – Contact Info	Home Address	This field populates with the person's physical address.	Y	Y	Y
Page 2 – Contact Info	Mailing Address	This field populates with the person's mailing address if it is different from the home address. If it is the same as the home address or if there is no mailing address, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	Home Phone Number	This field populates with the person's home phone number. If there is no home phone number, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	Cell Phone Number	This field populates with the person's cell phone number. If there is no cell phone number, this field will be blank. Format: (###) ###-####	Y	Y	Y
Page 2 – Contact Info	Other Phone Number	This field populates with the person's other phone number. It populates the phone number based on the hierarchy below: • Message • Work • TDD • Fax • Toll Free	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		If no phone number is available, this field will be blank. Format: (###) ###-####			
Page 2 – Contact Info	Email	This field populates with the person's email address. If there is no email address, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	Written Language	This field populates with the person's written language.	Y	Y	Y
Page 2 – Contact Info	Spoken Language	This field populates with the person's spoken language.	Y	Y	Y
Page 2 – Contact Info	County Phone Number	The field populates with the contact primary number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX	Y	Y	Y
Page 2 – Contact Info	County TTY Number	The field populates with the Toll-Free number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX (excluding 711 phone number)	Y	Y	Y
Page 3 – Household Members	Primary Person Name	This field populates with the name of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		documents parameter page when generating from Template Repository. Format: First, Middle, Last, and Suffix			
Page 3 – Household Members	Household Person Name	This field populates with the name of household member other than the primary person. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 3 – Household Members	Relationship Type	This field populates with the relationship of the household member to the primary person.	Y	Y	Y
Page 3 – Household Members	Address	This field populates with the home address of the household member.	Y	Y	Y
Page 4 – Tax Info	Tax Filer Name	This field populates with the name of the tax filer. This information is retrieved from the Tax Household record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 4 – Tax Info	Plan to File	This field populates with 'Yes' or 'No' if the person is planning to file taxes. This information is retrieved from the Tax Household record.	Y	Y	Y
Page 4 – Tax Info	Expected to File	This field populates with 'Yes' or 'No' if the person is expected to file taxes. This information is retrieved	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		from the Tax Household record.			
Page 4 – Tax Info	**Tax Filing Status**	This field populates with the expected filing status of the person. This information is retrieved from the Tax Household record.	Y	Y	Y
Page 6 - Income	**Name**	This field populates with the name (first, middle, last, and suffix) of the person on the income record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 6 - Income	**Source of Income**	This field populates with the source of the income.	Y	Y	Y
Page 6 - Income	**Income Amount**	This field populates with the income amount. Format: $XX.XX	Y	Y	Y
Page 6 - Income	**Frequency**	This field populates the income frequency.	Y	Y	Y
Page 8 - Expenses	**Name**	This field populates with the name (first, middle, last, and suffix) of the person on the expense record.	Y	Y	Y
Page 8 - Expenses	**Type of Expense**	This field populates with the type of the expense.	Y	Y	Y
Page 8 - Expenses	**Amount**	This field populates with the amount of the expense. Format: $XX.XX	Y	Y	Y
Page 8 - Expenses	**Frequency**	This field populates with the frequency of the expense.	Y	Y	Y
Page 9 – Medicare Coverage	**Name**	This field populates with the name (first, middle, last, and suffix)	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		on the Medicare record.			
Page 9 – Medicare Coverage	Part A Premium	This field populates with the Part A amount from the Medicare record. If the payment method is 'State', populate the field with 'Paid by State'. Format: $XX.XX	Y	Y	Y
Page 9 – Medicare Coverage	Part B Premium	This field populates with the Part B amount from the Medicare record. If the payment method is 'State', populate the field with 'Paid by State'. Format: $XX.XX	Y	Y	Y
Page 9 – Medicare Coverage	Part C Premium	This field is blank.	N	N	Y
Page 9 – Medicare Coverage	Part D Premium	This field populates with the Part D amount from the Medicare record. Format: $XX.XX	Y	Y	Y
Page 10 – Long Term Care	Name	The field populates with the name of the person in the LTC facility. This information is retrieved from the Living Arrangement record with the type of 'Nursing Home/Long Term Care'. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 10 – Long Term Care	Facility Name	This field populates with the name of the LTC facility.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 10 – Long Term Care	Facility Address	This field populates with the person's physical address.	Y	Y	Y
Page 11 – Other Health Insurance	Name	This field populates with the name of the beneficiary or beneficiaries on the Other Health Care record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 11 – Other Health Insurance	Insurance Name	This field populates with the name of the insurance company. This is the health insurance company name when the health coverage type is 'All Other Health Coverage'. For the other types, this field is blank.	Y	Y	Y
Page 11 – Other Health Insurance	Type of Insurance	This field populates with the health coverage type.	Y	Y	Y
Page 11 – Other Health Insurance	Premium Amount	This field populates with the expense amount. When the health coverage type is 'All Other Health Coverage' and the 'Is this Employer Sponsored Insurance Outside Exchange?' question is answered 'Yes', the expense amount displays under the Health Insurance Premium Expense section. Format: $XX.XX	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 11 – Other Health Insurance	**Frequency**	This field populates with the frequency. When the health coverage type is 'All Other Health Coverage' and the 'Is this Employer Sponsored Insurance Outside Exchange?' question is answered 'Yes', the frequency displays under the Health Insurance Premium Expense section.	Y	Y	Y
Page 13 – Info Reported	**Incarcerated Name**	This field populates with the name of the person who is incarcerated. This person is listed as incarcerated on the most recent DER but is not verified. ***Technical Note:*** This information can be found on the CalHEERS Verification table. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 13 – Info Reported	**Deceased Name**	This field populates with the name of the person who is deceased. This person is listed as deceased on the most recent DER but is not verified. ***Technical Note:*** This information can be found on the CalHEERS Verification table.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Format: First, Middle, Last, and Suffix			

b. Make the following sections dynamic:

Section	Dynamic Section	Conditions
Page 1 – Cover Page	List of persons under the 'It's time to renew benefits for:' section.	This section contains a repeating row that repeats for each person active program person. The section will expand to fit the list of persons.
Page 3 – Household Members	List of household members under the 'Review your household member information' section.	This section initially contains three rows. If there are more than four persons, the row will repeat for each additional person.
Page 4 – Tax Info	List of tax filers under the 'Review your tax information' section.	This section initially contains two rows. The first row always displays the primary tax filer. If there are more than one non-primary tax filer, the row will repeat for each tax filer.
Page 6 - Income	List of incomes under the 'Review of income information' section.	This section initially contains three rows. If there are more than three income records, the row will repeat for each additional income record.
Page 8 - Expenses	List of expenses under the 'Review you expenses and deduction information' section.	This section initially contains two rows. If there are more than two expense records, the row will repeat for each additional expense record.
Page 9 – Medicare Coverage	The Medicare Coverage section.	This section displays on the form only if there is at least one Medicare record. If there are no records, the section is hidden.
Page 9 – Medicare Coverage	List of Medicare information under 'Review your Medicare information' section.	This section initially contains two rows. If there are more than two Medicare records, the row will repeat for each additional Medicare record.
Page 10 – Long Term Care	The Long Term Care section	This section displays on the form only if there is at least one Living Arrangement record for LTC.
Page 10 – Long Term Care	List of Long Term Care facilities under the 'Review your long-term care information' section.	This section initially contains two rows. If there are more than two Living Arrangement records for LTC, the row will repeat for each additional record.
Page 11 – Other	List of Other Health Insurance information under the 'Review	This section initially contains two rows. If there are more than two Other Health

Section	Dynamic Section	Conditions
Health Insurance	your health insurance information' section.	Care records, the row will repeat for each additional record.
Page 12 – Household Changes	The Medicare section.	This section displays on the form if the Medicare Coverage section is hidden, otherwise, this section is hidden.
Page 12 – Household Changes	The Long Term Care section.	This section displays on the form if the Long Term Care section is hidden, otherwise, this section is hidden.
Page 13 – Info Reported	The Incarcerated Person Section.	This section displays if there is data population, otherwise, this section is hidden.
Page 13 – Info Reported	The Deceased Person Section	This section displays if there is data population, otherwise, this section is hidden.
Page 13 – Info Reported	List of the name of the persons who is incarcerated or deceased.	This section initially contains one row for incarcerated person and one row for the deceased person. If there are additional records, the row will repeat for each additional record.

3. The form has the following print options:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Y	Y	Y	N	Y	N

4. The form has the following mailing options:

Mailing Options	Option for MC 216
Mail-To (Recipient)	N/A – the form cannot be printed centrally.
Mailed From (Return)	N/A – the form cannot be printed centrally.
Mail-back-to Address	N/A – the form cannot be printed centrally.
Outgoing Envelope Type	N/A – the form cannot be printed centrally.
Return Envelope Type	N/A – the form cannot be printed centrally.

5. The form has the following barcodes:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. The form has the following additional options:

Additional Options	Option for MC 216
Special Paper Stock	N/A
Enclosures	No
CW/CF e-sign	No
Check to Sign	Yes
Post to Self Service Portal	Yes

2.4 Update the MC 210 RV Form

2.4.1 Overview

This section describes the updates to the MC 210 RV form.

State Form: MC 210 RV

Current Program: Medi-Cal

Current Attached Form(s): N/A

Current Forms Category: Forms

Current Languages: English, Spanish, Arabic, Armenian, Cambodian, Cantonese, Farsi, Hmong, Korean, Mandarin, Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Current Imaging Category: Customer Reporting

Current Imaging Form Name: MC Annual Redetermination Form

Template Repository Visibility: All Counties

2.4.2 Description of Change

1. Update the MC 210 RV to the 10/20 revision and turn off the threshold languages. The updated version of the MC 210 RV is not available in Template Repository **until the CalSAWS Go-Live of the C-IV counties**.

