CalSAWS

California Statewide Automated Welfare System

Design Document

CA-218730 | CIV-107791

One-time Data Change to Reset MC RE Due Date due to Public Health Emergency

	DOCUMENT APPROVAL HISTORY	
CalSAWS	Prepared By	Renee Gustafson
	Reviewed By	Derek Goering, Geetha Ramalingam, Dylan Patel, William Baretsky

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
03/16/2021	.1	Initial Draft	Renee Gustafson
03/19/2021	.2	Reviewed with MC Analysts and removed check that packet submit month = RE Due month	Renee Gustafson
03/26/2021	.3	Corrected packet status from 'Complete' to 'Complete- EDBC Accepted'. Updated packet names from Doc Templ name to CT_329 name for consistency. Changed the begin benefit month for RE/RM DERs from March 2020 to Feb 2020 bc the automated batch starts with RE DERs the month prior to RE Due Date.	Renee Gustafson
03/30/2021	.4	Removed Ineligible status from query criteria to look for 'Open' programs. Updated criteria for Packets to target programs from Rec 1 and 2. Removed ABD MC RE Packet from CalSAWS list.	Renee Gustafson
04/07/2021	.5	Excluded CMSP programs from updates. Added journal text as provided by DHCS	Renee Gustafson
04/08/2021	.6	Added Template Repository Form Name to packet list. Incorporated Consortium feedback	Renee Gustafson
04/09/2021	.7	Expanded population to include Jan and Feb 2020 overdue REs per DHCS clarification. This will include Suppressing Dec 2019 RE/RM DERs bc the automated batch starts with RE DERs the month prior to RE Due Date.	Renee Gustafson

Table of Contents

1   OVERVIEW

Due to the Public Health Emergency (PHE), Medi-Cal Redetermination (RE) processing was suspended effective March 16, 2020 and continues. This one-time data change will complete and reset the overdue Medi-Cal REs impacted by the PHE to allow Medi-Cal programs to process through the next automated RE batch process.

1.1   Current Design

Medi-Cal RE Due Dates may be automatically advanced by the system or manually advanced by the worker when the RE process is complete. Monthly automated RE batch processes initiate the No-Touch MAGI Renewal process and generate Medi-Cal RE Packets.

1.2   Requests

Due to the PHE, Medi-Cal RE processing was suspended effective March 16, 2020 and continues. To allow Medi-Cal programs to process through the next automated RE batch process, we will mark the REs as complete and reset the overdue Medi-Cal RE Due Dates per DHCS direction. This includes Medi-Cal programs with RE Due Date January 2020 through and including April 2021.

1.3   Overview of Recommendations

1. A one-time data change will complete the Medi-Cal Overdue REs from January 2020 through and including July 2020 and reset the RE Due Date to 2021 and then again from 2021 to 2022.
2. A one-time data change will complete the Medi-Cal Overdue REs from August 2020 through and including April 2021 Overdue REs and reset the RE Due Date forward one year.
3. Complete a one-time data change to update the overdue MC RE packet status to 'Complete- EDBC Accepted'
4. Complete a one-time data change to update the status of the Renewal MAGI DER to 'Suppressed'
5. Complete a one-time data change to add a journal entry indicating the Medi-Cal Renewal was completed and the Medi-Cal RE Due Date reset due to the PHE.

1.4 Assumptions

1. The one-time data changes will only update Open Medi-Cal programs. If a Discontinued MC program is rescinded after the one-time data changes, the worker will complete and reset the RE Due Date manually as needed.
2. Time-limited aid codes are included in the targeted population and their overdue RE will be complete and reset.
3. Medi-Cal programs with all Members only on a CMSP aid code are excluded from the targeted population and will remain with an overdue RE Due Date.
   Example 1: A Medi-Cal program has an Active Member on both LTC and CMSP, the RE Due Date will be advanced if the program meets all other criteria for the one-time data change.
   Example 2: A Medi-Cal program has one spouse on a Medi-Cal aid code and another spouse on CMSP, the RE Due Date will be advanced if the program meets all other criteria for the one-time data change.
   Example 3: A Medi-Cal program has one individual on CMSP aid code only with an overdue RE Due Date. This program will be excluded from the data change and the RE Due Date will remain overdue.
4. Medi-Cal programs assigned to an LA County DCFS worker are included in the targeted population and their overdue RE will be complete and reset.
5. The existing Batch EDBC Read-Only for "Protection due to Public Health Crisis/Natural Disaster" to prevent negative/adverse actions will continue.
6. No notices will be generated to beneficiaries as EDBC will not be run as a part of the one-time data change. If a person is MAGI Pending on the latest DER, they will continue their prior benefits after the data change. Verifications will remain unchanged.
7. SCRs CA-226465 and CIV-108771 will complete and reset overdue Medi-Cal REs monthly starting June 2021 (for May 2021 REs) until the end of the PHE.

