CalSAWS

California Statewide Automated Welfare System

Design Document

CA-51903

LA County DCFS: When all children in a CPS Program have been Discontinued, CalSAWS should Discontinue the CPS Program. The same thing should happen for placement cases

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Howard Suksanti
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
7/18/2024	0.1	Initial Revision	Howard Suksanti

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1 OVERVIEW

This SCR creates a nightly batch to close the CPS program when a participant is not active in any DCFS program.

1.1 Current Design

Worker manually closes the CPS program when a participant is not active in any DCFS program.

1.2 Requests

Create a batch job to update the person status in the CPS program to Discontinue when the person is no longer active in any FC/KG/AAP program.

When all persons in CPS are discontinued, the batch must update the CPS program status to Discontinue.

1.3 Overview of Recommendations

Create a batch job to update the person status in CPS program to Discontinue when the person is no longer active in any FC/KG/AAP program.

When all persons in CPS discontinue, the batch must update the CPS program status to Discontinued.

The batch will create a Journal Entry on the CPS case when the batch updates the person status.

1.4 Assumptions

N/A.

2 RECOMMENDATIONS

2.1 Create a batch sweep to update CPS case

2.1.1 Overview

Create a batch job to update the person status in the CPS program to Discontinue when the person is no longer active in any FC/KG/AAP program.

2.1.2 Description of Change

Create a batch job to update the person status in the CPS program to Discontinue when the person is no longer active in any FC/KG/AAP program as of Batch Run date.

The batch will not pick up a person when the status of the CPS person is updated after the latest FC/KG/AAP discontinue status. This will prevent batch from closing the CPS person when the worker ~~reopen~~reopens a case.

When all persons in the CPS discontinue, the batch must update the CPS program status to Discontinued.

The batch will create a Journal Entry on the CPS case when the batch update the person status or when the batch update the CPS program status.

Journal Entry Detail: (When Batch update the CPS program status)

Category: All

Type: Narrative

Short Description: CPS program status is updated.

Long Description: CPS program status is updated due to the changes on the FC/KG/AAP program status.

Journal Entry Detail: (When Batch update the CPS program person status)

Category: All

Type: Narrative

Short Description: CPS program person status is updated.

Long Description: CPS program person status is updated due to the changes on the FC/KG/AAP program status.

2.1.3 Execution Frequency

Daily Mon-Sat except Holidays.

2.1.4 Key Scheduling Dependencies

After Batch EDBC processing job.

2.1.5 Counties Impacted

Los Angeles County.

2.1.6 Category

Core.

2.1.7 Data Volume/Performance

N/A.

2.1.8 Failure Procedure/Operational Instructions

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc…)

CalSAWS

California Statewide Automated Welfare System

CA-217069

Enhance eHIT Inbound Logic that Assigns MAGI Referral Type

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Renee Gustafson	
	Reviewed By	Max Volf, Dylan Patel, Noel Acosta, William Baretsky, Sourabh Bhatia

DATE	VERSION	REVISION DESCRIPTION	AUTHOR
09/17/2024	.01	Original Draft	Renee G
10/02/2024	.02	Updated to new design template	Renee G
10/22/2024	.03	Updated design per feedback from MC Analysts	Renee G
10/29/2024	.04	Added Automated Regression	William B
11/07/2024	.05	Added Auto-Linking updates, EDR logic to prevent BV9, MAGI Emulator update	Renee G
11/12/2024	.06	Added mockup 2.1.1 to show where DER-U Comments will display.	Renee G

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CA-217069 – Enhance eHIT Inbound Logic that Assigns MAGI Referral Type

1 OVERVIEW

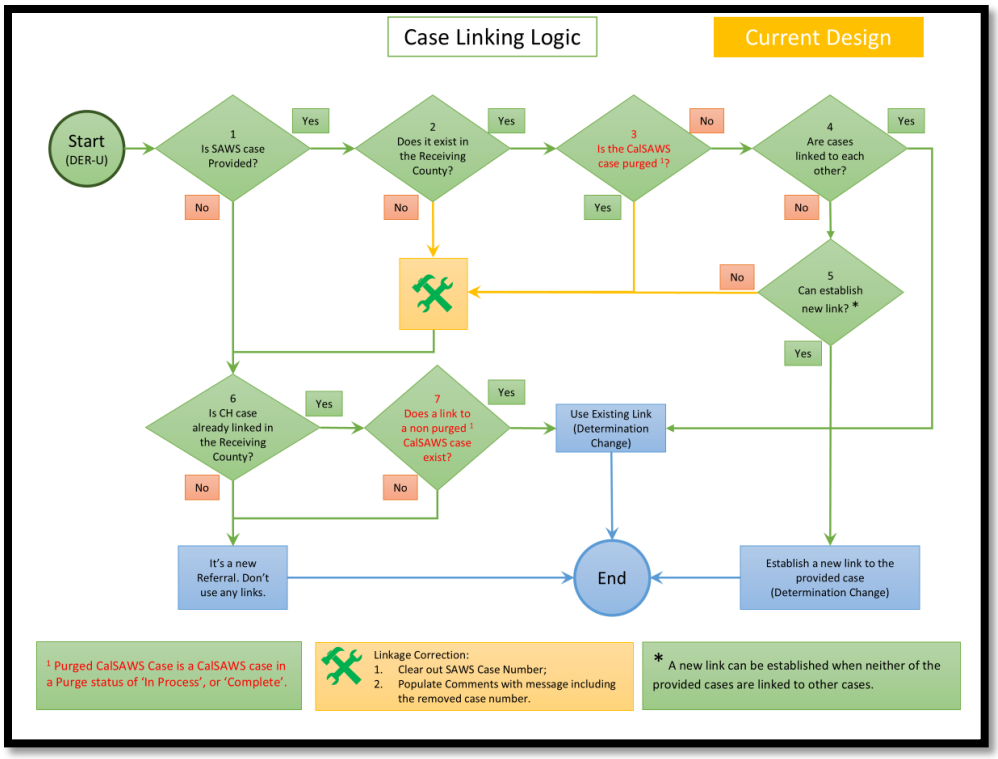
The inbound eHIT logic will now check if all Medi-Cal programs are closed and beyond the 90-day cure on a previously linked CalSAWS Case when determining if a DER-U is saved as a "Determination Change" or "Referral". The MAGI Referral Search page has options to filter on Open Medi-Cal to find Determinations received for CalSAWS cases with closed Medi-Cal programs. The page will be updated to include a filter to find CalSAWS cases with closed Medi-Cal Programs in the 90-day cure period.

1.1 Current Design

CalHEERS sends an Unsolicited MAGI Determination of Eligibility Response (DER-U) to CalSAWS when there are applications, reapplications, or reported changes on the CalHEERS Portal and CalHEERS determined any of the following:

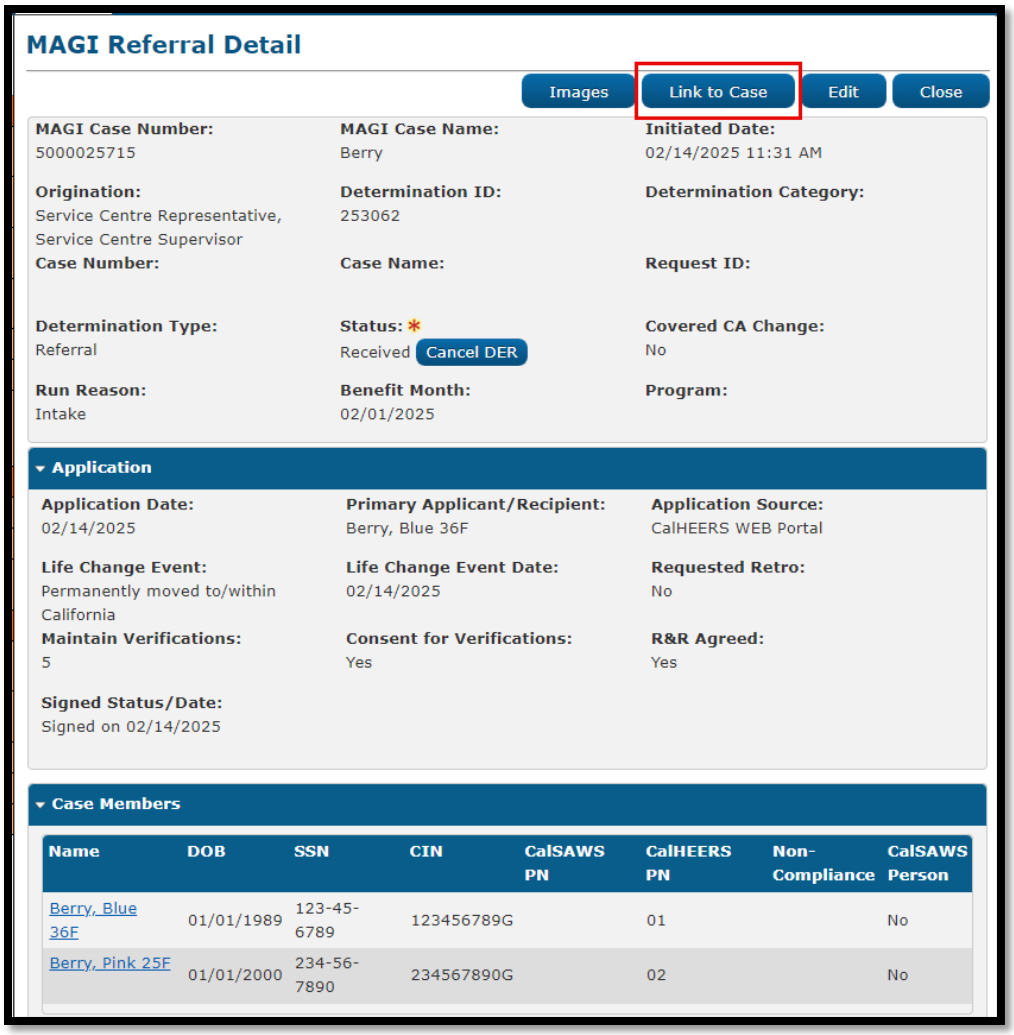
- at least one individual has ongoing or pending MAGI Medi-Cal; or
- there is a transition between MAGI Medi-Cal and Covered California programs; or
- there is a referral to Non-MAGI Medi-Cal, CalFresh or CalWORKs.

CalSAWS eHIT inbound processing logic assigns 'Determination Type' of "Referral" to a DER-U when the MAGI Case has never been linked to a CalSAWS case in the same county or the prior linked CalSAWS case is purged. CalSAWS eHIT inbound processing logic assigns 'Determination Type' of "Determination Change" and automatically links the DER-U to the CalSAWS Case if the MAGI Case in the DER-U was previously linked to a CalSAWS case using the below flowchart. (See Supporting Documents 'Current Design Case Linking Logic.pdf' for more details of each step in the flowchart.)