Form Number: MC 210 RV

Updated Form Title: Non-MAGI MC Renewal Form

Updated Languages: English, Spanish

Updated Imaging Form Name: Non-MAGI MC Renewal Form

Include NA Back 9: N

Form Mockups/Examples: Please refer to Supporting Documents #2

    a. Include the following parameters for the packet on the
       Document Parameters page:
       Technical Note: *The name of the document parameter is*
       REPacket.jsp. This is the current document parameter used by
       the MC 216.
         i. Case Number
         ii. Customer Name
         iii. Program
         iv. RE Month
         v. Language

Figure 2.4.1 – Document Parameters Page

2. Update the population logic and add dynamic sections.
    a. The variables are populated as follows:

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 1 – Cover Page	RE Due Date	The field populates with the redetermination due date. Format: Month Day, Year	Y	Y	Y
Page 1 – Cover Page	County Phone Number	The field populates with the contact primary number on the County Contact Number listed on the	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Correspondence page. Format: 1-XXX-XXX-XXXX			
Page 1 – Cover Page	County TTY Number	The field populates with the Toll-Free number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX (excluding 711 phone number)	Y	Y	Y
Page 1 – Cover Page	Recipient Mailing Address	This field populates with the mailing address of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the documents parameter page when generating from Template Repository.	Y	Y	Y
Page 1 – Cover Page	Notice Date	This field populates with the date when the form was generated. Format: MM/DD/YYYY	Y	Y	Y
Page 1 – Cover Page	Case Number	This field populates with the case name of the current case.	Y	Y	Y
Page 1 – Cover Page	Case Name	This field populates with the case number of the current case.	Y	Y	Y
Page 1 – Cover Page	Worker Name	This field populates with the name of the worker.	Y	Y	Y
Page 1 – Cover Page	Worker Phone Number	This field populates with phone number of the worker. Format: (###) ###-####	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 1 – Cover Page	Name	This field populates with the name of the person. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 1 – Cover Page	Date of Birth	This field populates with the date of birth of the person. Format: MM/DD/YYYY	Y	Y	Y
Page 1 – Cover Page	Portal Name	This field populates with the URL of the Self-Service Portal. If the case is managed in a migration county, this field populates with the URL of BenefitsCal (www.benefitscal.org). If case is managed in Los Angeles County, this field populates with the URL of YourBenefitsNow.	Y	Y	Y
Page 1 – Cover Page	Office Name	This field populates with the name of the office.	Y	Y	Y
Page 1 – Cover Page	Office Address	This field populates with the office address.	Y	Y	Y
Page 1 – Cover Page	Office Hours Begin	This field populates with the start time of the office hours. Format: X:XX am	Y	Y	Y
Page 1 – Cover Page	Office Hours End	This field populates with the end time of the office hours. Format: X:XX pm	Y	Y	Y
Page 2 – Contact Info	Name	This field populates with the name of the primary applicant when generated through batch or the person selected in the Customer Name	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		dropdown on the documents parameter page when generating from Template Repository. Format: First, Middle, Last, and Suffix **Note:** *The same person is used to populate the address, phone number, email, language fields on page 2 below.*			
Page 2 – Contact Info	**Home Address**	This field populates with the person's physical address.	Y	Y	Y
Page 2 – Contact Info	**Mailing Address**	This field populates with the person's mailing address if it is different from the home address. If it is the same as the home address or if there is no mailing address, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	**Home Phone Number**	This field populates with the person's home phone number. If there is no home phone number, this field will be blank. Format: (###) ###-####	Y	Y	Y
Page 2 – Contact Info	**Cell Phone Number**	This field populates with the person's cell phone number. If there is no cell phone number, this field will be blank. Format: (###) ###-####	Y	Y	Y
Page 2 – Contact Info	**Other Phone Number**	This field populates with the person's other phone number. It	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		populates the phone number based on the hierarchy below: • Message • Work • TDD • Fax • Toll Free If no phone number is available, this field will be blank. Format: (###) ###-####			
Page 2 – Contact Info	**Email**	This field populates with the person's email address. If there is no email address, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	**Written Language**	This field populates with the person's written language.	Y	Y	Y
Page 2 – Contact Info	**Spoken Language**	This field populates with the person's spoken language.	Y	Y	Y
Page 2 – Contact Info	**County Phone Number**	The field populates with the contact primary number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX	Y	Y	Y
Page 2 – Contact Info	**County TTY Number**	The field populates with the Toll-Free number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX (excluding 711 phone number)	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 3 – Household Members	Primary Person Name	This field populates with the name of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the documents parameter page when generating from Template Repository. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 3 – Household Members	Household Person Name	This field populates with the name of household member other than the primary person. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 3 – Household Members	Relationship Type	This field populates with the relationship of the household member to the primary person.	Y	Y	Y
Page 3 – Household Members	Address	This field populates with the home address of the household member.	Y	Y	Y
Page 4 - Income	Name	This field populates with the name of the person on the income record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 4 - Income	Source of Income	This field populates with the source of the income.	Y	Y	Y
Page 4 - Income	Income Amount	This field populates with the income amount. Format: $XX.XX	Y	Y	Y
Page 4 - Income	Frequency	This field populates the income frequency.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 6 - Expenses	**Name**	This field populates with the name of the person on the expense record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 6 - Expenses	**Type of Expense**	This field populates with the type of the expense.	Y	Y	Y
Page 6 - Expenses	**Amount**	This field populates with the amount of the expense. Format: $XX.XX	Y	Y	Y
Page 6 - Expenses	**Frequency**	This field populates with the frequency of the expense.	Y	Y	Y
Page 8 - Property	**Name**	This field populates with the name(s) of the owner(s) on the Property record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 8 - Property	**Type of Property**	This field populates with the type of the property. If the category is 'Transferred Property/Income and type is 'Income' or 'Property', populate the field with 'Transferred Property/Income'. If the category is 'Unallowable Withdrawal', populate the field with 'Unallowable Withdrawal'. For the other categories, populate the field with the property type.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 8 - Property	**Property Detail**	This field populates with the property detail. If the category is 'Liquid', populate the field with the 'Company Name'. If the category is 'Motor Vehicle', populate the field with the vehicle type, make, model and year. If the category is 'Transferred Property/Income', populate the field with program and type. If the category is 'Unallowable Withdrawal', populate the field with the description. If the category is 'Personal' or 'Real', this field is blank.	Y	Y	Y
Page 8 - Property	**Amount**	This field populates with the property value. If the status of the property is 'Exempt', populate the field with 'Not counted'. Format: $XX.XX	Y	Y	Y
Page 10 – Medicare Coverage	**Name**	This field populates with the name on the Medicare record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 10 – Medicare Coverage	**Part A Premium**	This field populates with the Part A amount from the Medicare record. If the payment method is 'State', populate the field with 'Paid by State'.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Format: $XX.XX			
Page 10 – Medicare Coverage	Part B Premium	This field populates with the Part B amount from the Medicare record. If the payment method is 'State', populate the field with 'Paid by State'. Format: $XX.XX	Y	Y	Y
Page 10 – Medicare Coverage	Part C Premium	This field is blank.	N	N	Y
Page 10 – Medicare Coverage	Part D Premium	This field populates with the Part D amount from the Medicare record. Format: $XX.XX	Y	Y	Y
Page 11 – Long Term Care	Name	The field populates with the name of the person in the LTC facility. This information is retrieved from the Living Arrangement record with the type of 'Nursing Home/Long Term Care'. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 11 – Long Term Care	Facility Name	This field populates with the name of the LTC facility.	Y	Y	Y
Page 11 – Long Term Care	Facility Address	This field populates with the person's physical address.	Y	Y	Y
Page 12 – Other Health Insurance	Name	This field populates with the name of the beneficiary or beneficiaries on the Other Health Care record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 12 – Other	Insurance Name	This field populates with the name of the	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Health Insurance		insurance company. This is the health insurance company name when the health coverage type is 'All Other Health Coverage'. For the other types, this field is blank.			
Page 12 – Other Health Insurance	**Type of Insurance**	This field populates with the health coverage type.	Y	Y	Y
Page 12 – Other Health Insurance	**Premium Amount**	This field populates with the expense amount. When the health coverage type is 'All Other Health Coverage' and the 'Is this Employer Sponsored Insurance Outside Exchange?' question is answered 'Yes', the expense amount displays under the Health Insurance Premium Expense section. Format: $XX.XX	Y	Y	Y
Page 12 – Other Health Insurance	**Frequency**	This field populates with the frequency. When the health coverage type is 'All Other Health Coverage' and the 'Is this Employer Sponsored Insurance Outside Exchange?' question is answered 'Yes', the frequency displays under the Health Insurance	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Premium Expense section.			

b. Make the following sections dynamic:

Section	Dynamic Section	Conditions
Page 1 – Cover Page	List of persons under the 'It's time to renew benefits for:'	This section contains a repeating row that repeats for each person active program person. The section will expand to fit the list of persons.
Page 3 – Household Members	List of household members under the 'Review your household member information' section.	This section initially contains three rows. If there are more than four persons, the row will repeat for each additional person.
Page 4 - Income	List of incomes under the 'Review of income information' section.	This section initially contains three rows. If there are more than three income records, the row will repeat for each additional income record.
Page 6 - Expenses	List of expenses under the 'Review you expenses and deduction information' section.	This section initially contains two rows. If there are more than two expense records, the row will repeat for each additional expense record.
Page 8 - Property	List of properties under the 'Review your resources and property information' section.	This section initially contains three rows. If there are more than three property records, the row will repeat for each additional expense records.
Page 10 – Medicare Coverage	The Medicare Coverage section.	This section displays on the form only if there is at least one Medicare record. If there are no records, the section is hidden.
Page 10 – Medicare Coverage	List of Medicare information under 'Review your Medicare information' section.	This section initially contains two rows. If there are more than two Medicare records, the row will repeat for each additional Medicare record.
Page 11 – Long Term Care	The Long-Term Care section	This section displays on the form only if there is at least one Living Arrangement record for LTC.
Page 11 – Long Term Care	List of Long-Term Care facilities under the 'Review your long-term care information' section.	This section initially contains two rows. If there are more than two Living Arrangement records for LTC, the row will repeat for each additional record.
Page 12 – Other	List of Other Health Insurance information under the 'Review	This section initially contains two rows. If there are more than two Other Health

Section	Dynamic Section	Conditions
Health Insurance	your health insurance information' section.	Care records, the row will repeat for each additional record.
Page 14 – Household Changes	The Medicare section.	This section displays on the form if the Medicare Coverage section is hidden, otherwise, this section is hidden.
Page 14 – Household Changes	The Long-term care section.	This section displays on the form if the Long-Term Care section is hidden, otherwise, this section is hidden.