2   RECOMMENDATIONS

2.1   Data Change

2.1.1   Overview

With a one-time data change, Medi-Cal programs with overdue RE from January 2020 through and including April 2021 will have their Medi-Cal RE completed and Medi-Cal RE Due Date reset. The program's Packet status will be updated to 'Complete-EDBC Accepted', the Renewal DER status will be updated to 'Suppressed' and a journal will be created to document the data change.

2.1.2   Description of Change

1. **Medi-Cal Programs with overdue RE January 2020-July 2020**
   a. Identify open Medi-Cal programs that meet all the following:
      i. the Medi-Cal program block has a high-dated status of Pending or Active
      ii. the latest Redetermination record meets all the following:
         1. Due Date is in January 2020 through and including July 2020
         2. does not have a 'Completion Date
      iii. all individuals are Pending, OR at least one Active Member is on a Medi-Cal or MSP aid code - exclude Medi-Cal programs where all individuals are Active Members only on a CMSP aid code
   b. Complete the latest Redetermination record identified in 2.1.2.1.a.ii as follows: (The RE Due Date in this record will be referred to as the *Original RE Due Date*.)
      i. Completion Date = <System Date>
      ii. Completion Reason = 'Processed' (PR)
   c. Insert a new 2021 Redetermination record for the program identified in 2.1.2.1.a as follows:
      i. Begin Date = the first of the month following the *Original RE Due Date*
      ii. Due Date = *Original RE Due Date* + 12 months
      iii. Completion Date = <System Date>
      iv. Completion Reason = 'Processed' (PR)
   d. Insert a new 2022 Redetermination record for the program identified in 2.1.2.1.a as follows:
      i. Begin Date = the first of the month following the *Original RE Due Date* + 12 months
      ii. Due Date = *Original RE Due Date* + 24 months
      iii. Completion Date = <blank>
      iv. Completion Reason = <blank>

2. Medi-Cal Programs with overdue RE August 2020-April 2021
   a. Identify open Medi-Cal programs that meet all the following:
      i. the Medi-Cal program block has a high-dated status of Pending or Active
      ii. the latest Redetermination record meets all the following:
         1. Due Date is in August 2020 through and including April 2021
         2. does not have a 'Completion Date'
      iii. all individuals are Pending, OR at least one Active Member is on a Medi-Cal or MSP aid code - exclude Medi-Cal programs where all individuals are Active Members only on a CMSP aid code
   b. Complete the latest Redetermination record identified in 2.1.2.2.a.ii as follows: (The Due Date in this record will be referred to as the *Original RE Due Date*.)
      i. Completion Date = <System Date>
      ii. Completion Reason = 'Processed' (PR)
   c. Insert a new Redetermination record for the program identified in 2.1.2.2.a as follows:
      i. Begin Date = the first of the month following the *Original RE Due Date*
      ii. Due Date = *Original RE Due Date* + 12 months
      iii. Completion Date = <blank>
      iv. Completion Reason = <blank>

3. Packets
   a. If it exists, update the Medi-Cal RE Packet and/or the Non-MAGI Screening Packet Status to 'Complete- EDBC Accepted' as follows:
      i. the Medi-Cal program was identified in Recommendations 2.1.2.1 or 2.1.2.2
      ii. the packet is any of the following packets (CT_329):

CalSAWS	
Template Repository Form Name	**Customer Reporting Report Type (CT_329)**
Non-MAGI Packets	
MC Packet	MC RE Packet (MR)
MC Redetermination Packet	MC RE Packet (MR)
LTC Packets	
MC LTC Packet	LTC MC RE Packet (ML)
Mixed Packets	
Mixed MC RE Packet	Mixed MC RE Packet (MI)
MAGI Packets	
MAGI MC Packet	MAGI MC Packet (MG)
Non-MAGI Screening Packets	
Non-MAGI Screening Packet	Non-MAGI Screening Packet (NM)
MC 604 IPS PACKET	MC 604 IPS Packet (MP)
Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet (65)
Other Packets	
Transitional Medi-Cal Quarterly Status Report	TMC 176 S (TM)
Pre-ACA MC Redetermination Packet	Pre-ACA MC RE Packet (MPA)
MSP Packet	MSP Packet (MS)