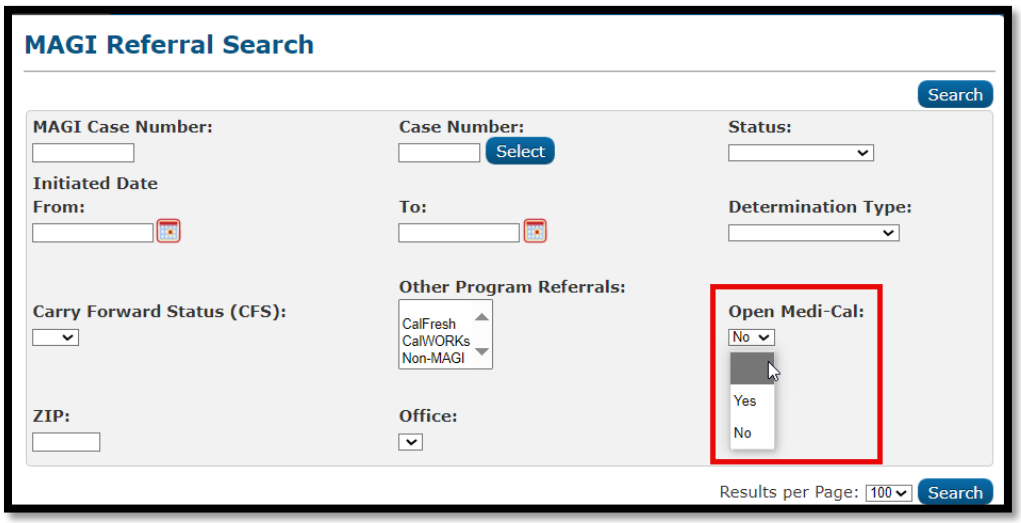


When a DER-U is received by CalSAWS for a reapplication or reported change, the System assigning the 'Determination Type' of "Determination Change" causes confusion to the user when the previously linked CalSAWS case has all Medi-Cal programs closed, and all Medi-Cal programs are beyond the 90-day cure period.

The MAGI Referral Detail page 'Link to Case' button has functionality that first attempts to auto-link the MAGI Case in the Referral to the last linked CalSAWS case in the county and brings the user directly to the Program Application List page. If a prior linkage is not found, then the user is navigated to the New Person Search page for the Primary Applicant and navigated through the MAGI referral linking flow including the option to select an existing case or create and link to a new CalSAWS case.



The MAGI Referral Search page has a filter for 'Open Medi-Cal' with options of blank, "Yes" or "No".



The Open Medi-Cal = "Yes" will filter results where at least one Medi-Cal program on the case has a high-dated Pending, Ineligible, or Active status in addition to meeting all other search criteria.

The Open Medi-Cal = "No" will filter results where all Medi-Cal programs on the case have a high-dated Denied or Discontinued status in addition to meeting all other search criteria.

For cases where the Medi-Cal program Discontinuance is already processed and the effective date is in the future, the high-dated status is Discontinue so the case would be treated as 'Open Medi-Cal' = "No" even though the Medi-Cal program may be currently Active when the user performs the search.

There is no option for the users to filter cases that have all Medi-Cal programs closed but at least one is in the 90-day cure period.

The MAGI Emulator is used in testing and training CalSAWS environments that are not connected to CalHEERS in order to mimic a DER/DER-U transaction from CalHEERS so CalSAWS changes can be tested. The MAGI Emulator does not have functionality to return a DER-U as a Referral with the same MAGI Case Number.

1.2 Requests

When the CalSAWS case has all Medi-Cal programs closed and there is no longer any Medi-Cal program in the 90-day cure period, save the DER-U with 'Determination Type' as "Referral."

If the MAGI Referral auto-linking logic is triggered, the system will not walk the user through the whole MAGI Referral linking flow and the user doesn't have an option to select a different CalSAWS case. Remove the auto-link functionality on the MAGI Referral Detail page so the user has the option to choose the CalSAWS case linkage for a Referral.

If CalHEERS has an old CalSAWS case locked and references the CalSAWS case in the DER-U beyond the 90-day cure, CalSAWS will save the DER-U as a Referral and not automatically link the Referral to the provided CalSAWS case. If the user chooses to link the Referral to a different CalSAWS case than what CalHEERS has in their linkage, when the first EDR is sent from the new CalSAWS case, CalHEERS will return Business Validation 9 - The combination of CalHEERS Case Number and SAWS Case information, SAWS Case Number, Servicing FIPS County Code, and Sending System, does not match the previously established case linkage information. In order to prevent BV9 in this scenario, update CalSAWS to include the 'Request Case Linkage Update' = Yes in the first EDR to update the linkage in CalHEERS.

Add a filter to the MAGI Referral Search page to allow users to find cases that are in or beyond the 90-day cure period.

Update the MAGI Emulator to return a DER-U for the same MAGI Case Number as in the EDR to assist with testing and training.

1.3 Overview of Recommendations

1. The inbound eHIT logic will now check if all Medi-Cal programs are closed and beyond the 90-day cure on a previously linked CalSAWS Case when determining if a DER-U is saved as a "Determination Change" or "Referral". The outbound eHIT logic will now send the Request Case Update = Yes in the first EDR subsequent to receiving a DER-U saved as a Referral if the CalSAWS case in the EDR is different from the CalSAWS case referenced in the DER-U.
2. The MAGI Referral Detail page will no longer attempt to auto-link the Referral to prior known linkage in CalSAWS and instead navigate the user through the MAGI Referral Linking flow.
3. The MAGI Referral Search page has options to filter on Open Medi-Cal to find Determinations received for CalSAWS cases with closed Medi-Cal programs. The page will be updated to include a filter to find CalSAWS cases with closed Medi-Cal Programs in the 90-day cure period.
4. Update the MAGI Emulator to return a DER-U for the same MAGI Case Number to assist with testing and training.

1.4 Assumptions

1. The 'Open Medi-Cal' and '90-Day Cure' filters on the MAGI Referral Detail page are based on the day the user performs the search; CalSAWS will not save a static value to track if the Determination was received when all MC programs were closed and/or during 90-day cure.
2. No impacts to Automated Actions that are created based on a 'Referral' or a 'Determination Change' received.
3. There will be no data change to update the 'Determination Type' from "Determination Change" to "Referral" for DER-Us received into the system prior to the implementation of this SCR.
4. The 'Determination Type' is assigned based on the status of the Medi-Cal program(s) in the case at the point the DER-U is received into the system. The 'Determination Type' is static and will not change. For example: If a DER-U is received during 90-Day cure and assigned "Determination Change" Type, it will remain a "Determination Change" even if the user doesn't action it until after the 90-Day cure.
5. The reference to '90-Day cure' for the inbound DER-U logic and the search page is a calculation of 90-days from effective date of Discontinuance and applies to all Discontinuance reasons.

2 RECOMMENDATIONS

2.1 eHIT

2.1.1 Overview

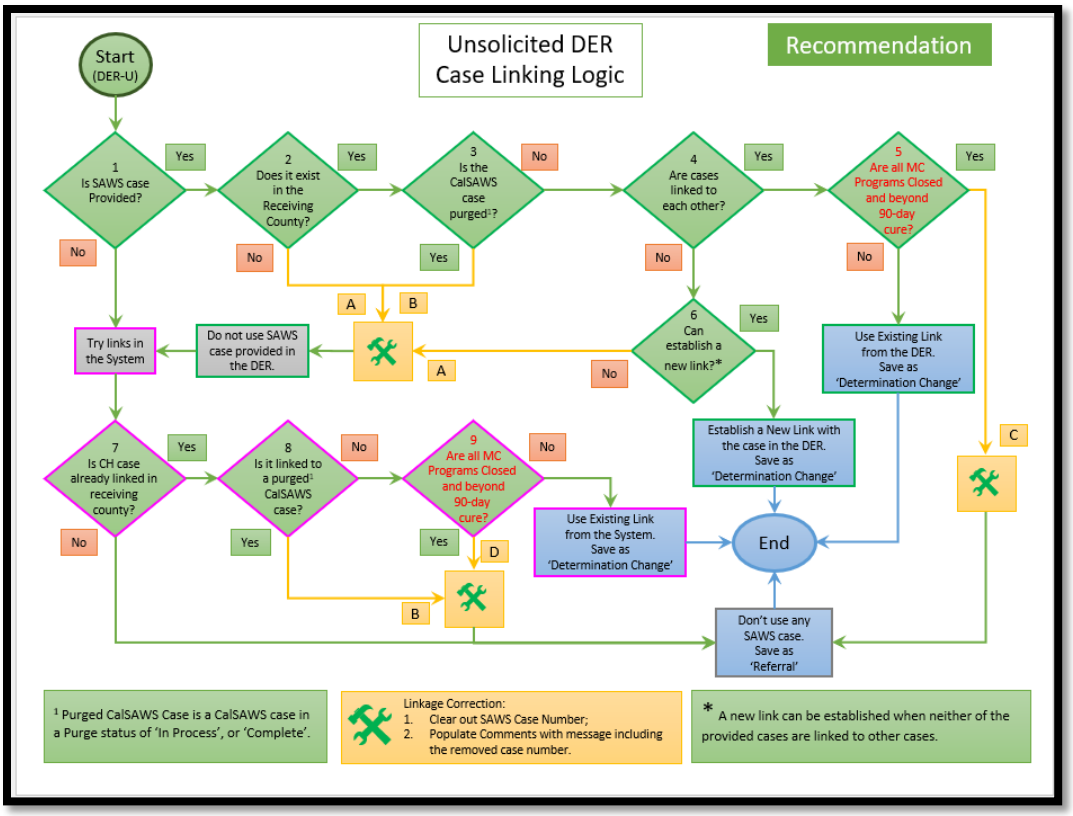
The inbound eHIT logic will now check if all Medi-Cal programs are closed and beyond the 90-day cure on a previously linked CalSAWS Case when determining if a DER-U is saved as a "Determination Change" or "Referral". The outbound eHIT logic will now send the Request Case Update = Yes in the first EDR subsequent to receiving a DER-U saved as a Referral if the CalSAWS case in the EDR is different from the CalSAWS case referenced in the DER-U.

2.1.2 Description of Change

1. Update CalSAWS inbound eHIT Logic to assign 'Determination Type' of "Referral" for a DER-U and do not auto-link the DER-U to a CalSAWS case when all Medi-Cal programs on a case have high-dated Denied/Discontinued status and all Medi-Cal programs are considered 'closed and beyond 90-day cure' using the effective date of the Program Closure compared to the system date the DER-U is received into CalSAWS.
    a. **For Denials:** the Medi-Cal program's high-dated status is Denied, and the DER-U is received on or after the effective date of the Denial.
    b. **For Discontinuances:** the Medi-Cal program's high-dated status is Discontinued, and the DER-U is received after the effective date of the Discontinuance plus 90 days.

    For cases with multiple Medi-Cal programs, all Denials and Discontinuances must meet the above for the case to be considered 'closed and beyond 90-day cure'.

    These changes are represented in the updated flow chart below for steps 5 and 9. See Supporting Documents for the updated flow chart with details for each step.