3. The form has the following print options:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Y	Y	Y	N	Y	N

4. The form has the following mailing options:

Mailing Options	Option for MC 210 RV
Mail-To (Recipient)	N/A – the form cannot be printed centrally.
Mailed From (Return)	N/A – the form cannot be printed centrally.
Mail-back-to Address	N/A – the form cannot be printed centrally.
Outgoing Envelope Type	N/A – the form cannot be printed centrally.
Return Envelope Type	N/A – the form cannot be printed centrally.

5. The form has the following barcodes:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. The form has the following additional options:

Additional Options	Option for MC 210 RV
Special Paper Stock	N/A
Enclosures	No
CW/CF e-sign	No
Check to Sign	Yes
Post to Self Service Portal	Yes

2.5 Add the MC 217 Form

2.5.1 Overview

This section describes the creation of the MC 217 form and the addition of the form to Template Repository.

Program: Medi-Cal

Forms Category: Forms

Current Languages: English, Spanish

Template Repository Visibility: All Counties

2.5.2 Description of Change

1. Create the MC 217 form. The new form is not available in Template Repository **until the CalSAWS Go-Live of the C-IV counties**.

   Form Header: N/A

   Form Footer: CalSAWS Standard Footer (Footer 1)

   Form Title: Mixed MC Renewal Form

   Form Number: MC 217

   Imaging Form Name: Mixed MC Renewal Form

   Imaging Document Type: Customer Reporting

   Include NA Back 9: No

   Form Mockup/Example: Please refer to Supporting Documents #3

   a. Include the following parameters for the packet on the Document Parameters page:
   Technical Note: *The name of the document parameter is REPacket.jsp. This is the current document parameter used by the MC 216.*
      i. Case Number
      ii. Customer Name
      iii. Program
      iv. RE Month
      v. Language

Figure 2.5.1 – Document Parameters Page

2. Update the population logic and add dynamic sections.
   a. The variables are populated as follows:

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 1 – Cover Page	RE Due Date	The field populates with the redetermination due date. Format: Month Day, Year	Y	Y	Y
Page 1 – Cover Page	County Phone Number	The field populates with the contact primary number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX	Y	Y	Y
Page 1 – Cover Page	County TTY Number	The field populates with the Toll-Free number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX (excluding 711 phone number)	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 1 – Cover Page	Recipient Mailing Address	This field populates with the mailing address of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the documents parameter page when generating from Template Repository.	Y	Y	Y
Page 1 – Cover Page	Notice Date	This field populates with the date when the form was generated. Format: MM/DD/YYYY	Y	Y	Y
Page 1 – Cover Page	Case Number	This field populates with the case name of the current case.	Y	Y	Y
Page 1 – Cover Page	Case Name	This field populates with the case number of the current case.	Y	Y	Y
Page 1 – Cover Page	Worker Name	This field populates with the name of the worker.	Y	Y	Y
Page 1 – Cover Page	Worker Phone Number	This field populates with phone number of the worker. Format: (###) ###-####	Y	Y	Y
Page 1 – Cover Page	Name	This field populates with the name of the person. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 1 – Cover Page	Date of Birth	This field populates with the date of birth of the person. Format: MM/DD/YYYY	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 1 – Cover Page	Portal Name	This field populates with the URL of the Self-Service Portal. If the case is managed in a migration county, this field populates with the URL of BenefitsCal (www.benefitscal.org). If case is managed in Los Angeles County, this field populates with the URL of YourBenefitsNow.	Y	Y	Y
Page 1 – Cover Page	Office Name	This field populates with the name of the office.	Y	Y	Y
Page 1 – Cover Page	Office Address	This field populates with the office address.	Y	Y	Y
Page 1 – Cover Page	Office Hours Begin	This field populates with the start time of the office hours. Format: X:XX am	Y	Y	Y
Page 1 – Cover Page	Office Hours End	This field populates with the end time of the office hours. Format: X:XX pm	Y	Y	Y
Page 2 – Contact Info	Name	This field populates with the name of the primary applicant when generated through batch or the person selected in the Customer Name dropdown on the documents parameter page when generating from Template Repository. Format: First, Middle, Last, and Suffix	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Note: The same person is used to populate the address, phone number, email, language fields on page 2 below.			
Page 2 – Contact Info	**Home Address**	This field populates with the person's physical address.	Y	Y	Y
Page 2 – Contact Info	**Mailing Address**	This field populates with the person's mailing address if it is different from the home address. If it is the same as the home address or if there is no mailing address, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	**Home Phone Number**	This field populates with the person's home phone number. If there is no home phone number, this field will be blank. Format: (###) ###-####	Y	Y	Y
Page 2 – Contact Info	**Cell Phone Number**	This field populates with the person's cell phone number. If there is no cell phone number, this field will be blank. Format: (###) ###-####	Y	Y	Y
Page 2 – Contact Info	**Other Phone Number**	This field populates with the person's other phone number. It populates the phone number based on the hierarchy below: • Message • Work • TDD	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		• Fax • Toll Free If no phone number is available, this field will be blank. Format: (###) ###-####			
Page 2 – Contact Info	Email	This field populates with the person's email address. If there is no email address, this field will be blank.	Y	Y	Y
Page 2 – Contact Info	Written Language	This field populates with the person's written language.	Y	Y	Y
Page 2 – Contact Info	Spoken Language	This field populates with the person's spoken language.	Y	Y	Y
Page 2 – Contact Info	County Phone Number	The field populates with the contact primary number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX	Y	Y	Y
Page 2 – Contact Info	County TTY Number	The field populates with the Toll-Free number on the County Contact Number listed on the Correspondence page. Format: 1-XXX-XXX-XXXX (excluding 711 phone number)	Y	Y	Y
Page 3 – Household Members	Primary Person Name	This field populates with the name of the primary applicant when generated through batch or the person selected in the	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Customer Name dropdown on the documents parameter page when generating from Template Repository. Format: First, Middle, Last, and Suffix			
Page 3 – Household Members	Household Person Name	This field populates with the name of household member other than the primary person. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 3 – Household Members	Relationship Type	This field populates with the relationship of the household member to the primary person.	Y	Y	Y
Page 3 – Household Members	Address	This field populates with the home address of the household member.	Y	Y	Y
Page 4 – Tax Info	Tax Filer Name	This field populates with the name of the tax filer. This information is retrieved from the Tax Household record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 4 – Tax Info	Plan to File	This field populates with 'Yes' or 'No' if the person is planning to file taxes. This information is retrieved from the Tax Household record.	Y	Y	Y
Page 4 – Tax Info	Expected to File	This field populates with 'Yes' or 'No' if the person is expected to file taxes. This	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		information is retrieved from the Tax Household record.			
Page 4 – Tax Info	Tax Filing Status	This field populates with the expected filing status of the person. This information is retrieved from the Tax Household record.	Y	Y	Y
Page 6 - Income	Name	This field populates with the name of the person on the income record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 6 - Income	Source of Income	This field populates with the source of the income.	Y	Y	Y
Page 6 - Income	Income Amount	This field populates with the income amount. Format: $XX.XX	Y	Y	Y
Page 6 - Income	Frequency	This field populates the income frequency.	Y	Y	Y
Page 8 - Expenses	Name	This field populates with the name of the person on the expense record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 8 - Expenses	Type of Expense	This field populates with the type of the expense.	Y	Y	Y
Page 8 - Expenses	Amount	This field populates with the amount of the expense. Format: $XX.XX	Y	Y	Y
Page 8 - Expenses	Frequency	This field populates with the frequency of the expense.	Y	Y	Y
Page 10 - Property	Name	This field populates with the name(s) of	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		the owner(s) on the Property record. Format: First, Middle, Last, and Suffix			
Page 10 - Property	**Type of Property**	This field populates with the type of the property. If the category is 'Transferred Property/Income and type is 'Income' or 'Property', populate the field with 'Transferred Property/Income'. If the category is 'Unallowable Withdrawal', populate the field with 'Unallowable Withdrawal'. For the other categories, populate the field with the property type.	Y	Y	Y
Page 10 - Property	**Property Detail**	This field populates with the property detail. If the category is 'Liquid', populate the field with the 'Company Name'. If the category is 'Motor Vehicle', populate the field with the vehicle type, make, model and year. If the category is 'Transferred Property/Income', populate the field with program and type.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		If the category is 'Unallowable Withdrawal', populate the field with the description. If the category is 'Personal' or 'Real', this field is blank.			
Page 10 - Property	Amount	This field populates with the property value. If the status of the property is 'Exempt', populate the field with 'Not counted'. Format: $XX.XX	Y	Y	Y
Page 12 – Medicare Coverage	Name	This field populates with the name on the Medicare record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 12 – Medicare Coverage	Part A Premium	This field populates with the Part A amount from the Medicare record. If the payment method is 'State', populate the field with 'Paid by State'. Format: $XX.XX	Y	Y	Y
Page 12 – Medicare Coverage	Part B Premium	This field populates with the Part B amount from the Medicare record. If the payment method is 'State', populate the field with 'Paid by State'. Format: $XX.XX	Y	Y	Y
Page 12 – Medicare Coverage	Part C Premium	This field is blank.	N	N	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 12 – Medicare Coverage	Part D Premium	This field populates with the Part D amount from the Medicare record. Format: $XX.XX	Y	Y	Y
Page 13 – Long Term Care	Name	The field populates with the name of the person in the LTC facility. This information is retrieved from the Living Arrangement record with the type of 'Nursing Home/Long Term Care'. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 13 – Long Term Care	Facility Name	This field populates with the name of the LTC facility.	Y	Y	Y
Page 13 – Long Term Care	Facility Address	This field populates with the person's physical address.	Y	Y	Y
Page 14 – Other Health Insurance	Name	This field populates with the name of the beneficiary or beneficiaries on the Other Health Care record. Format: First, Middle, Last, and Suffix	Y	Y	Y
Page 14 – Other Health Insurance	Insurance Name	This field populates with the name of the insurance company. This is the health insurance company name when the health coverage type is 'All Other Health Coverage'. For the other types, this field is blank.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
Page 14 – Other Health Insurance	Type of Insurance	This field populates with the health coverage type.	Y	Y	Y
Page 14 – Other Health Insurance	Premium Amount	This field populates with the expense amount. When the health coverage type is 'All Other Health Coverage' and the 'Is this Employer Sponsored Insurance Outside Exchange?' question is answered 'Yes', the expense amount displays under the Health Insurance Premium Expense section. Format: $XX.XX	Y	Y	Y
Page 14 – Other Health Insurance	Frequency	This field populates with the frequency. When the health coverage type is 'All Other Health Coverage' and the 'Is this Employer Sponsored Insurance Outside Exchange?' question is answered 'Yes', the frequency displays under the Health Insurance Premium Expense section.	Y	Y	Y
Page 16 – Info Reported	Incarcerated Name	This field populates with the name of the person who is incarcerated. This person is listed as incarcerated on the most recent DER but is not verified.	Y	Y	Y