C-IV	
Template Repository Form Name	**Customer Reporting Report Type (CT_329)**
Non-MAGI Packets	
Aged, Blind, Disabled (ABD) Medi-Cal Redetermination Packet	ABD MC RE Packet (MA)
Regular Medi-Cal Redetermination Packet	MC RE Packet (MR)
LTC Packets	
Long Term Care (LTC) Medi-Cal Redetermination Packet	LTC MC RE Packet (ML)
Mixed Packets	
MAGI And Non-MAGI Redetermination Packet	Mixed MC RE Packet (MM)
Non-MAGI Long Term Care (LTC) Mixed Household Redetermination Packet	Non-MAGI LTC Mixed HH RE Packet (MHH)
MAGI Packets	
MAGI RE Packet	MAGI RE Packet (MG)
Non-MAGI Screening Packets	
Non-MAGI Screening Packet	Non-MAGI Screening Packet (NM)
Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet (65)
Other Packets	
Transitional Medi-Cal (TMC) Quarterly Status Report	TMC 176 S (TM)

      iii. the packet submit month is January 2020 through and including April 2021

      iv. the packet status is either of the following:

            1. if the latest status for the packet is 'Sent'

                  a. Insert a Status record for 'Received' and a Status record for 'Complete- EDBC Accepted'

                  b. Set the Status Date as system date for each record

2. If the latest status for the packet is 'Incomplete', 'Received', or 'Reviewed – Ready to Run EDBC'
   a. Insert a Status record for 'Complete- EDBC Accepted'
   b. Set the Status Date as system date

4. **MAGI Determinations**
   a. For the population identified in Recommendation 2.1.2.1 or 2.1.2.2, if a DER exists that meets the following criteria:
      i. there exists a DER with 'RE' and/or 'RM' Run Reason with benefit month December 2019 through and including April 2021, and the latest status for the DER is 'Reviewed'

   Then, insert a new Status record for each Renewal DER with Status 'Suppressed' and Status Date as system date.

5. **Journal**
   a. Insert a journal entry for a case where at least one Medi-Cal program was identified in the population identified in Recommendation 2.1.2.1 or 2.1.2.2 to indicate the Medi-Cal Renewal was completed and reset by the one-time data change due to the PHE. There will be one journal entry per case.

      Journal Category: All

      Journal Type: Activity

      Short Description: Delayed Medi-Cal RE due to PHE

      Long Description: Delayed redetermination processing for Medi-Cal benefits approved due to federally declared public health emergency.

2.1.3 Estimated Number of Records Impacted/Performance

Approximately 795,000 C-IV and 740,000 LA county Medi-Cal programs will be updated with these data changes.

3   REQUIREMENTS

3.1   Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.4.6	The LRS shall include the ability to complete a mass update without intervention by COUNTY-specified Users if all impacted cases can be identified and all required information is available.	This SCR brings Medi-Cal programs with an overdue RE due to the PHE up to date without user intervention.
2.16.4.7	The LRS shall post an easily understandable case comment on every case updated with each mass update.	This SCR documents the data change in a Journal entry for each case impacted.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-226465 | CIV-108771

Monthly Process to Complete and Reset Overdue MC REs due to PHE

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Renee Gustafson
	Reviewed By	Derek Goering, Prashant Goel, Geetha Ramalingam

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
03/25/2021	.1	Initial Draft	Renee Gustafson
04/09/2021	.2	Updated Packet table to include CT329 codes	Renee Gustafson
04/13/2021	.3	Updated Packet table to include a separate table for CalSAWS after C-IV migration	Renee Gustafson
06/11/2021	.4	Added Technical note to recommendation 2.1.2.1 about EDBC flag. Updated Recommendation 2.1.3 to state the first month DCR will run on 6/30/2021 and monthly on the 15th thereafter.	Renee Gustafson

Table of Contents

1   OVERVIEW

Due to the Public Health Emergency (PHE), Medi-Cal Redetermination (RE) processing was suspended effective March 16, 2020 and continues. With SCRs CA-218730|CIV-107791, a one-time data change completed and reset the overdue Medi-Cal REs for January 2020 through an including April 2021 impacted by the PHE. That data change allowed these Medi-Cal programs to process through the next automated RE batch process. This SCR will establish a monthly process to continue completing and resetting the MC REs as they become overdue each month to allow the Medi-Cal programs to process through the next automated RE batch process. This monthly process will continue until the end of the PHE.