2. Linkage Correction C: If the CalSAWS case is:
    1. provided in the DER-U, and
    2. exists in the receiving county, and
    3. is not purged, and
    4. is previously linked to the MAGI Case in the DER-U, and
    5. all Medi-Cal programs are closed and beyond their 90-day cure based on the system date the DER-U is received into CalSAWS, then

    Save a Comment to the DER-U as:

    Former CalSAWS case referenced by CalHEERS: <CalSAWS Case Number> - <County>. All Medi-Cal programs are closed and beyond their 90-day cure period; the Determination is saved as 'Referral' and not auto-linked.
3. Linkage Correction D: If the CalSAWS case is:
    1. not provided in the DER-U, and
    2. is previously linked to the MAGI case in the DER-U in the receiving county, and
    3. is not purged, and
    4. all Medi-Cal programs are closed and beyond their 90-day cure based on the system date the DER-U is received into CalSAWS, then

    Save a Comment to the DER-U as:

    Prior linkage in CalSAWS: <CalSAWS Case Number> - <County>. All Medi-Cal programs are closed and beyond their 90-day cure period; the Determination is saved as 'Referral' and not auto-linked.

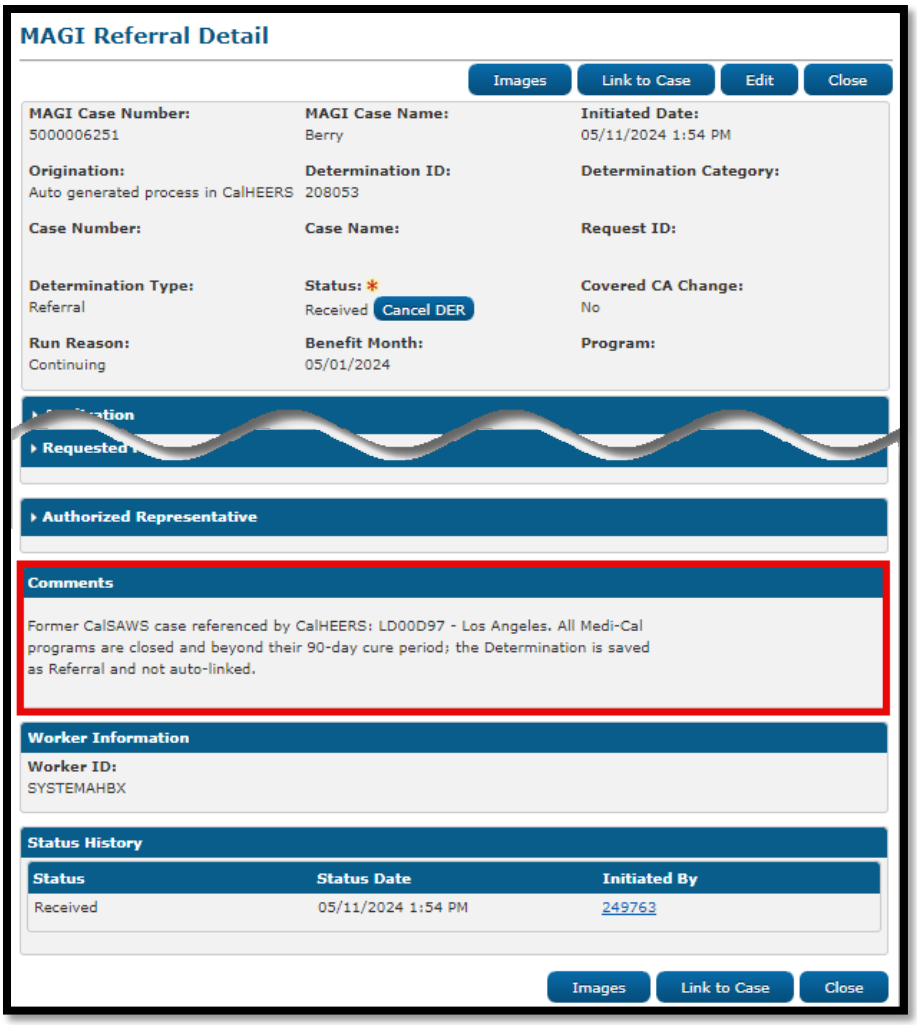


Figure 2.1.1 – MAGI Referral Detail page with Comments from Linkage Correction

4. Update eHIT outbound logic to send Request Case Update = Yes in the EDR when the EDR is sent after a Referral, if the Referral originally referenced a different CalSAWS case than the CalSAWS case in the EDR and the DER-U Reference CalSAWS case was removed with Linkage Correction C. Continue to send the Request Case Update = Yes until a Determination Response is received.

2.1.3 Interface Partner

CalHEERS

2.1.4 eHIT Schema Version

No Change

2.2 MAGI Referral Detail Page

2.2.1 Overview

The MAGI Referral Detail page will no longer attempt to auto-link the Referral to prior known linkage in CalSAWS and instead navigate the user through the MAGI Referral Linking flow.

2.2.2 Page Mockup

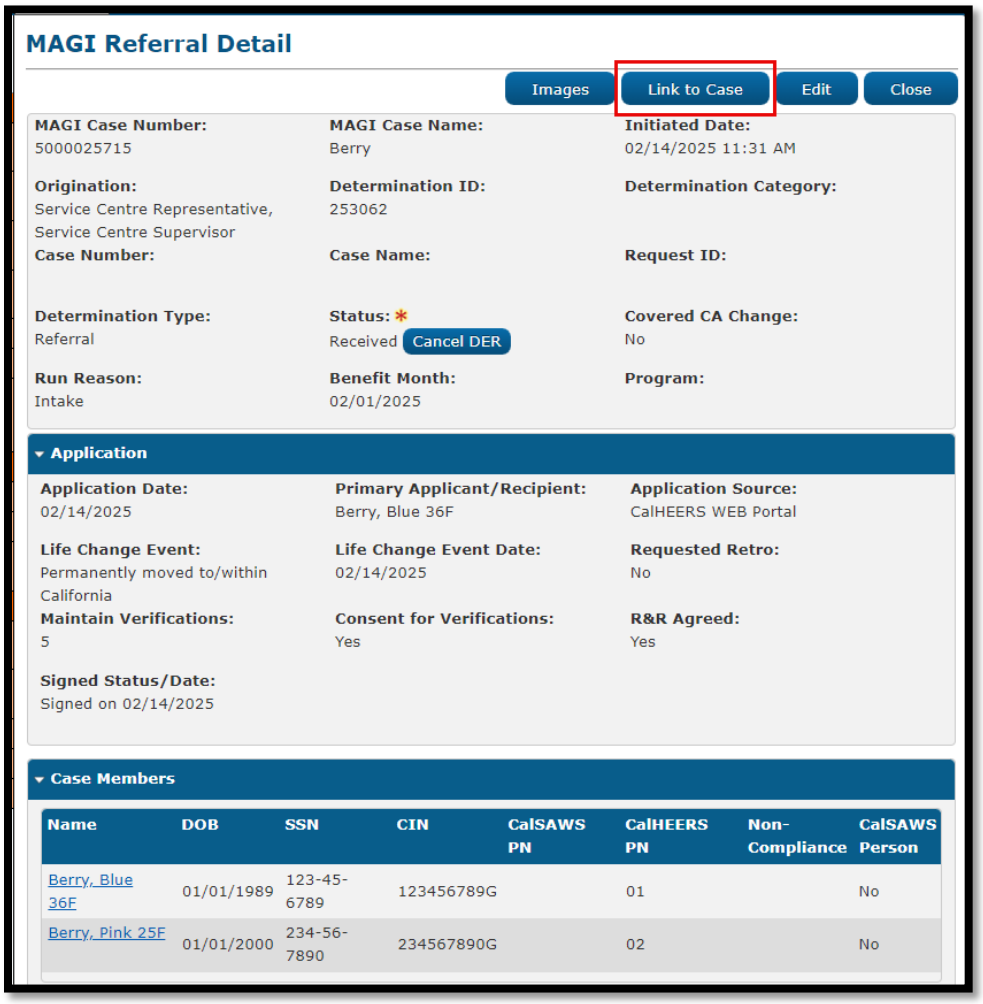


Figure 2.2.1 – MAGI Referral Detail page

2.2.3 Description of Changes

1. Update the auto-link logic from the 'Link to Case' button on the MAGI Referral Detail page as follows:
    a. No longer trigger the auto-link logic from the 'Link to Case' button on the MAGI Referral Detail page when the Determination Type is 'Referral' and there is no DER/DER-U for the same MAGI Case Number received in the same county after the 'Referral' is Received. This will instead navigate the user to the New Person Search page and take them through the MAGI Referral Linking flow.
    b. Continue to auto-link Referrals if there is a new DER/DER-U Received after the 'Referral' and the user clicks 'Link to Case'. This will prevent the same MAGI Case Number from being linked to two different CalSAWS cases at the same time.

Example 1:

On 02/15/2022 @11:30AM, CalSAWS Case B123456 linked to MAGI Case 234567891 is closed in CalSAWS effective 03/01/2022.

On 02/03/2025 @ 8:00AM, DER-U#1 Received for MAGI Case 234567891. Saved to CalSAWS as a 'Referral' Type since the CalSAWS case B123456 has been closed for over 90-days.

On 02/05/2025 @ 10:15AM, the user clicks on 'Link to Case' button on the 'Referral'. The auto-link logic will not auto-link the 'Referral' to CalSAWS Case B123456 and will navigate the user to the MAGI Referral Linking flow. This will allow the user to either link to CalSAWS Case B123456 OR to a new/different CalSAWS case.

Example 2:

On 02/15/2022 @11:30AM, CalSAWS Case A123456 linked to MAGI Case 123456789 is closed in CalSAWS effective 03/01/2022.

On 02/03/2025 @ 8:00AM, DER-U#1 Received for MAGI Case 123456789. Saved to CalSAWS as a 'Referral' Type. The User marks the 'Referral' Not Needed.

On 02/04/2025 @ 12:30PM, CalSAWS Case A123456 reapplies the Medi-Cal program and sends an EDR linked to MAGI Case 123456789. CalHEERS returns DER#2.

On 02/05/2025 @ 10:15AM, a user changes the status of the 'Referral' (DER-U#1) back to Received status. The user then clicks on 'Link to Case' button. The auto-link logic will link the 'Referral' to CalSAWS Case A123456 automatically and not navigate the user through the MAGI Referral Linking flow nor allow the user to link the 'Referral' to a new/different CalSAWS case.

2.2.4 Page Location

- **Global: Case Info**
- **Local: e-Tools**
- **Task: MAGI Referral Search**

2.2.5 Security Updates

No Change

2.2.6 Page Mapping

No Change

2.2.7 Accessibility

No Change

2.2.8 Page Usage/Data Volume Impacts

No Change

2.3 MAGI Referral Search Page

2.3.1 Overview

The MAGI Referral Search page has options to filter on Open Medi-Cal to find Determinations received for CalSAWS cases with closed Medi-Cal programs. The page will be updated to include a filter to find CalSAWS cases with closed Medi-Cal Programs in the 90-day cure period.