Section	Field	Population	Populates from Template Repository	Populates with Form Generation	Editable from Template Repository
		Technical Note: This information can be found on the CalHEERS Verification table. Format: First, Middle, Last, and Suffix			
Page 16 – Info Reported	Deceased Name	This field populates with the name of the person who is deceased. This person is listed as deceased on the most recent DER but is not verified. *Technical Note:* This information can be found on the CalHEERS Verification table. Format: First, Middle, Last, and Suffix	Y	Y	Y

b. Make the following sections dynamic:

Section	Dynamic Section	Conditions
Page 1 – Cover Page	List of persons under the 'It's time to renew benefits for:' section.	This section contains a repeating row that repeats for each person active program person. The section will expand to fit the list of persons.
Page 3 – Household Members	List of household members under the 'Review your household member information' section.	This section initially contains three rows. If there are more than four persons, the row will repeat for each additional person.
Page 4 – Tax Info	List of tax filers under the 'Review your tax information' section.	This section initially contains two rows. The first row always displays the primary tax filer. If there are more than one non-primary tax filer, the row will repeat for each tax filer.
Page 6 - Income	List of incomes under the 'Review of income information' section.	This section initially contains three rows. If there are more than three income records, the row will repeat for each additional income record.

Section	Dynamic Section	Conditions
Page 8 - Expenses	List of expenses under the 'Review you expenses and deduction information' section.	This section initially contains two rows. If there are more than two expense records, the row will repeat for each additional expense record.
Page 10 - Property	List of properties under the 'Review your resources and property information' section.	This section initially contains three rows. If there are more than three property records, the row will repeat for each additional expense records.
Page 12 – Medicare Coverage	The Medicare Coverage section.	This section displays on the form only if there is at least one Medicare record. If there are no records, the section is hidden.
Page 12 – Medicare Coverage	List of Medicare information under 'Review your Medicare information' section.	This section initially contains two rows. If there are more than two Medicare records, the row will repeat for each additional Medicare record.
Page 13 – Long Term Care	The Long-Term Care section	This section displays on the form only if there is at least one Living Arrangement record for LTC.
Page 13 – Long Term Care	List of Long-Term Care facilities under the 'Review your long-term care information' section.	This section initially contains two rows. If there are more than two Living Arrangement records for LTC, the row will repeat for each additional record.
Page 14 – Other Health Insurance	List of Other Health Insurance information under the 'Review your health insurance information' section.	This section initially contains two rows. If there are more than two Other Health Care records, the row will repeat for each additional record.
Page 16 – Household Changes	The Medicare section.	This section displays on the form if the Medicare Coverage section is hidden, otherwise, this section is hidden.
Page 16 – Household Changes	The Long-term care section.	This section displays on the form if the Long-Term Care section is hidden, otherwise, this section is hidden.
Page 16 – Info Reported	The Incarcerated Person Section.	This section displays if there is data population, otherwise, this section is hidden.
Page 16 – Info Reported	The Deceased Person Section	This section displays if there is data population, otherwise, this section is hidden.
Page 16 – Info Reported	List of the name of the persons who is incarcerated or deceased.	This section initially contains one row for incarcerated person and one row for the deceased person. If there are additional records, the row will repeat for each additional record.

3. The form has the following print options:

Blank Template	Print Local without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Y	Y	Y	N	Y	N

4. The form has the following mailing options:

Mailing Options	Option for MC 217
Mail-To (Recipient)	N/A – the form cannot be printed centrally.
Mailed From (Return)	N/A – the form cannot be printed centrally.
Mail-back-to Address	N/A – the form cannot be printed centrally.
Outgoing Envelope Type	N/A – the form cannot be printed centrally.
Return Envelope Type	N/A – the form cannot be printed centrally.

5. The form has the following barcodes:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	N	Y

6. The form has the following additional options:

Additional Options	Option for MC 217
Special Paper Stock	N/A
Enclosures	No
CW/CF e-sign	No
Check to Sign	Yes
Post to Self Service Portal	Yes

2.6   Update the MC 003

2.6.1   Overview

The current version of the MC 003 in CalSAWS is the 06/07 version. Update the form to the 11/12 version.

State Form: MC 003

Current Program: Medi-Cal

Current Attached Form(s): N/A

Current Forms Category: Forms

Current Languages: English, Spanish, Armenian, Cambodian, Cantonese (Chinese), Farsi, Korean, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Template Repository Visibility: All Counties

2.6.2 Description of Change

1. Update the MC 003 to the 11/12 version.
   Note: *Apart from Spanish, the version for the threshold languages is 05/13.*

   Form Number: MC 003

   Form Name: Early Periodic Screening, Diagnostic, and Treatment (EPSDT)

   Updated Languages: English, Spanish, Arabic, Armenian, Cambodian, Cantonese (Chinese), Farsi, Hmong, Korean, Lao, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

   Include NA Back 9: N

   Form Mockups/Examples: Please refer to Supporting Documents #4

2.7 Update the PUB 13

2.7.1 Overview

The current version of the PUB 13 in CalSAWS is the 08/16 version. Update the form to the 08/20 version.

State Form: PUB 13

Current Program: Welfare to Work

Current Attached Form(s): N/A

Current Forms Category: Forms

Current Languages: English, Spanish, Arabic, Armenian, Cambodian, Cantonese (Chinese), Farsi, Korean, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Template Repository Visibility: All Counties

2.7.2 Description of Change

1. Update the PUB 13 to the 08/20 version.

   Form Number: PUB 13

   Form Name: Your Rights Under California Welfare Programs

   Updated Languages: English, Spanish

   Include NA Back 9: N

   Form Mockups/Examples: Please refer to Supporting Documents #5

2. Update the CF RE, CW RE, and the CW/CF RE Packets with the updated version of the PUB 13.

2.8 Update the PUB 183/PUB 184

2.8.1 Overview

The current version of the PUB 183/PUB 184 in CalSAWS is the 01/04 version. Update the PUB 183 to the 09/15 version and the PUB 184 to the 01/17 version.

State Form: PUB 183/PUB 184

Current Program: CalWORKs, CalFresh, Medi-Cal

Current Attached Form(s): N/A

Current Forms Category: Brochure/Flyer

Current Languages: English, Spanish, Armenian, Cambodian, Cantonese (Chinese), Farsi, Korean, Lao, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Template Repository Visibility: All Counties

2.8.2 Description of Change

1. Update the PUB 183 to the 09/15 version and update the PUB 184 to the 01/17 version.

   Form Number: PUB 183

   Form Name: CHDP Information

Updated Languages: English, Spanish

Include NA Back 9: N

Form Mockups/Examples: Please refer to Supporting Documents #6

2. Update the CF RE, CW RE, and the CW/CF RE Packets with the updated version of the PUB 183/PUB 184.

2.9   Update the MAGI Redetermination Packet for Los Angeles County

2.9.1   Overview

This section describes the update to the existing MAGI MC packet for Los Angeles County.

Current Program: Medi-Cal

Current Forms Category: Application

Current Languages: English, Spanish, Armenian, Cambodian, Cantonese (Chinese), Korean, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Current Imaging Category: Customer Reporting

Current Imaging Form Name: MAGI MC Packet

Template Repository Visibility: Los Angeles County

2.9.2   Description of Change

1. Update the form name and form number of the packet. Turn off the threshold languages. The updated form title and number and languages is not visible **until the CalSAWS Go-Live date of the C-IV counties**.
   a. **Form Title:** MAGI RE Packet
   b. **Form Number:** MAGI RE Packet
   c. **Updated Languages:** English, Spanish
   d. **Updated Imaging Form Name:** MAGI RE Packet

2. Update the Document Parameters to have the following fields:
   Technical Note: *The name of the document parameter is REPacket.jsp.*
   a. Case Number
   b. Customer Name

c. Program
d. RE Month
e. Language

Figure 2.9.1 – Document Parameters Page

f. The following validation message will display on the Document Parameters page to prevent the generation of the packet from Template Repository when there is a Customer Reporting record for the packet in any status except 'Not Applicable' for the same Submit Month already exists: 'RE Month - RE packet has been sent for this RE Due Month. Reprint if another one is needed.'

3. Update the packet to use the updated version of the MC 216. The updated packet is not available until the CalSAWS Go-Live date of the C-IV counties.

Form
Coversheet
MC 216

2.10 Add the MAGI Redetermination Packet for the Migration Counties

2.10.1 Overview

This section describes the creation of the MAGI MC Packet for the Migration Counties.