1.1   Current Design

Medi-Cal RE Due Dates may be automatically advanced by the system or manually advanced by the worker when the RE process is complete. Monthly automated RE batch processes initiate the No-Touch MAGI Renewal process and generate Medi-Cal RE Packets.

Due to the PHE, Medi-Cal RE processing was suspended effective with March 16, 2020 and continues. To allow Medi-Cal programs to process through the next automated RE batch process, a one-time data change completed and reset the overdue Medi-Cal REs from January 2020 through and including April 2021 on May 29, 2021.

Every month, Medi-Cal programs will continue to have overdue REs due to DHCS direction in MEDIL 20-07 and MEDIL 20-14 to suspend Medi-Cal RE processing that results in an adverse action until the end of the PHE.

1.2   Requests

Create a monthly process to mark the REs as complete and reset the overdue Medi-Cal RE Due Dates per DHCS direction. This will begin in June 2021 for Medi-Cal programs with RE Due Date May 2021 and will continue monthly until the end of the PHE.

1.3   Overview of Recommendations

1. A monthly data change will complete the Medi-Cal REs that became overdue the month prior and reset them a year forward.
    a. Complete a monthly data change to update the overdue MC RE packet status to 'Complete- EDBC Accepted'
    b. Complete a monthly data change to update the status of the Renewal MAGI DER to 'Suppressed'
    c. Complete a monthly data change to add a journal entry indicating the Medi-Cal Renewal was complete and the Medi-Cal RE Due Date reset due to the PHE.

1.4 Assumptions

1. The monthly data change will only update Open Medi-Cal programs. If a Discontinued MC program is rescinded after the monthly data change, the worker will complete and reset the RE Due Date manually as needed.
2. Time-limited Aid Codes are included in the targeted population and their overdue RE will be complete and reset.
3. Medi-Cal programs with all Members only on a CMSP aid code are excluded from the targeted population and will remain with an overdue RE Due Date.
   Example 1: A Medi-Cal program has an Active Member on both LTC and CMSP, the RE Due Date will be advanced if the program meets all other criteria for the one-time data change.
   Example 2: A Medi-Cal program has one spouse on a Medi-Cal aid code and another spouse on CMSP, the RE Due Date will be advanced if the program meets all other criteria for the one-time data change.
   Example 3: A Medi-Cal program has one individual on CMSP aid code only with an overdue RE Due Date. This program will be excluded from the data change and the RE Due Date will remain overdue.
4. Medi-Cal programs assigned to an LA County DCFS worker are included in the targeted population and their overdue RE will be complete and reset.
5. The existing Batch EDBC Read-Only for "Protection due to Public Health Crisis/Natural Disaster" to prevent negative/adverse actions will continue.
6. No notices will be generated to beneficiaries as EDBC will not be run as a part of the monthly data change. If a person is MAGI Pending on the latest DER, they will continue their prior benefits after the data change. Verifications will remain unchanged.

2 RECOMMENDATIONS

2.1 Data Change

2.1.1 Overview

With a monthly data change, Medi-Cal programs with an overdue RE that became overdue the month prior will have their Medi-Cal RE complete and Medi-Cal RE Due Date reset. The program's Packet status will be updated to 'Complete-EDBC Accepted', the Renewal DER status will be updated to 'Suppressed' and a journal will be created to document the data change.

2.1.2 Description of Change

For the below recommendations, the *'Target RE Due Date'* is defined as a Medi-Cal program with RE Due Date the month prior to the monthly data change process. For example: If the monthly data change runs in June 2021, the *Target RE Due Date* is May 2021.