2.3.2 MAGI Referral Search Page Mockup

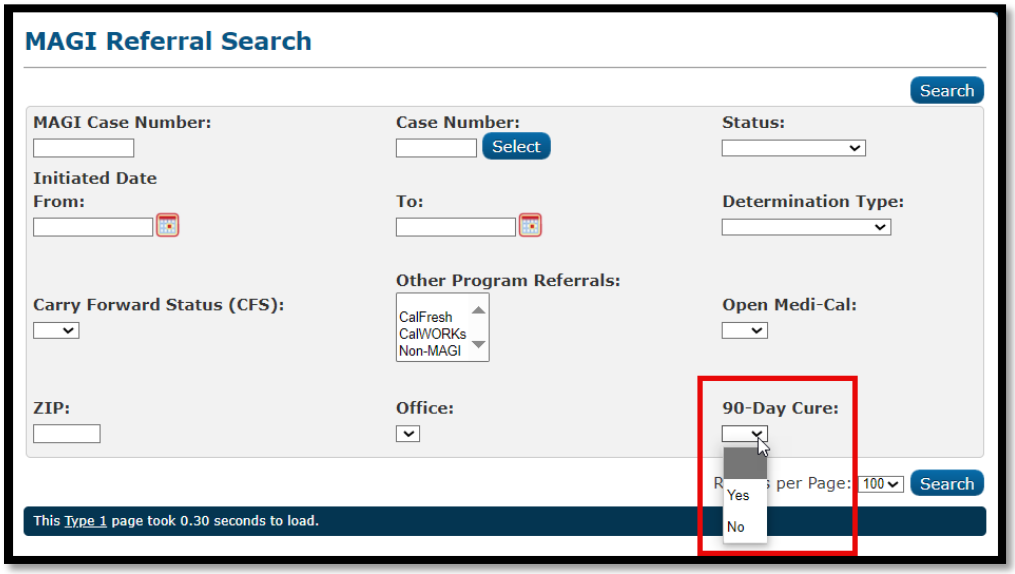


Figure 2.2.1 – MAGI Referral Search Page Mockup

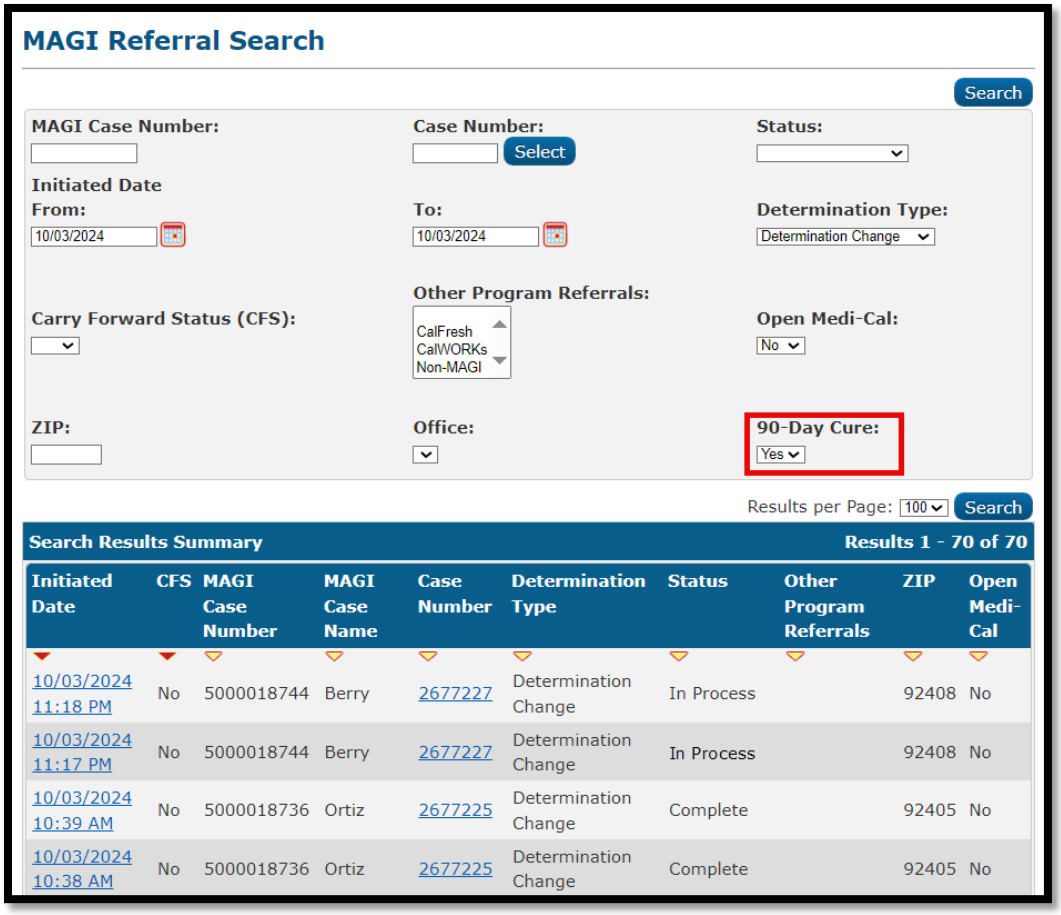


Figure 2.2.2 – MAGI Referral Search Page Mockup with Search Results

2.3.3 Description of Changes

1. Add a new dynamic field named, "90-Day Cure" to the search parameters on the MAGI Referral Search page.
    a. Display the '90-Day Cure' field when the Determination Type selection is either 'Referral' or 'Determination Change'.
    b. Add a drop list to the '90-Day Cure' field with values blank, "Yes" and "No". The default on page load is blank.
        i. When the user selects "Yes" and clicks 'Search', filter the results for CalSAWS cases where all Medi-Cal programs are closed and at least one Medi-Cal program Discontinuance effective date is less than or equal to 90-days from the date the search is performed. This filter is in addition to the rest of the search parameters.

ii. When the user selects "No" and clicks 'Search', filter the results for CalSAWS cases where all Medi-Cal programs are closed and all Medi-Cal program Discontinuance effective dates are greater than 90-days from the date the search is performed. This filter is in addition to the rest of the search parameters.

iii. When the user selects blank (or doesn't make a selection) and clicks 'Search', do not filter the results based on the 90-day cure.

Note: Similar to 'Office' search parameters, the search results will not have a '90-Day Cure' column to indicate if the case is within or outside the 90-day cure.

2.3.4 Page Location

- **Global: Case Info**
- **Local: e-Tools**
- **Task: MAGI Referral Search**

2.3.5 Security Updates

No Change

2.3.6 Page Mapping

Add the new '90-Day Cure' field to Page Mapping

2.3.7 Accessibility

No Change

2.3.8 Page Usage/Data Volume Impacts

No Change

2.4 MAGI Emulator

2.4.1 Overview

The MAGI Emulator will be updated to return a DER-U for the same MAGI Case Number as the EDR to assist with testing and training.

2.4.2 Description of Change

1. Update the MAGI Emulator to return a DER-U with the same MAGI Case Number as the EDR to assist with testing and training. See 'MAGI Emulator Behavior' in Supporting Documents for details.
2. Update the CalSAWS Wiki with the updated MAGI Emulator functionality.

2.5 Automated Regression Test

2.5.1 Overview

Create automated regression test scripts to verify the availability and content of the '90-Day Cure' field on the MAGI Referral Search page.

2.5.2 Description of Change

1. Create a regression script to verify that the '90-Day Cure' field is available on the MAGI Referral Search page, and contains the following values:
    a. Blank
    b. Yes
    c. No

    Technical Note: Performing a search using this field is out of scope due to reliance on data from an interface partner.
2. Create a regression script to verify that a page mapping exists for each applicable field on the MAGI Referral Search page, including the '90-Day Cure' drop list.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	eHIT	Current Design for Inbound eHIT logic for Unsolicited DERs (DER-Us)	Current Design - Case Linkage for Inbo
2	eHIT	Updated Design for Inbound eHIT logic for Unsolicited DERs (DER-Us)	Recommendations - Case Linkage for Inbo
3	eHIT	MAGI Emulator Behavior	MAGI Emulator Behavior.docx

CalSAWS
California Statewide Automated Welfare System

Design Document

CA-228307 - Update EDBC Summary Page Mapping for ABAWD Fields

10/20/2024

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Owner	Satish Kumar
	Preparer	Satish Kumar
	Reviewer	Business Analyst
	Approver	Caroline Bui / Norma Meza

APPROVAL DATE	APPROVED VERSION	REVIEWED AND APPROVED BY

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CA-228307 - Update EDBC Summary Page Mapping for ABAWD Fields

1 OVERVIEW

This SCR identifies the changes required in some of the ABAWD fields in Page Mapping related to the ABAWD Status section in the EDBC Summary page.
Many new additional fields related to ABAWD were added as part of new SCRs and correct descriptions are not available for all the new fields.

1.1 Current Design

SCR CA-207637 added additional ABAWD-related fields to the EDBC Summary Page, including Source, Status Reason, and Work Requirement.

1.2 Requests

There are now multiple versions of the Source and Status Reason fields on the EDBC Summary Page. They are used for different sections of the page, which may be confusing for users.

1.3 Overview of Recommendations

1. ABAWD Status section in the EDBC Summary page has new ABAWD fields that have the similar name with other EDBC field names, that needs to be updated in Page Mapping with more information to improve the readability.
2. Modify and update the Field, Table and Column headers in Page Mapping where needed to display the correct information regarding ABAWD.