Program: Medi-Cal

Forms Category: Application

Template Repository Visibility: Migration Counties

Languages: English, Spanish

2.10.2 Description of Change

1. Create the MAGI RE packet for the Migration Counties with the forms in the following order:

Form
Coversheet
MC 216
MC 019
MC 219
MC 372
PUB 13
PUB 183/PUB 184
MC 003
<mark>NVRA VPF</mark>

2. Add the MAGI RE Packet to Template Repository for the Migration Counties. The new packet is not available in Template Repository **until the CalSAWS Go-Live date of the C-IV counties.**

Form Header: N/A

Form Footer: CalSAWS Standard Footer (Footer 1)

Form Title: MAGI RE Packet

Form Number: MAGI RE Packet

Imaging Form Name: MAGI RE Packet

Imaging Document Type: Customer Reporting

Include NA Back 9: No

   a. Include the following parameters for the packet on the Document Parameters page:
   Technical Note: *The name of the document parameter is REPacket.jsp.*
      i. Case Number
      ii. Customer Name
      iii. Program
      iv. RE Month

v. Language

Figure 2.10.1 – Document Parameters Page

    b. The following validation message will display on the Document Parameters page to prevent the generation of the packet from Template Repository when there is a Customer Reporting record for the packet in any status except 'Not Applicable' for the same Submit Month already exists: 'RE Month - RE packet has been sent for this RE Due Month. Reprint if another one is needed.'

3. Add population logic for the packet. The population logic for the MC 216 will be used to populate the form within the packet.

4. Add the Business Reply Mail (BRM) header on the second page of the Coversheet. The existing population logic will be used to populate the case information and address on the BRM header.

5. The packet has the following print options:

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

    a. The 'Print Local without Save' option is only available when a blank template is generated.
    b. The 'Print and Save' options are only available when generating the packet in the context of the case.

6. The packet has the following mailing options:

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Mailing Options	Option for RE Packet
Mail-To (Recipient)	When generated through the batch process, the Medi-Cal Primary Applicant. When generated through Template Repository, the individual selected on the 'Customer Name' dropdown on the Document Parameters page.
Mailed From (Return)	Medi-Cal Worker's Office/District Office Address
Mail-back-to Address	BRM Address
Outgoing Envelope Type	6"x10" Flat Mail Envelope
Return Envelope Type	BRM

7. The packet has the following barcodes:

Tracking Barcode	BRM Barcode	Imaging Barcode
Y	Y	Y

8. The packet has the following additional options:

Additional Options	Option for RE Packet
Special Paper Stock	N/A
Enclosures	No
CW/CF e-sign	No
Check to Sign	No
Post to Self Service Portal	Yes

9. Create a Customer Reporting entry when the packet is generated and saved with the following information:

Field to Populate	Population for RE Packet
Type	MAGI RE Packet **Technical Note:** *The existing type code is MG. Update the short decode name to match the packet name.*
Submit Month - when generated from Template Repository	Submit Month from Document Parameters page
Submit Month - when generated through Batch	Current Medi-Cal Program RE Due Date
Program	MC
Status	Customer Reporting Tracking Status Customer Reporting Statuses: • Generated

Field to Populate	Population for RE Packet
	- Sent - Received - Incomplete - Not Applicable - Reviewed – Ready to Run EDBC - Compete – EDBC Accepted For example: The status will be set to "Sent" if the Packet is generated and sent to the recipient through Batch.
Status Date	Date of the latest Status Date

10. Create a Journal entry when the packet is generated and saved with the following information:

Field to Populate	Population for RE Packet
Case Id	The case associated to the packet.
Type	Document
Short Description	MAGI RE Packet
Long Description	The following forms were included for the {redeterDate} RE: Coversheet, MC 216, MC 019, MC 219, MC 372, PUB 183/PUB 184, MC 003 and <mark>NVRA VPF</mark>. These items are due in 60 days.
Created by	Batch or User
Updated by	Batch or User

2.11 Update the Non-MAGI Redetermination Packet for Los Angeles County

2.11.1 Overview

This section describes the update to the existing MC packet for Los Angeles County.

Current Program: Medi-Cal

Current Forms Category: Application

Current Languages: English, Spanish, Armenian, Cambodian, Cantonese (Chinese), Korean, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Current Imaging Category: Customer Reporting

Current Imaging Form Name: MC Packet

Template Repository Visibility: Los Angeles County

2.11.2 Description of Change

1. Update the form name and form number of the packet. Turn off the threshold languages. The updated form title and number and languages is not visible **until the CalSAWS Go-Live date of the C-IV counties**.
   a. **Form Title:** Non-MAGI RE Packet
   b. **Form Number:** Non-MAGI RE Packet
   c. **Updated Languages:** English, Spanish
   d. **Updated Imaging Form Name:** Non-MAGI RE Packet

2. Update the Document Parameters to have the following fields:
   Technical Note: *The name of the document parameter is REPacket.jsp.*
   a. Case Number
   b. Customer Name
   c. Program
   d. RE Month
   e. Language

Figure 2.11.1 – Document Parameters Page

   f. The following validation message will display on the Document Parameters page to prevent the generation of the packet from Template Repository when there is a Customer Reporting record for the packet in any status except 'Not Applicable' for the same Submit Month already exists: 'RE Month - RE packet has

been sent for this RE Due Month. Reprint if another one is needed.'

3. Update the packet to use the updated version of the MC 210 RV. The updated packet is not available until the CalSAWS Go-Live date of the C-IV counties.

Form
Coversheet
MC 210 RV

2.12 Add the Non-MAGI Redetermination Packet for the Migration Counties

2.12.1 Overview

This section describes the creation of the Non-MAGI RE Packet for the Migration Counties.

Program: Medi-Cal

Forms Category: Application

Template Repository Visibility: Migration Counties

Languages: English, Spanish

2.12.2 Description of Change

1. Create the Non-MAGI RE Packet for the Migration Counties with the forms in the following order:

Form
Coversheet
MC 210 RV
MC 019
MC 219
MC 372
MC 007
DHCS 7077
DHCS 7077 A
PUB 13
PUB 183/PUB 184
MC 003
NVRA VPF

2. Add the Non-MAGI RE Packet to Template Repository. The new packet is not available in Template Repository **until the CalSAWS Go-Live date of the C-IV counties**.

   Form Header: N/A

   Form Footer: CalSAWS Standard Footer (Footer 1)

   Form Title: Non-MAGI RE Packet

   Form Number: Non-MAGI RE Packet

   Include NA Back 9: No

   Imaging Form Name: Non-MAGI RE Packet

   Imaging Document Type: Customer Reporting

   a. Include the following parameters for the packet on the Document Parameters page:
      Technical Note: *The name of the document parameter is REPacket.jsp.*
      i. Case Number
      ii. Customer Name
      iii. Program
      iv. RE Month
      v. Language

Figure 2.12.1 – Document Parameters Page

   b. The following validation message will display on the Document Parameters page to prevent the generation of the packet from Template Repository when there is a Customer Reporting record for the packet in any status except 'Not Applicable' for the

same Submit Month already exists: 'RE Month - RE packet has been sent for this RE Due Month. Reprint if another one is needed.'

3. Add population logic for the packet. The population logic for the MC 210 RV will be used to populate the form within the packet.

4. Add the Business Reply Mail (BRM) header on the second page of the Coversheet. The existing population logic will be used to populate the case information and address on the BRM header.

5. The packet has the following print options:

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

   a. The 'Print Local without Save' option is only available when a blank template is generated.
   b. The 'Print and Save' options are only available when generating the packet in the context of the case.

6. The packet has the following mailing options:

Mailing Options	Option for RE Packet
Mail-To (Recipient)	When generated through the batch process, the Medi-Cal Primary Applicant. When generated through Template Repository, the individual selected on the 'Customer Name' dropdown on the Document Parameters page.
Mailed From (Return)	Medi-Cal Worker's Office/District Office Address
Mail-back-to Address	BRM Address
Outgoing Envelope Type	6"x10" Flat Mail Envelope
Return Envelope Type	BRM
Special Paper Stock	N/A

7. The packet has the following barcodes:

Tracking Barcode	BRM Barcode	Imaging Barcode
Y	Y	Y

8. The packet has the following additional options:

Additional Options	Option for RE Packet
Special Paper Stock	N/A
Enclosures	No
CW/CF e-sign	No
Check to Sign	No
Post to Self Service Portal	Yes

9. Create a Customer Reporting entry when the packet is generated and saved with the following information:

Field to Populate	Population for RE Packet
Type	Non-MAGI RE Packet **Technical Note:** *The existing type code is MR. Update the short decode name to match the packet name.*
Submit Month - when generated from Template Repository	Submit Month from Document Parameters page
Submit Month - when generated through Batch	Current Medi-Cal Program RE Due Date
Program	MC
Status	Customer Reporting Tracking Status Customer Reporting Statuses: • Generated • Sent • Received • Incomplete • Not Applicable • Reviewed – Ready to Run EDBC • Compete – EDBC Accepted For example: The status will be set to "Sent" if the Packet is generated and sent to the recipient through Batch.
Status Date	Date of the latest Status Date

10. Create a Journal entry when the packet is generated and saved with the following information:

Field to Populate	Population for RE Packet
Case Id	The case associated to the packet.
Type	Document

Short Description	Non-MAGI RE Packet
Long Description	The following forms were included for the {redeterDate} RE: Coversheet, MC 210 RV, PUB 13, MC 372, MC 007, DHCS 7077, DHCS 7077 A, PUB 183/PUB 184, MC 003 and <mark>NVRA VPF</mark>. These items are due in 60 days.
Created by	Batch or User
Updated by	Batch or User

2.13 Update the Mixed Household Redetermination Packet for Los Angeles County

2.13.1 Overview

This section describes the update to the existing Mixed Household RE packet for Los Angeles County.

Current Program: Medi-Cal

Current Forms Category: Application

Current Languages: English, Spanish, Armenian, Cambodian, Cantonese (Chinese), Korean, Mandarin (Chinese), Other Chinese Language, Russian, Tagalog/Filipino, Vietnamese

Current Imaging Category: Customer Reporting

Current Imaging Form Name: Mixed MC RE Packet

Template Repository Visibility: Los Angeles County

2.13.2 Description of Change

1. Update the form name and form number of the packet. Turn off the threshold languages. The updated form title and number and languages is not visible **until the CalSAWS Go-Live date of the C-IV counties**.
   a. **Form Title:** Mixed Household RE Packet
   b. **Form Number:** Mixed Household RE Packet
   c. **Updated Languages:** English, Spanish
   d. **Updated Imaging Form Name:** Mixed Household RE Packet
   Technical Note: This packet currently uses the REPacket.jsp. No update is necessary for the Document Parameter page.

2. Update the packet to use the new MC 217 form. The updated packet is not available **until the CalSAWS Go-Live date of the C-IV counties**.