1. **Medi-Cal Programs with RE Due Date the month prior to data change.**
   a. Identify open Medi-Cal programs that meet all the following:
      i. the Medi-Cal program block has a high-dated status of Pending or Active
      ii. the latest Redetermination record meets all of the following:
          1. Due Date is the *Target RE Due Date*.
          2. does not have a 'Completion Date'
      iii. all individuals are pending, OR at least one Active Member is on a Medi-Cal or MSP aid code - exclude Medi-Cal programs where all individuals are Active Members only on a CMSP aid code
   b. Complete the latest Redetermination record identified in 2.1.2.1.a.ii as follows: (The Due Date in this record will be referred to as the *Original RE Due Date*.)
      i. Completion Date = <System Date>
      ii. Completion Reason = 'Processed' (PR)
   c. Insert a new Redetermination record for the program identified in 2.1.2.1.a as follows:
      i. Begin Date = the first of the month following the *Original RE Due Date*
      ii. Due Date = *Original RE Due Date* + 12 months
      iii. Completion Date = <blank>
      iv. Completion Reason = <blank>

   CalSAWS Technical Note: Set the EDBC flag on any EDBC awaiting authorization for each program updated with this one-time data

change so the supervisor authorization will be 'expired' when the Supervisor accesses EDBC for authorization. This ensures that the supervisor can't authorize the pending authorization and create a duplicate Redetermination record. The EDBC will need to be re-run manually at that time.

2. Packets
    a. If it exists, update the Medi-Cal RE Packet and/or the Non-MAGI Screening Packet Status to 'Complete- EDBC Accepted' as follows:
        i. the Medi-Cal program was identified in 2.1.2.1
        ii. the packet is any of the following packets (CT_329):

CalSAWS prior to C-IV Migration	
Template Repository Form Name	**Customer Reporting Report Type (CT_329)**
Non-MAGI Packets	
MC Packet	MC RE Packet (MR)
MC Redetermination Packet	MC RE Packet (MR)
LTC Packets	
MC LTC Packet	LTC MC RE Packet (ML)
Mixed Packets	
Mixed MC RE Packet	Mixed MC RE Packet (MI)
MAGI Packets	
MAGI MC Packet	MAGI MC Packet (MG)
Non-MAGI Screening Packets	
Non-MAGI Screening Packet	Non-MAGI Screening Packet (NM)
MC 604 IPS PACKET	MC 604 IPS Packet (MP)
Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet (65)
Other Packets	
Transitional Medi-Cal Quarterly Status Report	TMC 176 S (TM)
Pre-ACA MC Redetermination Packet	Pre-ACA MC RE Packet (MPA)
MSP Packet	MSP Packet (MS)

CalSAWS after C-IV migration			
C-IV Migration Packet Prior Template Repository Form Name	**CalSAWS Packet Prior Template Repository Form Name**	**Template Repository Form Name**	**Customer Reporting Report Type (CT_329)**
Non-MAGI Packets			
• Aged, Blind, Disabled (ABD) Medi-Cal Redetermination Packet	N/A	N/A	ABD MC RE Packet (MA)
• Regular Medi-Cal Redetermination Packet • Non-MAGI Long Term Care (LTC) Mixed Household Redetermination Packet	• MC Packet • MC Redetermination Packet	Non-MAGI RE Packet*	Non-MAGI RE Packet (MR) *
LTC Packets			
• Long Term Care (LTC) Medi-Cal Redetermination Packet	• MC LTC Packet	N/A	LTC MC RE Packet (ML)
Mixed Packets			
• MAGI And Non-MAGI Redetermination Packet	• Mixed MC RE Packet	Mixed Household RE Packet*	Mixed Household RE Packet (MI) *
MAGI Packets			
• MAGI RE Packet	• MAGI MC Packet	MAGI RE Packet *	MAGI RE Packet (MG) *
Non-MAGI Screening Packets			
• Non-MAGI Screening Packet	• Non-MAGI Screening Packet	Non-MAGI Screening Packet	Non-MAGI Screening Packet (NM)
	• MC 604 IPS PACKET	N/A	MC 604 IPS Packet (MP)
• Non-MAGI Turning 65 Packet	• Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet (65)
Other Packets			
• Transitional Medi-Cal (TMC) Quarterly Status Report	• Transitional Medi-Cal Quarterly Status Report	Transitional Medi-Cal Quarterly Status Report	TMC 176 S (TM)
		Pre-ACA MC Redetermination Packet	Pre-ACA MC RE Packet (MPA)
		MSP Packet	MSP Packet (MS)

Technical note: The CalSAWS MC Renewal packets indicated with an asterisk (*) are the new MC RE packet names per CA-216432 in 21.07 release. The new packets are not effective in CalSAWS until the C-IV migration go-live date; C-IV go-live date is stored in CT_2799.