1.4 Assumptions

1. No changes will be made to ABAWD functionality.

2 RECOMMENDATIONS

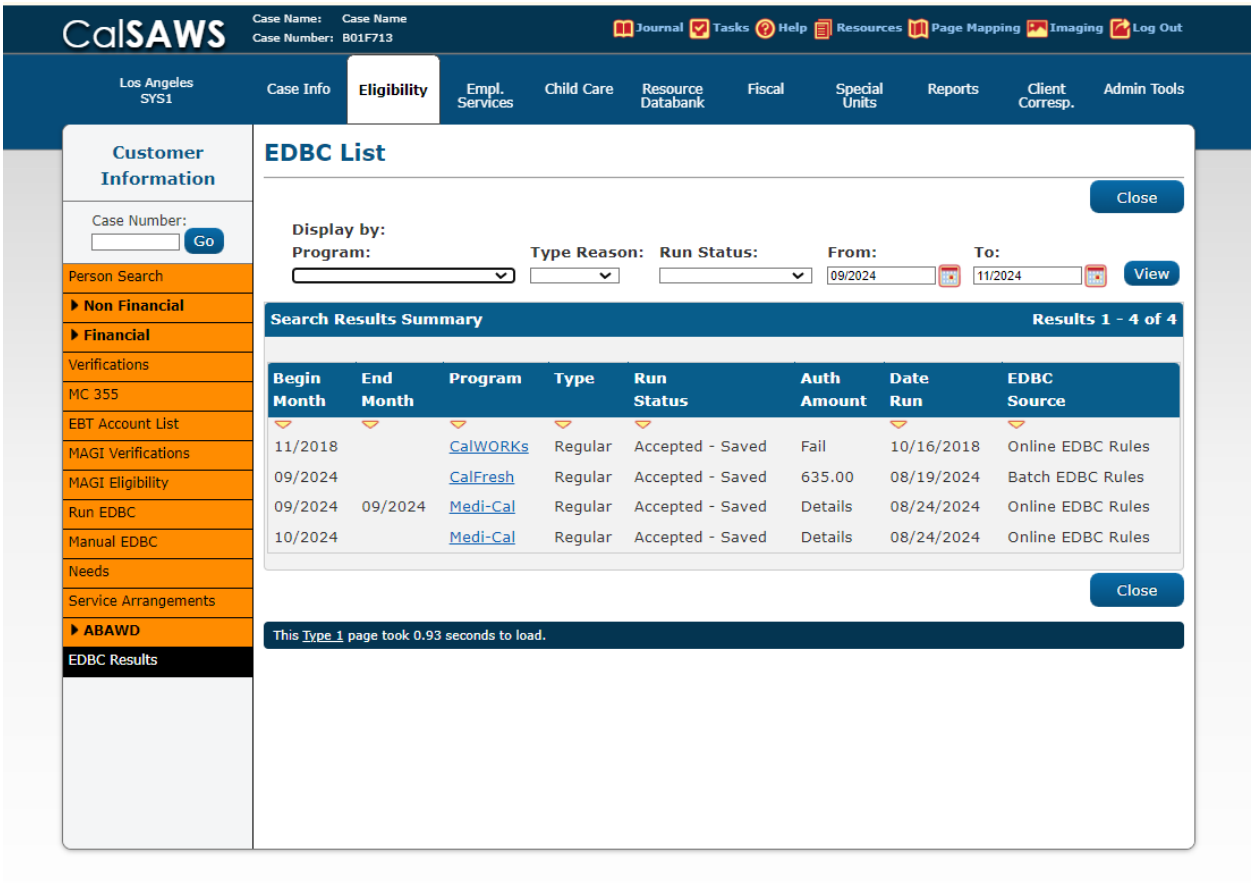
2.1 EDBC Summary Page Mapping Updates

2.1.1 Overview

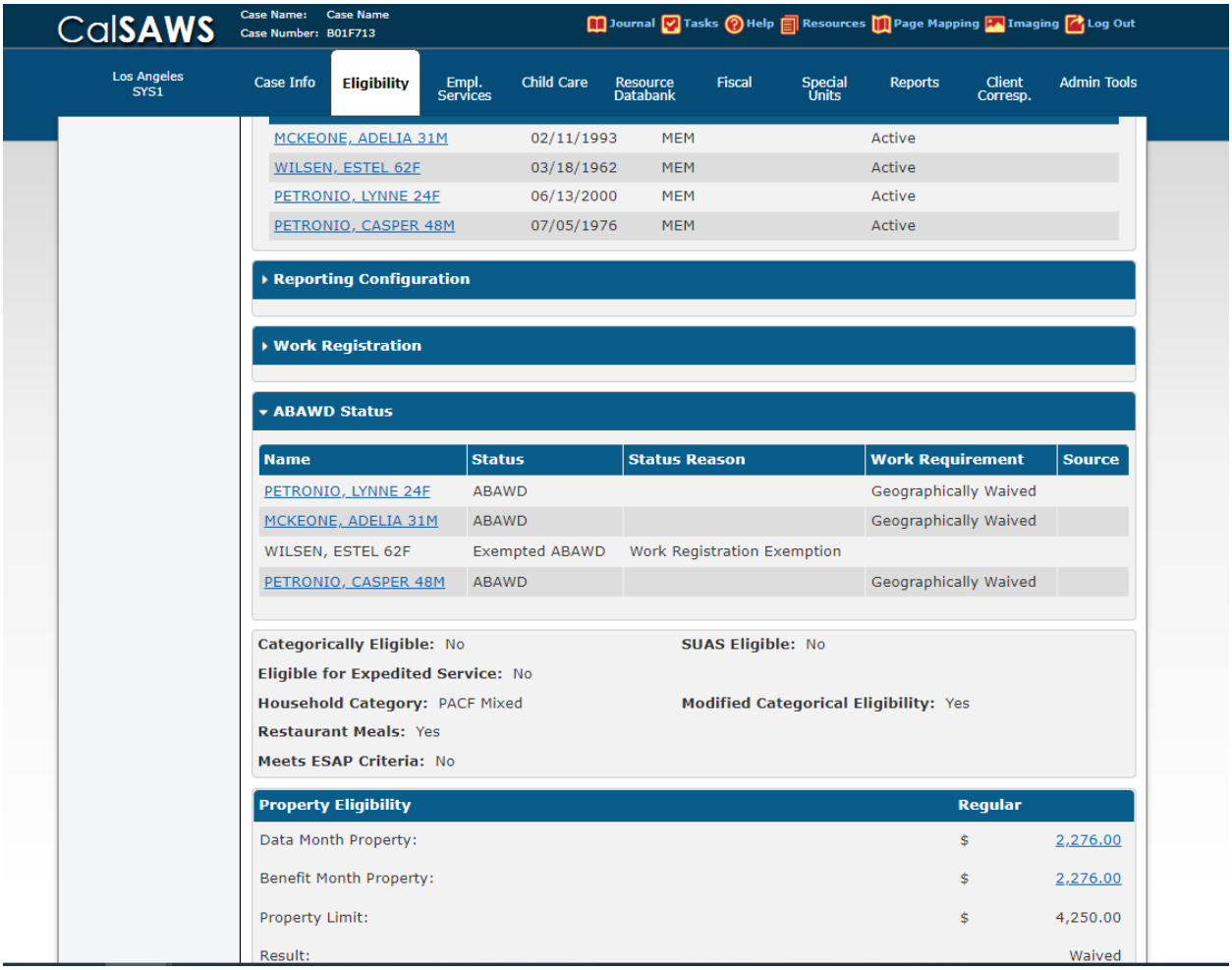
Modify the Page Mapping ABAWD fields in ABAWD Status section in the EDBC Summary page with appropriate information.

2.1.2 EDBC Summary Page Mockup

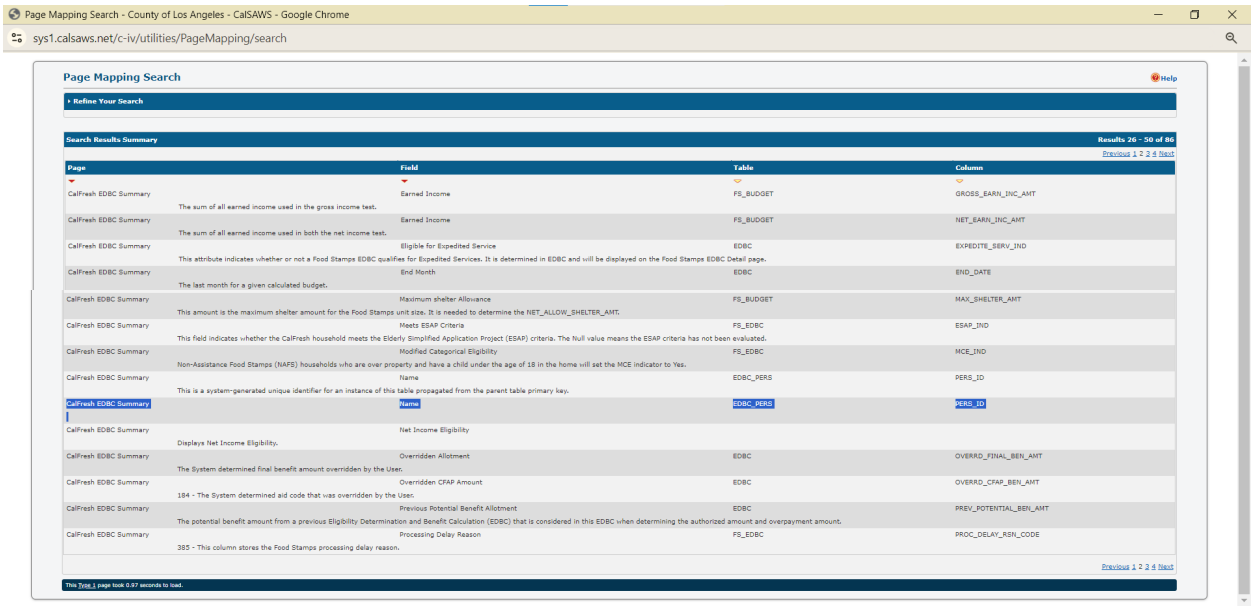
EDBC Results Page:

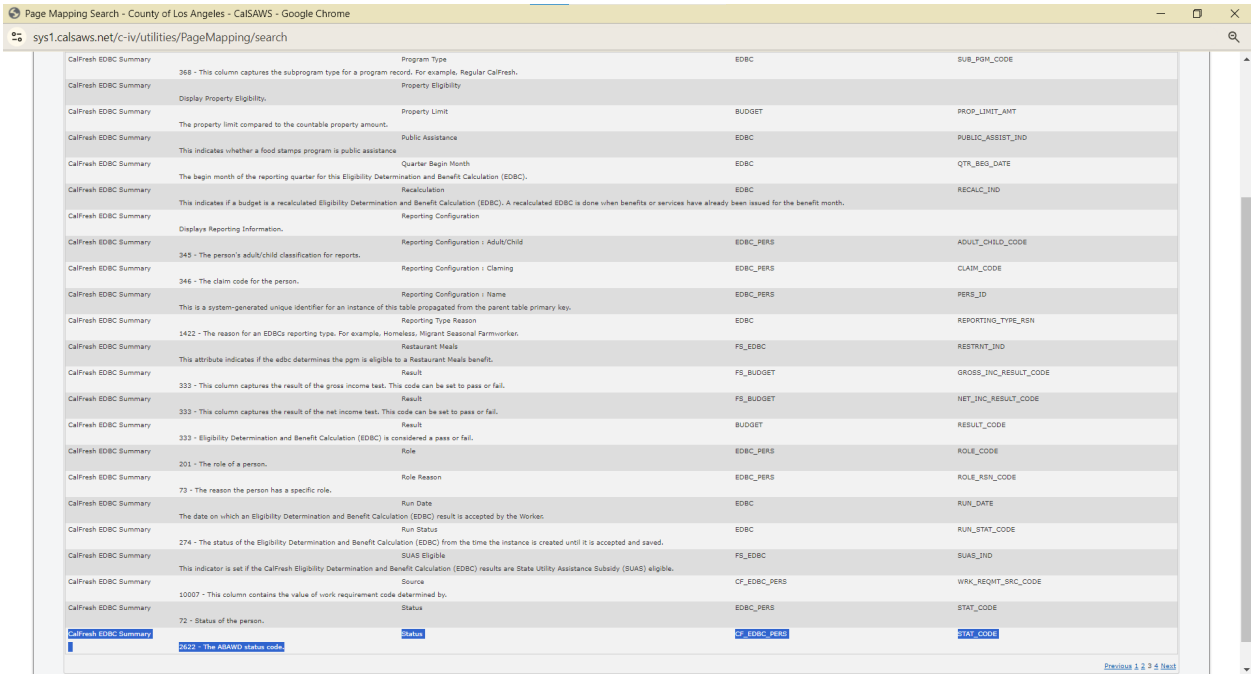


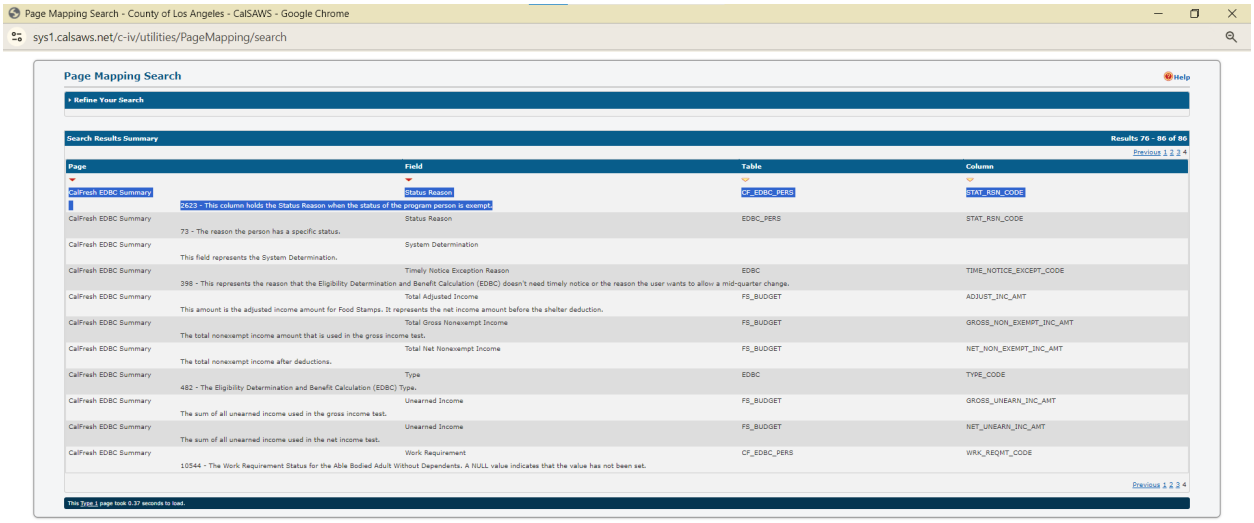
ABAWD Status Section:



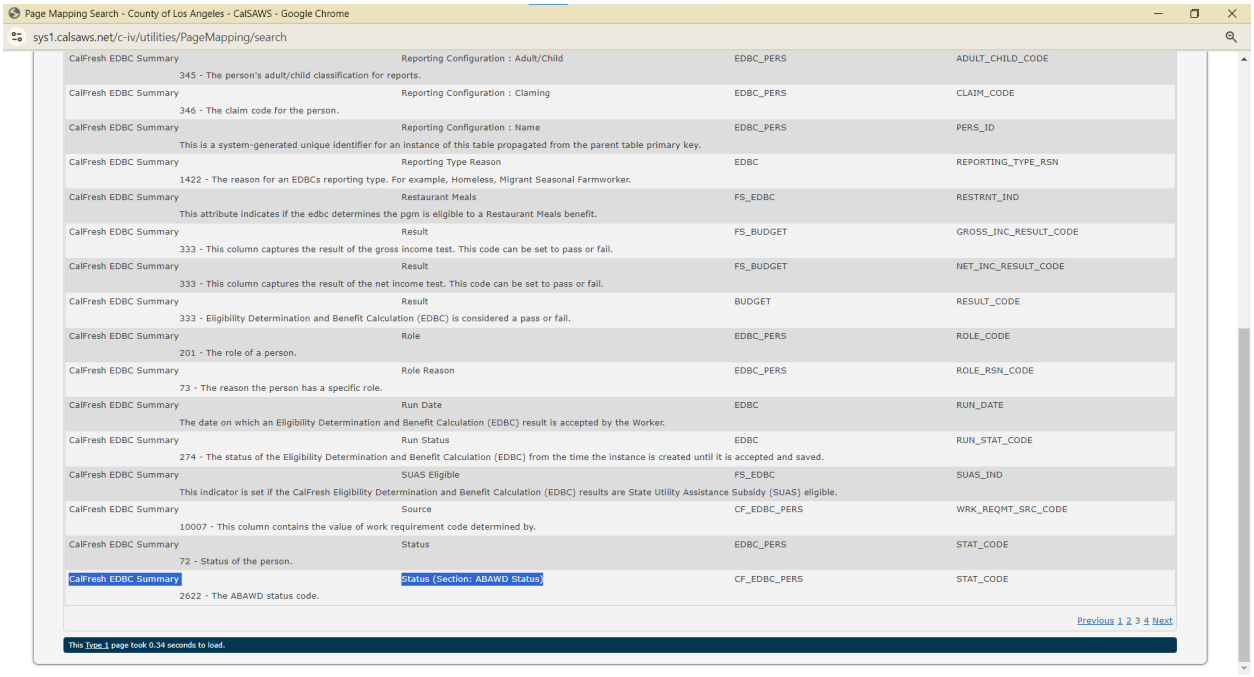
Before fix - Page Mapping in EDBC summary Page for ABAWD fields
All the ABAWD sections fields name has generic description.

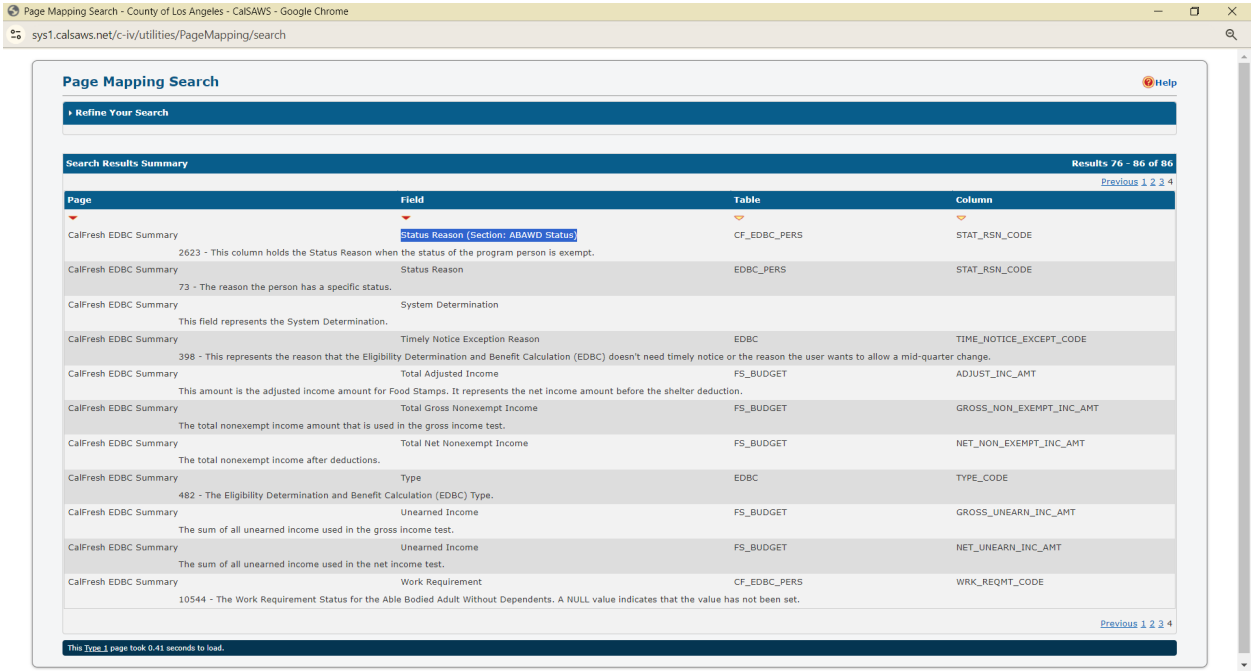


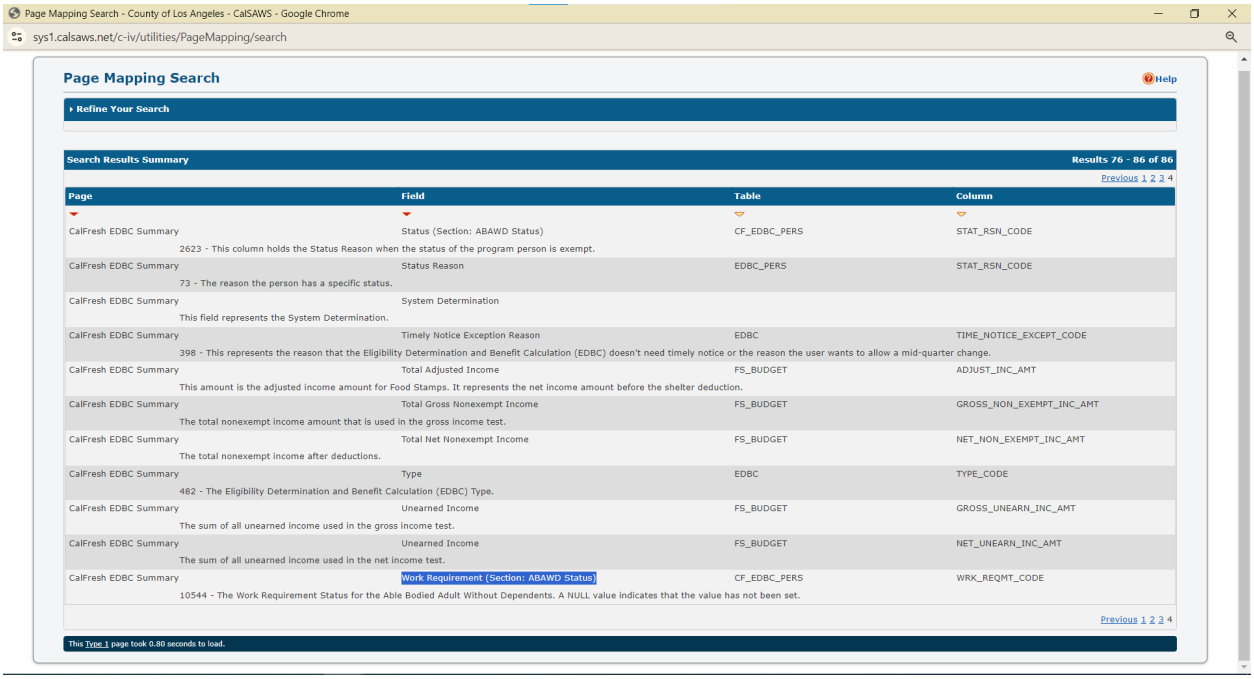




After fix - EDBC Summary Page Mapping , ABAWD fields are having more information as from which section these fields are getting referred.