Form
Coversheet
MC 217

2.14 Add the Mixed Household Redetermination Packet for the Migration Counties

2.14.1 Overview

This section describes the creation of the Mixed Household RE Packet for the Migration Counties.

Program: Medi-Cal

Forms Category: Forms

Template Repository Visibility: Migration Counties

Languages: English, Spanish

2.14.2 Description of Change

1. Create the Mixed Household RE packet for the Migration Counties with the forms in the following order:

Form
Coversheet
MC 217
MC 019
MC 219
MC 372
MC 007
DHCS 7077
DHCS 7077 A
PUB 13
PUB 183/PUB 184
MC 003
NVRA VPF

2. Add the Mixed Household RE Packet to Template Repository for the 57 Migration Counties. The new packet is not available in Template Repository **until the CalSAWS Go-Live date of the C-IV counties**.

> **Form Header:** N/A
>
> **Form Footer:** CalSAWS Standard Footer (Footer 1)
>
> **Form Title:** Mixed Household RE Packet
>
> **Form Number:** Mixed Household RE Packet
>
> **Include NA Back 9:** No
>
> **Imaging Form Name:** Mixed Household RE Packet
>
> **Imaging Document Type:** Customer Reporting

    a. Include the following parameters for the packet on the Document Parameters page:
       Technical Note: *The name of the document parameter is REPacket.jsp.*
        i. Case Number
        ii. Customer Name
        iii. Program
        iv. RE Month
        v. Language

Figure 2.14.1 – Document Parameters Page

    b. The following validation message will display on the Document Parameters page to prevent the generation of the packet from Template Repository when there is a Customer Reporting record for the packet in any status except 'Not Applicable' for the

same Submit Month already exists: 'RE Month - RE packet has been sent for this RE Due Month. Reprint if another one is needed.'

3. Add population logic for the packet. The population logic for the MC 217 will be used to populate the form within the packet.

4. Add the Business Reply Mail (BRM) header on the second page of the Coversheet. The existing population logic will be used to populate the case information and address on the BRM header.

5. The packet has the following print options:

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

  a. The 'Print Local without Save' option is only available when a blank template is generated.
  b. The 'Print and Save' options are only available when generating the packet in the context of the case.

6. The packet has the following mailing options:

Mailing Options	Option for RE Packet
Mail-To (Recipient)	When generated through the batch process, the Medi-Cal Primary Applicant. When generated through Template Repository, the individual selected on the 'Customer Name' dropdown on the Document Parameters page.
Mailed From (Return)	Medi-Cal Worker's Office/District Office Address
Mail-back-to Address	BRM Address
Outgoing Envelope Type	6"x10" Flat Mail Envelope
Return Envelope Type	BRM

7. The packet has the following barcodes:

Tracking Barcode	BRM Barcode	Imaging Barcode
Y	Y	Y

8. The packet has the following additional options:

Additional Options	Option for RE Packet
Special Paper Stock	N/A
Enclosures	No
CW/CF e-sign	No
Check to Sign	No
Post to Self Service Portal	Yes

9. Create a Customer Reporting entry when the packet is generated and saved with the following information:

Field to Populate	Population for RE Packet
Type	Mixed Household RE Packet **Technical Note:** *The existing type code is MI. Update the short decode name to match the packet name.*
Submit Month - when generated from Template Repository	Submit Month from Document Parameters page
Submit Month - when generated through Batch	Current Medi-Cal Program RE Due Date
Program	MC
Status	Customer Reporting Tracking Status Customer Reporting Statuses: • Generated • Sent • Received • Incomplete • Not Applicable • Reviewed – Ready to Run EDBC • Compete – EDBC Accepted For example: The status will be set to "Sent" if the Packet is generated and sent to the recipient through Batch.
Status Date	Date of the latest Status Date

10. Create a Journal entry when the packet is generated and saved with the following information:

Field to Populate	Population for RE Packet
Case Id	The case associated to the packet.
Type	Document
Short Description	Mixed Household RE Packet

Long Description	The following forms were included for the {redeterDate} RE: Coversheet, MC 217, MC 019, MC 219, PUB 13, MC 372, MC 007, DHCS 7077, DHCS 7077 A, PUB 183/PUB 184, MC 003 and <mark>NVRA VPF</mark>. These items are due in 60 days.
Created by	Batch or User
Updated by	Batch or User

2.15 Update to Aid Code Category

2.15.1 Overview

The Packet Type column in the Aid Code category (CT 184) defines which packet is send out for a certain aid code. The column is currently populated with the following values: MR1 (Medi-Cal Redetermination Packet), MR3 (Medi-Cal Redetermination Packet – LTC), MR4 (Medi-Cal Redetermination Packet – MSP0), and MR9 (Medi-Cal Pre ACA Redetermination Packet). Since these packets will be replaced with the Non-MAGI RE packet, update the values in the column with a common value.

2.15.2 Description of Change

1. Update the values in the Packet Type column with 'Non-MAGI Packet'. Please refer to **Section 3.0 Supporting Documents #8** for the list of aid codes.
   Technical Note: *The codes table change request to update the values in the Packet Type column should not **run until the CalSAWS Go-Live date of the C-IV counties**.*

2.16 Update to Existing MC RE Packet Batch Jobs for Los Angeles County

2.16.1 Overview

The existing MC RE Packet batch jobs for Los Angeles find cases that have an RE due in two months and are sent either a MAGI, Non-MAGI or Mixed Household RE packet. The existing MC RE Packet Catch Up batch jobs run the month after the initial packets are sent out to find cases that were not sent an RE packet and sends one out. These jobs have references to the packet that are being removed. Update the driving queries of the existing

MAGI, Non-MAGI, and Mixed Household RE packet batch jobs to remove the references of the packets mentioned in Section 2.1 and to use the new values defined in Section 2.15.

2.16.2 Description of Change

1. Update the driving query for the following batch jobs to remove references to the packets that are being removed. Updates to the driving query is not effective **until the CalSAWS Go-Live date of the C-IV counties**.
   a. PB00525 (MAGI RE Packet)
   b. PB19523 (MAGI RE Packet – Catch up)
   c. PB00R526 (Mixed Household RE Packet)
   d. PB19R521 (Mixed Household RE Packet – Catch up)
   e. PB19R530 (Non-MAGI RE Packet)
   f. PB19R526 (Non-MAGI RE Packet – Catch up)

2. Update the driving query for the following batch jobs to use the new value in the Aid Code category (CT 184). Updates to the driving query is not effective **until the CalSAWS Go-Live date of the C-IV counties**.
   a. PB00R526 (Mixed Household RE Packet)
   b. PB19R521 (Mixed Household RE Packet – Catch up)
   c. PB19R530 (Non-MAGI RE Packet)
   d. PB19R526 (Non-MAGI RE Packet – Catch up)

3. Update the driving query for the following batch jobs to remove the condition for a 'Delinquent Medical RE' case flag. This case flag is no longer available and cannot be added to a case, therefore the condition in the query is being removed. Update driving query to add a condition for an 'SSI Only' OPA record. Updates to the driving query is not effective **until the CalSAWS Go-Live date of the C-IV counties**.
   a. PB19R530 (Non-MAGI RE Packet)
   b. PB19R526 (Non-MAGI RE Packet – Catch up)

4. Remove the PB00R530 (MC Redeter Forms Filter batch job) as a successor for the PB19R530 batch job.

2.17 Create the MAGI RE Packet Batch Job for the Migration Counties

2.17.1 Overview

Create a new batch job to send out the MAGI RE Packet for the Migration Counties.

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2.17.2 Description of Change

1. Create a new batch job that will find cases that meet all the following conditions. The effective month referenced below is two months following the batch date.

   a. The current program is Medi-Cal.
   b. The current program is Active.
   c. The current program's RE due month is the same month as the effective month and the completion date is not set.
   d. The most current accepted and saved regular EDBC for the current MC program has a passing MAGI budget where there is at least one person receiving a MAGI aid code.
   e. There does not exist a record in the system transaction table for the case with a type code of 'FR', a sub type code for the MAGI RE Packet or Mixed Household RE packet and is for the same effective month for the current program.
   f. There does not exist a MAGI RE or Mixed Household RE packet generated for the same effective month and the Customer Reporting record is not in status of 'Not Applicable' for the current program.

   Technical Note: *The driving query for this batch job is the same as the driving query in the existing MAGI RE Packet batch job in CalSAWS.*

   The C-IV driving query will check to see if there is a successful EDR/DER that was sent or received to determine if a packet will be sent. The CalSAWS driving query will send a packet regardless of the EDR/DER.

2. For each record returned from the driving query, insert a record into the system transaction table with the following transactional values:

Field to Populate	Population for RE Packet
Case Id	The case Id associated to the current MC program.
Program Id	The program Id of the current MC program.
Person Id	The primary applicant of the current MC program.
Type Code	FR
Sub Type Code	TDB
Effective Date	The begin date of the current RE Due Month of the MC program.

2.17.3 Execution Frequency

This batch job runs monthly.

2.17.4 Key Scheduling Dependencies

The PB00CH103 batch job and Mixed Household RE packet batch job for the Migration Counties runs before this job.

The PB00R200 form balancer job will run after this batch job and distribute the system transaction records among the form generation thread jobs. The PB00R2XX form generation thread jobs will run after the balancer and is responsible for generating the packets.

This batch job is not scheduled to run **until the CalSAWS Go-Live date of the C-IV counties**.

2.17.5 Counties Impacted

Migration Counties

2.17.6 Data Volume/Performance

The estimated number of record this batch processes is 50,000 per month.

2.17.7 Failure Procedure/Operational Instructions

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

2.18 Create the Non-MAGI RE Packet Batch Job for the Migration Counties

2.18.1 Overview

Create a new batch job to send out the Non-MAGI RE Packet for the Migration Counties.