Per CCC-307, C-IV packet "Non-MAGI LTC Mixed HH RE Packet (MHH)" generated in C-IV will be converted to display as "Non-MAGI RE Packet (MR)" in CalSAWS. C-IV packet, "MAGI And Non-MAGI Redetermination Packet" will be converted to display as "Mixed Household RE Packet (MI)" in CalSAWS.

C-IV	
Template Repository Form Name	**Customer Reporting Report Type (CT_329)**
Non-MAGI Packets	
Aged, Blind, Disabled (ABD) Medi-Cal Redetermination Packet	ABD MC RE Packet (MA)
Regular Medi-Cal Redetermination Packet	MC RE Packet (MR)
LTC Packets	
Long Term Care (LTC) Medi-Cal Redetermination Packet	LTC MC RE Packet (ML)
Mixed Packets	
MAGI And Non-MAGI Redetermination Packet	Mixed MC RE Packet (MM)
Non-MAGI Long Term Care (LTC) Mixed Household Redetermination Packet	Non-MAGI LTC Mixed HH RE Packet (MHH)
MAGI Packets	
MAGI RE Packet	MAGI RE Packet (MG)
Non-MAGI Screening Packets	
Non-MAGI Screening Packet	Non-MAGI Screening Packet (NM)
Non-MAGI Turning 65 Packet	Non-MAGI Turning 65 Packet (65)
Other Packets	
Transitional Medi-Cal (TMC) Quarterly Status Report	TMC 176 S (TM)

iii. the packet submit month is the *Target RE Due Date*.
iv. the packet status is either of the following:
1. If the latest status for the packet is 'Sent'
    a. Insert a Status record for 'Received' and a Status record for 'Complete- EDBC Accepted'
    b. Set the Status Date as system date for each record
2. If the latest status for the packet is 'Incomplete', 'Received', or 'Reviewed – Ready to Run EDBC'
    a. Insert a Status record for 'Complete- EDBC Accepted'
    b. Set the Status Date as system date

3. **MAGI Determinations**
    a. For the population identified in Recommendation 2.1.2.1, if a DER exists that meets the following criteria:
        i. there exists a DER with 'RE' and/or 'RM' Run Reason with benefit month equal to the *Target RE Due Date*, or one month prior to the *Target RE Due Date*, and the latest status for the DER is 'Reviewed'
        Then, insert a new Status record for each identified Renewal DER with Status 'Suppressed' and Status Date as system date.

4. **Journal**
    a. Insert a journal entry for a case where at least one Medi-Cal program was identified in the population identified in Recommendation 2.1.2.1 to indicate the Medi-Cal Renewal was completed and reset by the one-time data change due to the PHE. There will be one journal entry per case.

        Journal Category: All
        Journal Type: Activity
        Short Description: Delayed Medi-Cal RE due to PHE
        Long Description: Delayed redetermination processing for Medi-Cal benefits approved due to federally declared public health emergency.

2.1.3 Execution Frequency

The first run will be on June 30, 2021 for May 2021 RE Due Dates. All subsequent runs will run monthly, on the 15th calendar day of the month until the end of PHE.

Technical Note: At the end of PHE, this monthly process will be turned off with SCR CA-214453.

2.1.4 Key Scheduling Dependencies

None

2.1.5 Counties Impacted

All Counties

2.1.6 Data Volume/Performance

Approximately 55,000 C-IV and 51,000 LA County Medi-Cal program RE Due Dates will be updated monthly with these data changes.

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.4.6	The LRS shall include the ability to complete a mass update without intervention by COUNTY-specified Users if all impacted cases can be identified and all required information is available.	This SCR brings Medi-Cal programs with an overdue RE due to the PHE up to date without user intervention.
2.16.4.7	The LRS shall post an easily understandable case comment on every case updated with each mass update.	This SCR documents the data change in a Journal entry for each case impacted.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-228698 CIV-109021 ACL 21-17 LOC 2-4 Rate updates for HBFC Placements

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	S Meenavalli
	Reviewed By	Ritu Chinya, Paul G, Ignacio

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
6/17/2021	1.0	Initial Design	S Meenavalli

Table of Contents

1   OVERVIEW

As part of the CNI Rate increase ACL 20-78 for Fiscal Year (FY) 2020-21 for Foster Care (FC) and Kin-GAP (KG) programs in CalSAWS and C-IV, the Home Based Family Care (HBFC) LOC2 thru LOC4 rates are not updated based on the CDSS/State recommendation.

Based on ACL 21-17, HBFC LOC2 thru LOC4 rates require to be implemented in CalSAWS and C-IV Systems.