Page Mapping Search - County of Los Angeles - CalSAWS - Google Chrome
sys1.calsaws.net/c-iv/utilities/PageMapping/search
Page Mapping Search
Help
Refine Your Search
Search Results Summary
Results 76 - 86 of 86
Previous 1 2 3 4
Page
Field
Table
Column
CalFresh EDBC Summary
Status Reason (Section: ABAWD Status)
CF_EDBC_PERS
STAT_RSN_CODE
2623 - This column holds the Status Reason when the status of the program person is exempt.
CalFresh EDBC Summary
Status Reason
EDBC_PERS
STAT_RSN_CODE
73 - The reason the person has a specific status.
CalFresh EDBC Summary
System Determination
This field represents the System Determination.
CalFresh EDBC Summary
Timely Notice Exception Reason
EDBC
TIME_NOTICE_EXCEPT_CODE
398 - This represents the reason that the Eligibility Determination and Benefit Calculation (EDBC) doesn't need timely notice or the reason the user wants to allow a mid-quarter change.
CalFresh EDBC Summary
Total Adjusted Income
FS_BUDGET
ADJUST_INC_AMT
This amount is the adjusted income amount for Food Stamps. It represents the net income amount before the shelter deduction.
CalFresh EDBC Summary
Total Gross Nonexempt Income
FS_BUDGET
GROSS_NON_EXEMPT_INC_AMT
The total nonexempt income amount that is used in the gross income test.
CalFresh EDBC Summary
Total Net Nonexempt Income
FS_BUDGET
NET_NON_EXEMPT_INC_AMT
The total nonexempt income after deductions.
CalFresh EDBC Summary
Type
EDBC
TYPE_CODE
482 - The Eligibility Determination and Benefit Calculation (EDBC) Type.
CalFresh EDBC Summary
Unearned Income
FS_BUDGET
GROSS_UNEARN_INC_AMT
The sum of all unearned income used in the gross income test.
CalFresh EDBC Summary
Unearned Income
FS_BUDGET
NET_UNEARN_INC_AMT
The sum of all unearned income used in the net income test.
CalFresh EDBC Summary
Work Requirement
CF_EDBC_PERS
WRK_REQMT_CODE
10544 - The Work Requirement Status for the Able Bodied Adult Without Dependents. A NULL value indicates that the value has not been set.
Previous 1 2 3 4
This Type 1 page took 0.41 seconds to load.


Page Mapping Search - County of Los Angeles - CalSAWS - Google Chrome
sys1.calsaws.net/c-iv/utilities/PageMapping/search
Page Mapping Search
Help
Refine Your Search
Search Results Summary
Results 76 - 86 of 86
Previous 1 2 3 4
Page
Field
Table
Column
CalFresh EDBC Summary
Status (Section: ABAWD Status)
CF_EDBC_PERS
STAT_RSN_CODE
2623 - This column holds the Status Reason when the status of the program person is exempt.
CalFresh EDBC Summary
Status Reason
EDBC_PERS
STAT_RSN_CODE
73 - The reason the person has a specific status.
CalFresh EDBC Summary
System Determination
This field represents the System Determination.
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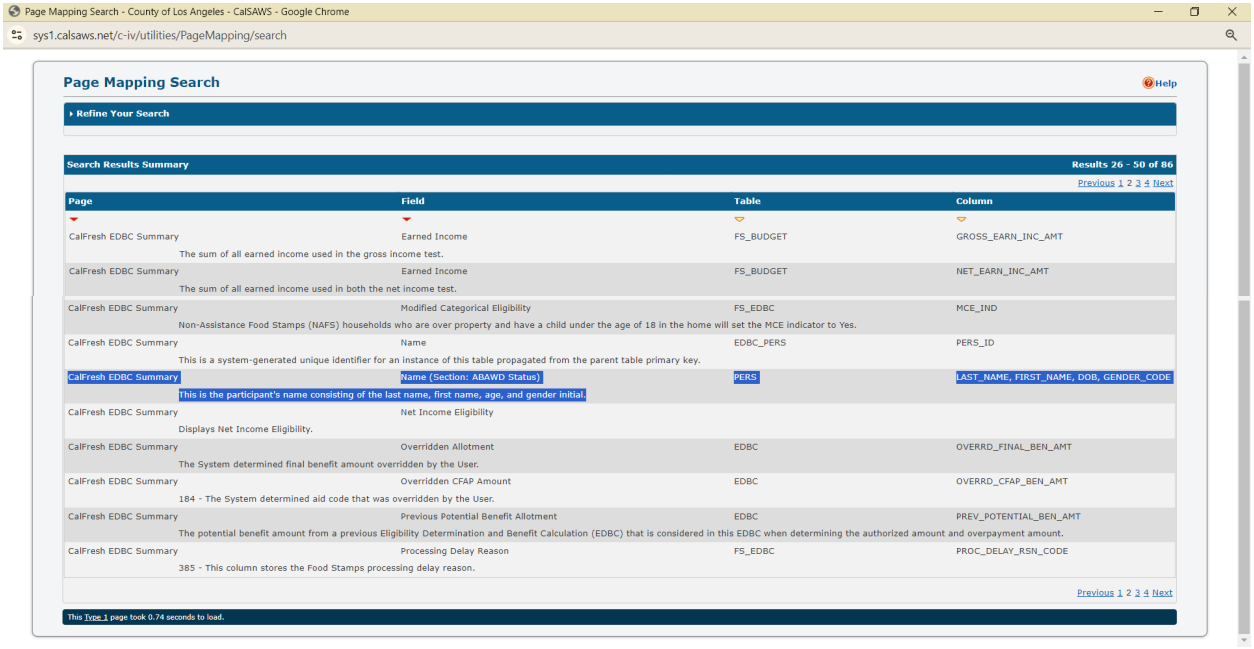
CalFresh EDBC Summary
Total Adjusted Income
FS_BUDGET
ADJUST_INC_AMT
This amount is the adjusted income amount for Food Stamps. It represents the net income amount before the shelter deduction.
CalFresh EDBC Summary
Total Gross Nonexempt Income
FS_BUDGET
GROSS_NON_EXEMPT_INC_AMT
The total nonexempt income amount that is used in the gross income test.
CalFresh EDBC Summary
Total Net Nonexempt Income
FS_BUDGET
NET_NON_EXEMPT_INC_AMT
The total nonexempt income after deductions.
CalFresh EDBC Summary
Type
EDBC
TYPE_CODE
482 - The Eligibility Determination and Benefit Calculation (EDBC) Type.
CalFresh EDBC Summary
Unearned Income
FS_BUDGET
GROSS_UNEARN_INC_AMT
The sum of all unearned income used in the gross income test.
CalFresh EDBC Summary
Unearned Income
FS_BUDGET
NET_UNEARN_INC_AMT
The sum of all unearned income used in the net income test.
CalFresh EDBC Summary
Work Requirement (Section: ABAWD Status)
CF_EDBC_PERS
WRK_REQMT_CODE
10544 - The Work Requirement Status for the Able Bodied Adult Without Dependents. A NULL value indicates that the value has not been set.
Previous 1 2 3 4
This Type 1 page took 0.80 seconds to load.



2.1.3 Description of Changes

1. Modify and update the Field, Table and Column headers with the information as given below in the section 2.1.4 in Page Mapping where needed to display the correct information regarding ABAWD.

2.1.4 Page Location

Global: Eligibility
Local: Customer Information
Task: EDBC Results

2.1.5 Page Mapping

PAGE NAME	ID	FIELD NAME	TABLE NAME	COLUMN NAME	DESCRIPTION
CalFresh EDBC Summary	21847	Name (Section: ABAWD Status)	PERS	LAST_NAME, FIRST_NAME, DOB, GENDER_CODE	This is the participant's name consisting of the last name, first name, age, and gender initial.
CalFresh EDBC Summary	21848	Status (Section: ABAWD Status)	CF_EDBC_PERS	STAT_CODE	2622 - The ABAWD status code.
CalFresh EDBC Summary	21849	Status Reason (Section: ABAWD Status)	CF_EDBC_PERS	STAT_RSN_CODE	2623 - The ABAWD Status Reason Code.
CalFresh EDBC Summary	21846	Work Requirement (Section: ABAWD Status)	CF_EDBC_PERS	WRK_REQMT_CODE	10544 - The Work Requirement Status for the Able-Bodied Adult Without Dependents. A NULL value indicates that the value has not been set.
CalFresh EDBC Summary	24240	Source (Section: ABAWD Status)	CF_EDBC_PERS	WRK_REQMT_SRC_CODE	10007 - This column contains the value of work requirement code determined by user or system.

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	HOW REQUIREMENT MET
6.1.15	The LRS shall include a training records database, which uses or is compatible with the current COUNTY standard, for enrolling trainees, reviewing training records, and tracking training information for the following COUNTY-specified User levels: a. COUNTY training academies; b. Central management; c. Local management; and d. Supervisors of COUNTY staff. - General Training Requirements - 6.1.15	Updated the summary text of the ABAWD page mapping fields on the EDBC Summary Page to more clearly define their purpose and use.

CalSAWS

California Statewide Automated Welfare System

CA-228965

MC NOA Update Craig vs. Bonta Discontinuance NOA generation logic

CalSAWS	DOCUMENT APPROVAL HISTORY		
	Prepared By	Justin Bourbonniere	
	Reviewed By		
DATE	**VERSION**	**REVISION DESCRIPTION**	**AUTHOR**
08/23/2024	1.0	Initial Draft	Justin Bourbonniere
11/14/2024	1.1	Design Updates	Justin Bourbonniere
12/10/2024	1.2	Region 5&6 Feedback Updates	Justin Bourbonniere

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CA-228965 – MC NOA Update Craig vs. Bonta Discontinuance NOA generation logic

1 OVERVIEW

Currently a regular denial notice generates when a Craig vs. Bonta program is denied. Per ACWDL 07-24, a discontinuance notice should be issued as the Craig v. Bonta individual is considered a beneficiary not an applicant. This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied.
This effort will generate a Discontinuance NOA based on Non-MAGI denial reasons related to Craig v. Bonta when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E.

1.1 Current Design

Currently a regular denial notice generates when a Craig vs. Bonta program is denied.

1.2 Requests

1. Update the NOA generation logic to generate a Discontinuance notice instead of a denial notice when a Craig vs Bonta individual is denied.

1.3 Overview of Recommendations

1. Update the Fail for PVS reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
2. Update the Denial: Client's Request reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
3. Update the Written Withdrawal reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
4. Update the Fail App Process reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
5. Update the Deceased reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
6. Update the California Residence reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.