2.18.2 Description of Change

1. Create a new batch job that will find cases that meet all the following conditions. The effective month referenced below is two months following the batch date.
    a. The program is Medi-Cal.
    b. The program is Active.
    c. The program RE due month is the same month as the effective month and the completion date is not set.
    d. There currently does not exist an 'Other Program Assistance' (OPA) record for 'SSI/SSP', 'SSI Only', 'Adoption Assistance Program', or 'Foster Care'.

e. There does not exist a person with Requested Medi-Cal Type of 'Minor Consent (12-21) FP/STD/D&A', 'Minor Consent (<21) Pregnancy', 'Minor Consent (12-21) FP/MntlHlth', or 'Minor Consent (<12) FP/STD'.

f. The most current accepted and saved regular EDBC for the current MC program has a passing MC budget where there is at least one person receiving a primary MC aid code and the packet type for the aid code is 'Non-MAGI'.

g. The most current accepted and saved regular EDBC for the current MC program does not have a passing MAGI budget.

h. There does not exist a record in the system transaction table for the case with a type code of 'FR', a sub type code for the Non-MAGI RE packet for the same effective month for the current program.

i. There does not exist a Non-MAGI RE packet generated for the same effective month and the Customer Reporting record is not in status of 'Not Applicable' for the current program.
Technical Note: The driving query for this batch job is the same as the driving query in the existing Non-MAGI RE Packet batch job in CalSAWS.

2. For each record returned from the driving query, insert a record into the system transaction table with the following transactional values:

Field to Populate	Population for RE Packet
Case Id	The case Id associated to the current MC program.
Program Id	The program Id of the current MC program.
Person Id	The primary applicant of the current MC program.
Type Code	FR
Sub Type Code	TDB
Effective Date	The begin date of the current RE Due Month of the MC program.

2.18.3 Execution Frequency

This batch job runs monthly.

2.18.4 Key Scheduling Dependencies

The PB00R200 form balancer job will run after this batch job and distribute the system transaction records among the form generation thread jobs. The PB00R2XX form generation thread jobs will run after the balancer and is responsible for generating the packets.

This batch job is not scheduled to run **until the CalSAWS Go-Live date of the C-IV counties**.

2.18.5 Counties Impacted

Migration Counties

2.18.6 Data Volume/Performance

The estimated number of record this batch processes is 18,000 per month.

2.18.7 Failure Procedure/Operational Instructions

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

2.19 Create the Mixed Household RE Packet Batch Job for the Migration Counties

2.19.1 Overview

Create a new batch job to send out the Mixed Household RE Packet for the Migration Counties.

2.19.2 Description of Change

1. Create a new batch job that will find cases that meet all the following conditions. The effective month referenced below is two months following the batch date.
   a. The program is Medi-Cal.
   b. The program is Active.
   c. The program RE due month is the same month as the effective month and the completion date is not set.
   d. The most current accepted and saved regular EDBC for the current MC program has a passing MC budget where there is at least one person receiving a primary MC aid code and the packet type for the aid code is 'Non-MAGI' and there is a passing MAGI budget.
   e. There does not exist a record in the system transaction table for the case with a type code of 'FR', a sub type code for the Mixed Household RE packet for the same effective month for the current program.
   f. There does not exist a Mixed Household RE packet generated for the same effective month and the Customer Reporting

record is not in status of 'Not Applicable' or for the current program.

Technical Note: *The driving query for this batch job is the same as the driving query in the existing Mixed Household RE Packet batch job in CalSAWS.*

2. For each record returned from the driving query, insert a record into the system transaction table with the following transactional values:

Field to Populate	Population for RE Packet
Case Id	The case Id associated to the current MC program.
Program Id	The program Id of the current MC program.
Person Id	The primary applicant of the current MC program.
Type Code	FR
Sub Type Code	TDB
Effective Date	The begin date of the current RE Due Month of the MC program.

2.19.3 Execution Frequency

This batch job runs monthly.

2.19.4 Key Scheduling Dependencies

The PB00R200 form balancer job will run after this batch job and distribute the system transaction records among the form generation thread jobs. The PB00R2XX form generation thread jobs will run after the balancer and is responsible for generating the packets.

This batch job is not scheduled to run **until the CalSAWS Go-Live date of the C-IV counties**.

2.19.5 Counties Impacted

Migration Counties.

2.19.6 Data Volume/Performance

The estimated number of record this batch processes is 2,200 per month.

2.19.7 Failure Procedure/Operational Instructions

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

2.20 Update the MAGI Discontinuance for EDR Batch Job

2.20.1 Overview

The MAGI Discontinuance for EDR (PB00CH204) batch job finds cases where there is a Medi-Cal program that have not returned a MAGI RE packet or Mixed Household RE packet and sends a Negative Action Eligibility Determination Request (EDR) for 'Failed to Complete Redetermination.' The current logic only looks for the MAGI RE packet and Mixed Household RE packet for Los Angeles County. Update the batch job to include the MAGI RE packet and Mixed Household RE for the Migration Counties.

2.20.2 Description of Change

1. Update the batch logic to look for the MAGI RE packet and Mixed Household RE packet for both Los Angeles County and Migration Counties.

2.21 Update Reprint Functionality for Packets

2.21.1 Overview

Currently, previously generated MC RE packets can be reprinted centrally or locally. The MC RE packets that will turned off should not be allowed to be reprinted. Update the reprint functionality to prevent the MC RE packets that were turned off to be reprinted.

2.21.2 Description of Change

1. Update the reprint functionality to not allow the following packets to be reprinted locally or centrally if the current system date is after the CalSAWS Go-Live date of the C-IV counties **and** it is one of the following packets:
    a. MC LTC Packet
    b. MSP Packet
    c. MC 604 IPS Packet
    d. MC Redetermination Packet
    e. Pre-ACA MC RE Packet

Technical Note: *The reprint buttons on the Document Detail page is controlled by the print button visibility indicator for a form. Update the logic in the Generated Document Controller to set the print button visibility indicator of the packet to 'AN' (None) if the current system date is after the CalSAWS Go-Live date of the C-IV counties and the packet is turned off. This will hide the reprint buttons on the page.*

3   SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Client Correspondence	MC 216 Mockup	MC216_EN.pdf MC216_SP.pdf
2	Client Correspondence	MC 210 RV Mockup	MC210RV_EN.pdf MC210RV_SP.pdf
3	Client Correspondence	MC 217 Mockup	MC217_EN.pdf MC217_SP.pdf
4	Client Correspondence	MC 003 Mockup	MC003_EN.pdf MC003_SP.pdf
5	Client Correspondence	PUB 13 Mockup	PUB13_EN.pdf PUB13_SP.pdf
6	Client Correspondence	PUB 183/PUB 184 Mockup	PUB183.pdf PUB184.pdf
7	Client Correspondence	Migration Counties RE Packet Coversheet Mockup	COVERSHEET_EN.pdf COVERSHEET_SP.pdf
8	Client Correspondence	Aid Code Packet Types Update	CA-216432 Aid Code Packet Type.xlsx
9	Client Correspondence	Type Code Translation	CA-216432 Translations.xlsx

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.3	The LRS shall produce various notices, NOAs, forms, letters, stuffers, and flyers, including: a. Appointment notices; b. Redetermination, Recertification, and/or Annual Agreement notices and forms; c. Other scheduling notices (e.g., quality control, GR hearings, and appeals); d. Periodic reporting notices; e. Contact letters; f. Notices informing the applicant, participant, caregiver, sponsor or authorized representative of a change in worker, telephone hours or Local Office Site; g. Information notices and stuffers; h. Case-specific verification/referral forms; i. GR Vendor notices; k. Court-mandated notices, including Balderas notices; l. SSIAP appointment notices; m. Withdrawal forms; n. COLA notices; o. Time limit notices; p. Transitioning of aid notices; q. Interface triggered forms and notices (e.g., IFDS, IEVS); r. Non-compliance and sanction notices; s. Benefit issuance and benefit recovery forms and notices, including reminder notices; t. Corrective NOAs on State Fair Hearing decisions; u. CSC paper ID cards with LRS-generated access information; and v. CSC PIN notices.	The updated and new MC renewal forms are implemented in CalSAWS. The MAGI, Non-MAGI, and Mixed Household RE packets are created for the migration counties and the existing packet for Los Angeles County were updated with the new forms. New batch process were also implemented to send out the packets for the migration counties.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-227118 | CIV-108857

SB 80 - Changes to Resource Asset Limits

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Tom Lazio
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
05/03/2021	1.0	Initial Draft	T. Lazio
06/02/2021	1.1	Content Revision: Updated Recommendation 2.3 to update variable population for Vehicle Limit	T. Huckaby

Table of Contents

1   OVERVIEW

This document identifies required changes to CalSAWS and C-IV related to the asset limits for the CalWORKs (CW) and Refugee Cash Assistance (RCA) programs for Federal Fiscal Year (FFY) 2021 effective July 1, 2021 as informed by the All County Letter (ACL) 21-XX.

1.1   Current Design

The vehicle and asset limits for CW/RCA were last updated for FFY 2020 in SCR CA-209360_CIV-104559 with the following values:

- For CW/RCA Assistance Units (AUs) that do not contain a member who is 60 years of age or older or disabled, the property limit increased to $10,000 (CT 335-84 CalWORKs Property Limit).

- For CW/RCA AUs that do contain a member who is age 60 years of age or older or disabled, the property limit increased to $15,000 (CT 335-03 CW Elderly and Disabled Property Limit).

1.2   Requests

Per ACL 21-XX effective July 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 (2021) to the following values:

    a. When a CW/RCA AU does not include a member who is 60 years of age or older or disabled, the maximum asset limit will be increased from $10,000 to $10,211.

    b. When a CW/RCA AU includes a member, who is 60 years of age or older or disabled, the maximum asset limit will be increased from $15,000 to $15,317.

1.3   Overview of Recommendations

1. Update CW/RCA EDBC rules that apply the resource test for CW Property Limit and Elderly and Disabled Property Limit to perform the calculations based on the new limits.

2. Regression test impacted NOAs and Forms that populate the CalWORKs Property Limits Disregard. Update the SAWS 2A SAR to auto-populate the CalWORKs Property Limits Disregard when generated in a RE packet.

3. Create C-IV and CalSAWS lists for CW/RCA Cases Denied/Discontinued due to 'Over Resources' for June and July 2021.

1.4 Assumptions

1. The Federal AFDC eligibility determination for Foster Care (FC) is made based on current property CW property limit. SCR CA-213138_CIV-106687 has been drafted to update the EDBC logic to determine federal AFCD determination based on Foster Care property limit.