The one-time case listing details related to the impacted cases can be found under the Outreach section in this document.

1.1   Current Design

Currently CalSAWS and C-IV use the LOC2 thru LOC4 rates of FY 2019-20 that are effective from July 1, 2019 for the HBFC Placements.

1.2   Requests

- As per the ACL 21-17, the new HBFC LOC2 thru LOC4 rates from ACL 20-78 will be implemented in CalSAWS and C-IV effective April 1, 2021.

1.3   Overview of Recommendations

- The Code detail table rows that reflect the LOC2 thru LOC4 rates will be updated for HBFC placement types.

1.4   Assumptions

- Under this SCR, Eligibility is only updating the amounts and effective dates of HBFC LOC2 thru LOC4 rates only in the Code Tables.
- No change will be made to Rate determination logic in this SCR.
- The D, F1 thru F4 rate updates are out of scope of this SCR for HBFC Placements.
- AAP Rate updates are out of scope of this SCR.
- Home Based Family Care (HBFC) Provider's list referred in this SCR can be found at the end of design document.
- The listing may contain multiple rows based on the rates and/or aid codes.

2   RECOMMENDATIONS

2.1   Level of Care Basic Rates for HBFC Homes (CalSAWS and C-IV)

- Level of Care Basic rates are applicable to both CalSAWS and C-IV systems.
- For Foster Care programs these rates are paid when the child is in a Facility that receives the Level of Care rate and the Benefit Month is on or after January 2017.

- For Kin-GAP programs these rates are paid when the Case Dismissal Date is on or after January 1, 2017 in C-IV or Kin-GAP Summary Begin Date is on or after January 1, 2017 in CalSAWS.

2.1.1 Description of Changes

- Update the HBFC Homes LOC2 thru LOC4 rates by end-dating the rate/code table records that began 07/01/2019 with an end date of 03/31/2021. Insert new rate/code table records effective 04/01/2021 with the following rates:

Level of Care	LOC2	LOC3	LOC4
Basic	$1,153	$1,271	$1,387

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.1.2	The LRS shall include an automated method for implementing mass updates triggered by policy changes or mass participant financial changes, including Social Security or Veterans benefits cost of living adjustments (COLAs).	The new LOC2 thru LOC4 Rates released by the County will be updated in the system. These new rates will be used to determine the eligibility benefits.

5 MIGRATION IMPACTS

None

6 OUTREACH

6.1 Lists

List Name: Cases having HBFC Placements with LOC2 thru LOC4 rates

List Criteria:

Provide a list of all Active FC / KG cases with HBFC Placement Type that met any of the condition below:

1) Standard Rate Type with Level of Care LOC2 or LOC3 or LOC4 issued after 07/01/2020
2) Non-standard rate equals to Standard rate with LOC2 or LOC3 or LOC4 as per the ACL 20-78 issued after 07/01/2020

Standard Columns:
- Case Name
- Case Number
- County
- Unit
- Unit Name
- Office Name
- Worker ID
- Placement Name

Additional Column(s):
- Program
- CPS Case Number (Exists only for LA County)
- Primary member CIN#
- Primary member Name
- Primary member Date of Birth
- Placement Type
- Placement Start Date
- Rate Start Date
- Rate Type
- Rate Amount if exists (Exists When Rate Type is Non-Standard)
- Level of Care if exists (Exists When Rate Type is not Non-Standard)
- Aid Code

Frequency: One-time after the implementation of the SCR

The list will be posted to the following locations:

System	Path
CalSAWS	CalSAWS Sharepoint > Web Portal > System Changes > SCR and SIR Lists > 2021 > CA-228698
C-IV	CalSAWS Sharepoint > Web Portal > System Changes > SCR and SIR Lists > 2021 > CIV-109021

7 APPENDIX

HBFC (Home-Based Family Care) Providers:

1) Foster Family Home

2) Foster Family Home – Shelter Care
3) Legal Guardian
4) Non-Relative Extended Family Member Home
5) Relative Home
6) Specialized Foster family Home
7) Supervised Independent Living
8) Tribal Specific Home
9) County Shelter / Receiving Home (Non – EA/AFDC) –CalSAWS Only
10) Court Specified Home – CalSAWS Only
11) Guardian Home – CalSAWS Only
12) Resource family Home – CalSAWS Only
13) Small Family Home – CalSAWS Only
14) Temporary Shelter Home – CalSAWS Only