2 RECOMMENDATIONS

2.1 CW/RCA EDBC: Property Limit and Elderly and Disabled Property Limit

2.1.1 Overview

Update CW/RCA EDBC rules that apply the resource test for CW Property Limit and Elderly and Disabled Property Limit to perform the calculations based on the new limits effective July 1, 2021.

2.1.2 Description of Changes

1. Effective July 1, 2021 the property limit will increase from $10,000 to $10,211 for CW/RCA AUs that do not contain a member who is 60 years of age or older or disabled (CT 335-84 CalWORKs Property Limit) and from $15,000 to $15,317 for CW/RCA AUs that do contain a member who is age 60 years of age or older or disabled (CT 335-03 CW Elderly and Disabled Property Limit).

2.1.3 Programs Impacted

CW

RCA

2.2 Regression Test Impacted CalWORKs NOA Variable Population

2.2.1 Overview

CW NOAs populate with the property limits for the program in both CalSAWS and C-IV.

2.2.2 Description of Changes

The following NOA Fragments in CalSAWS and C-IV populate the property limits for CalWORKs. These Fragments need to be regression tested to confirm that they populate with the newest values.

CalSAWS NOA Fragments:

ID	Fragment Name	Fragment Text	Languages
6132	CW_DN_PROP_CNT_EXCD_A104	You can not get cash aid if your total countable property is more than <PROP_LIMIT>. If the County figured your car or other vehicle was worth more than you think it's worth, you can give the County proof that it is worth less. Ask the County how. If you can prove it is worth less you may get cash aid.	EN, SP
6200	CW_TN_RES_AMT_LMT_A104	You can not get cash aid if your total countable property is more than <PROP_LIMIT>. If the County figured your car or other vehicle was worth more than you think it's worth, you can give the County proof that it is worth less. Ask the County how. If you can prove it is worth less you may get cash aid.	EN, SP
7333	CW_CH_ARCO_MID_PERIOD_PROPERTY_CHANGE_A996	You recently told the County about a change in property. Normally, the amount of property you reported would make you ineligible for cash aid. The rules say that the County only looks at your property once a year. This means that we will not change your cash aid at this time. Your next report is at your annual redetermination. All information must be reported and verified on your redetermination form. The property limit is <LIMIT> or <LIMIT2> if some on the grant is 60 or disabled. To stay eligible for cash aid, you must sell the property for a fair price, and then spend the money to below the property limit or put	EN, SP

| | | it into a restricted bank account. You cannot give it away or get a price lower than what is fair. | |
| | | A restricted bank account protects savings for education, housing, or to start a business. You must call your worker and get the CalWORKs paperwork filled out and approved and then open a special (separate) bank account for these savings. | |

C-IV NOA Fragments:

Note: Fragment IDs 168 and 239 also are used for RCA.

ID	Fragment Name	Fragment Text	Languages
168	MSG_PROP_OTHER _THAN_HOME_MOR E_THAN_PROP_LIMIT	You own property that is worth more than the <LIMIT> limit. You have property that is available to you and the value of this property counts against you. We must count the value of all the property you own other than your home.	EN, AE, AR, CA, CH, FA, HM, KO, LA, RU, SP, TG, VI
239	RSN_EXCEEDED_PR OPERTY_LIMIT	Your property is more than the <LIMIT> allowable limit. Here is how we figured your countable property: Property: Countable Value: <PROP> <VALUE> Total Value <TOTAL>	EN, AE, AR, CA, CH, FA, HM, KO, LA, RU, SP, TG, VI
432	RSN_NO_CHANGE_ PROPERTY	You recently told the County about a change in property. Normally, the amount of property you reported would make you ineligible for <PGM>. The rules say that the County only looks at your property <DURATION>. This means that we will not change your <PGM> at this time. The property limit is <LIMIT>, or <LIMIT_2> if someone on the grant is over 60 or disabled. To stay eligible for <PGM>, you must sell the property for a fair price, and then spend the money to below the property limit, or put	EN, AE, AR, CA, CH, FA, HM, KO, LA, RU, SP, TG, VI

| | | it into a restricted bank account. You cannot give it away or get a price lower than what is fair.

A restricted bank account protects savings for education, housing, or to start a business. You must call your worker and get the CalWORKs paperwork filled out and approved and then open a special (separate) bank account for these savings. | |

2.3 Add and Regression Test CalWORKs Form Variable Population

2.3.1 Overview

CalSAWS and C-IV Forms were updated to auto-populate the property limits for CalWORKs per SCR CA-209033/CIV-104383 in release 20.03. These Forms will be tested to ensure that they are populating the new values ongoing.

Currently the SAWS 2A SAR does not auto-populate when generated as part of the CW RE and CW/CF RE packets. This effort will add auto-population to the Form when generated for a RE packet for both CalSAWS and C-IV.

Impacted Forms:
- CW 2218
- SAWS 2A SAR
- CW 86 – LA (CalSAWS only)
- M44-316C SAR (C-IV only)

2.3.2 Description of Change

1. **Regression Test Form Variable Population**

   Regression test the following Forms to verify that the correct property limit is populating for CalWORKs.

Form	Variable	Languages
CW 2218	Located on Page 5 (C-IV) and Page 6 (CalSAWS):	CalSAWS:

	"There is a $<LIMIT> limit on the value of the property (e.g. bank accounts, stocks, etc.) that the child can own and be eligible to receive CalWORKs benefits. That limit increases to $<LIMIT2> if the child has a disability. A child under age 18 can own a vehicle (for example a car, truck, van, motorcycle, etc.) to drive to work, school, job training or to look for work. This also applies during temporary periods of unemployment for the child who customarily drives to and from work. Any motor vehicle with an equity value of $<LIMIT_VD> or less will not count against the $<LIMIT>. For each motor vehicle with an equity value of more than $<LIMIT_VD>, the value that exceeds $<LIMIT_VD> counts against the child's property. If it was given to the child as a gift, a donation, or a family member transferred it to the child, we also do not count it. You will be asked to give the county proof from the Department of Motor Vehicles that it was a gift, donation or transfer from a family member."	AE, CA, CH, EN, KO, RU, SP, VI C-IV: EN, SP
SAWS 2A SAR	Located on Page 9: "There is a $<LIMIT> limit on the value of the property (e.g. bank accounts, stocks, etc.) that your family can own and be eligible to receive CalWORKs benefits. If someone in your family is at least 60 years of age or disabled the limit is $<LIMIT2>. Your residence and furniture are not part of the limit. You can own a vehicle (for example a car, truck, van, motorcycle, etc.) as long as what it's worth minus what you owe is less than $<LIMIT_VD>. If it was given to you as a gift, a donation, or a family member transferred it to you, we do not count it. You will be asked to give the County proof from the Department of Motor Vehicles that it was a gift, donation or transfer from a family member. The vehicle will not count if used by your family for certain special reasons. Ask your worker what those reasons are. Your worker can explain to you how to figure the value of any vehicle."	AE, AR, CA, CH, EN, FA, HM, KO, LA, RU, SP, TG, VI

| CW 86 – LA (CalSAWS only) | Located on Page 3:

"Money in your restricted account(s) DO NOT count against the property limit you can have and <u>keep getting</u> cash aid. (The property limit is $<LIMIT> or $<LIMIT2> if there is at least one person in the household who is age 60 or older.) But money in a restricted account DOES count against your property limit if you are <u>applying</u> for cash aid. So if your cash aid stops and you reapply for cash aid, your total countable personal property including any money in your restricted account(s), cannot be more than the property limit."

Located on Page 5.

"I have read the coversheet. I understand the rules and my responsibilities for starting and keeping a restricted account; the rules for a period of ineligibility; and the need to have resources close to my $<LIMIT> property limit ($<LIMIT2> if there is at least one household member who is age 60 or older) for emergencies or other expenses before I start a restricted account. I understand and agree that: "

"If my cash aid stops for any reason, and if I reapply for cash aid, my total countable personal property, including any money in the restricted account(s), cannot be more than the $<LIMIT> property limit (or $<LIMIT2> if there is at least one household member who is age 60 or older)." | AE, CA, CH, EN, KO, RU, SP, TG, VI |
| M44-316C SAR (C-IV only) | Located on Page 1:

"The property limit is <LIMIT>, or <LIMIT2> if someone on the grant is over 60 or disabled." | EN, SP |

2. Add Variable Population for CW RE and CW/CF RE packets

Update the Form Variable Population logic for the SAWS 2A SAR to populate with the CT 335-84 CalWORKs Property Limit and CT 335-03 CW Elderly and Disabled Property Limit when generated as part of the CW RE and CW/CF RE packets in both CalSAWS and C-IV. Update the Form Variable Population logic for the SAWS 2A SAR to populate CT335-AN CW Motor Vehicle Disregard for C-IV and CT335-AO CW Motor Vehicle Disregard for CalSAWS when generated as part of the CW RE and CW/CF RE packets.

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).	The maximum property limit for CalWORKs AUs will be increased to $10,211 and $15,317 for Assistant Units (AU) that include at least one member who is aged 60 or older or disabled.

4   OUTREACH

4.1   Lists

List Name: CW/RCA Cases Denied/Discontinued due to 'Over Resources' for June and July 2021
List Criteria:
- CW/RCA case has an effective property record for the program person effective for June or July 2021 benefit month.
- An EDBC has already been processed for the CW/RCA case for June or July 2021 benefit months.
- CW/RCA program has been denied/discontinued for June or July 2021 due to 'Over Resources' status reason.
- One of the following:
  a. For CW/RCA AUs that do contain a member who is age 60 years of age or older or disabled, check to see if resource total is equal to or below $15,317.
  b. For CW/RCA Assistance Units (AUs) that do not contain a member who is 60 years of age or older or disabled, check to see if resource total is equal to or below $10,211.

Standard Columns:
- Case Name

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

Additional Column(s): EDBC Benefit Month, Program Status
Frequency: One-time
The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2021>CA-227118
C-IV	CalSAWS Web Portal>System Changes>SCR and SIR Lists>2021>CIV-108857