7. Update the FTP Third Party Liability reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
8. Update the Did not Cooperate in Med Supp reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
9. Update the SSI Recipient reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
10. Update the Fail to Cooperate with MC Support reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
11. Update the FTP Elig Forms reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
12. Update the HIC Number Verification reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
13. Update the MC Determination - Failure for Verification reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
14. Update the Fail to Verify: Long term Care INS reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
15. Update the No Individual in AG (Age Group) W/MC Link reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
16. Update the Overlapping Aid reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
17. Update the Whereabouts Unknown reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
18. Update the SSA/SSI Denied reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
19. Update the Did not apply for Medicare reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
20. Update the Did not apply for Work Comp reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.
21. Update the Did not apply for Military Benefits reason generation conditions to send a discontinuance notice instead of a denial when a Craig Vs. Bonta individual is denied.

1.4 Assumptions

1. The changes to the NOA generation condition applies to both Online and Batch EDBC.
2. These NOA discontinuance updates will not change existing generation conditions for scenarios not listed in the design document.
3. Craig vs. Bonta MAGI reasons will be addressed in a future SCR CA-285678.

2 RECOMMENDATIONS

2.1 Update the Fail for PVS reason generation conditions

2.1.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6655.

Reason Fragment Name and ID: MC_DN_FAIL_PAY_VERIF_SYSTEM_M387 (Fragment ID: 6655)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: English, Spanish

Note: This reason is associated with "Form Not Received" Negative Action Dropdown menu option.

2.1.2 NOA Verbiage

There are no updates to this section.

2.1.3 NOA Variable Population

There are no updates to this section.

2.1.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_FAIL_MSP_MISS_PVS_APPOINTMENT_M387 (Fragment ID: 6656) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
Generate this fragment when all of the following is true for a program person.

- They have an active aid code of '1E', '2E' or '6E' on the Other Program Assistance (OPA) Detail page.
  OR
  The case has an additional application source of Craig v Bonta.
- The program person has been denied in the most recently run EDBC.
- There is no prior run and saved EDBC for the program.

OR
There is at least one previously existing Medi-Cal EDBC for the same benefit month and in the most recent saved previously existing Medi-Cal EDBC the program person was not active.

OR
There is at least one previously existing Medi-Cal EDBC for the previous benefit month and in the most recent saved previously existing Medi-Cal EDBC the program person was not active.

2.2 Update the Denial: Client's Request reason generation conditions

2.2.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6512.

Reason Fragment Name and ID: MC_DN_CLIENT_REQ_FOR_DEN_M031 (Fragment ID: 6512)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Requested Disc. – Verbal, Requested Disc. – Written, Requested Disc. - Written inc. MC, and Verbal Withdrawal" Negative Action Dropdown menu options.

2.2.2 NOA Verbiage

There are no updates to this section.

2.2.3 NOA Variable Population

There are no updates to this section.

2.2.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_CLIENT-REQ_TERMINATION_M706 (Fragment ID: 6663) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.3 Update the Written Withdrawal reason generation conditions

2.3.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 10913.

Reason Fragment Name and ID: MC_DN_WRITTEN_WITHDRAWAL_M908 (Fragment ID: 10913)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes

Existing Languages: English, Spanish

Note: This reason is associated with "Written Withdrawal" Negative Action Dropdown menu option.

2.3.2 NOA Verbiage

There are no updates to this section.

2.3.3 NOA Variable Population

There are no updates to this section.

2.3.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_CLIENT-REQ_TERMINATION_M706 (Fragment ID: 6663) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.4 Update the Fail App Process reason generation conditions

2.4.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 10215.

Reason Fragment Name and ID: MC_DN_FAIL_TO_COMPLETE_DETERMINATION (Fragment ID: 10215)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes

Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Failed to Complete Determination" Negative Action Dropdown menu option.

2.4.2 NOA Verbiage

There are no updates to this section.

2.4.3 NOA Variable Population

There are no updates to this section.

2.4.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_FAIL_TO_COMPLETE_DETERMINATION (Fragment ID: 10216) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.5 Update the Deceased reason generation conditions

2.5.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 10918.

Reason Fragment Name and ID: MC_DN_DECEASED_M912 (Fragment ID: 10918)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes

Existing Languages: English, Spanish

Note: This reason is associated with "Deceased" Negative Action Dropdown menu option.

2.5.2 NOA Verbiage

There are no updates to this section.

2.5.3 NOA Variable Population

There are no updates to this section.

2.5.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_INDIV_DESCEASED_M029 (Fragment ID: 6510) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.6 Update the California Residence reason generation conditions

2.6.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 10909.

Reason Fragment Name and ID: MC_DN_NOT_CA_RESIDENT_M905 (Fragment ID: 10909)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes

Existing Languages: English, Spanish

Note: This reason is associated with "Not a California Resident" Negative Action Dropdown menu option.

2.6.2 NOA Verbiage

There are no updates to this section.

2.6.3 NOA Variable Population

There are no updates to this section.

2.6.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_NOT_CA_RESIDENT_M906 (Fragment ID: 10910) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.7 Update the FTP Third Party Liability reason generation conditions

2.7.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 7587.

Reason Fragment Name and ID:
MC_DN_FTP_THIRD_PARTY_LIABILITY_NON_COMP_M421 (Fragment ID: 7587)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes

Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Refused UIB, Refused VA, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused Wkr Cmp, Refused Assign Supp Rights, FTP Name/Identity, Didn't Apply Medicare, FTP Eligibility Forms, Non Co-Op Chld/Med Supp, Refused UIB, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused VA, Refused Wkr Cmp, FTP Third Party Liability, FTP-Married Filing Jointly Spouse Information" Negative Action Dropdown menu options.

2.7.2 NOA Verbiage

There are no updates to this section.

2.7.3 NOA Variable Population

There are no updates to this section.

2.7.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_FTP_THIRD_PARTY_LIABILITY_NON_COMP_M421 (Fragment ID: 7598) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.8 Update the Did not Cooperate in Med Supp reason generation conditions

2.8.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 7590.

Reason Fragment Name and ID: MC_DN_NON_COOP_CHILD_NON_COMP_M424 (Fragment ID: 7590)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Refused UIB, Refused VA, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused Wkr Cmp, Refused Assign Supp Rights, FTP Name/Identity, Didn't Apply Medicare, FTP Eligibility Forms, Non Co-Op Chld/Med Supp, Refused UIB, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused VA, Refused Wkr Cmp, FTP Third Party Liability, FTP-Married Filing Jointly Spouse Information" Negative Action Dropdown menu options.

2.8.2 NOA Verbiage

There are no updates to this section.

2.8.3 NOA Variable Population

There are no updates to this section.

2.8.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_NON_COOP_CHILD_NON_COMP_M424 (Fragment ID: 7601) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.9 Update the SSI Recipient reason generation conditions

2.9.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6505.

Reason Fragment Name and ID: MC_DN_MC_SSI_DEN_NOA_M024 (Fragment ID: 6505)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Gets SSI/SSP" Negative Action Dropdown menu option.

2.9.2 NOA Verbiage

There are no updates to this section.

2.9.3 NOA Variable Population

There are no updates to this section.

2.9.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_SSI_RCPNT_M024 (Fragment ID: 6506) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.10 Update the Fail To Cooperate With MC Support reason generation conditions

2.10.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6620.

Reason Fragment Name and ID: MC_DN_MC_SUPP_COOP_FAIL_M320 (Fragment ID: 6620)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "QC Did not Cooperate (MC)" Negative Action Dropdown menu option.

2.10.2 NOA Verbiage

There are no updates to this section.

2.10.3 NOA Variable Population

There are no updates to this section.

2.10.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_MC_SUPP_COOP_FAIL_M320 (Fragment ID: 6619) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.11 Update the FTP Elig Forms reason generation conditions

2.11.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 7785.

Reason Fragment Name and ID: MC_DN_FTP_ELIG_FORMS_M426 (Fragment ID: 7785)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Refused UIB, Refused VA, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused Wkr Cmp, Refused Assign Supp Rights, FTP Name/Identity, Didn't Apply Medicare, FTP Eligibility Forms, Non Co-Op Chld/Med Supp, Refused UIB, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused VA, Refused Wkr Cmp, FTP Third Party Liability, FTP-Married Filing Jointly Spouse Information" Negative Action Dropdown menu options.

2.11.2 NOA Verbiage

There are no updates to this section.

2.11.3 NOA Variable Population

There are no updates to this section.

2.11.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_FTP_ELIG_FORMS_M426 (Fragment ID: 7786) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No

Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.12 Update the HIC Number Verification reason generation conditions

2.12.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6608.

Reason Fragment Name and ID: MC_DN_HIC_NUM_VERIF_M301 (Fragment ID: 6608)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Failed to Provide HIC Number" Negative Action Dropdown menu option.

2.12.2 NOA Verbiage

There are no updates to this section.

2.12.3 NOA Variable Population

There are no updates to this section.

2.12.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_HIC_NUM_VERIF_M301 (Fragment ID: 6609) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.13 Update the MC Determination - Failure for Verification reason generation conditions

2.13.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6895.

Reason Fragment Name and ID: MC_DN_FAIL_DETER_VERIF_M410 (Fragment ID: 6895)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "SSN Enumeration, Spouse of FTP Property, Child of FTP Property, RFTHI Form Not Received, FTP Other Health Care, Spouse of FTP Income, Child of FTP Income, No Linkage - No Property Verif, FTP Property for NOA, FTP Income for NOA, Referral to sanction" Negative Action Dropdown menu options.

2.13.2 NOA Verbiage

There are no updates to this section.

2.13.3 NOA Variable Population

There are no updates to this section.

2.13.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation

Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_FAIL_VERIF_DETERM_M410 (Fragment ID: 6896) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.14 Update the Fail To Verify: Long term Care INS reason generation conditions

2.14.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6499.

Reason Fragment Name and ID: MC_DN_LONGTERM_CARE_INS_VERIF_FAIL_M011 (Fragment ID: 6499)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Armenian, Cambodian, Chinese, English, Korean, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Failed to verify LTC" Negative Action Dropdown menu option.

2.14.2 NOA Verbiage

There are no updates to this section.

2.14.3 NOA Variable Population

There are no updates to this section.

2.14.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_LONGTERM_CARE_INS_VERIF_FAIL_M011 (Fragment ID: 6498) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.15 Update the No Individual In AG (Age Group) W/MC Link reason generation conditions

2.15.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6621.

Reason Fragment Name and ID: MC_DN_NO_LINKAGE_M325 (Fragment ID: 6621)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "No Linkage to MC" Negative Action Dropdown menu option.

2.15.2 NOA Verbiage

There are no updates to this section.

2.15.3 NOA Variable Population

There are no updates to this section.

2.15.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_PERS_NOT_LNKD_PROG_M028 (Fragment ID: 6509) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.16 Update the Overlapping Aid reason generation conditions

2.16.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6626.

Reason Fragment Name and ID: MC_DN_OVERLAP_AID_M333 (Fragment ID: 6626)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "On Aid Another Case, Gets Duplicate Aid" Negative Action Dropdown menu options.

2.16.2 NOA Verbiage

There are no updates to this section.

2.16.3 NOA Variable Population

There are no updates to this section.

2.16.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_OVERLAP_AID_M333 (Fragment ID: 6627) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.17 Update the Whereabouts Unknown reason generation conditions

2.17.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 6513.

Reason Fragment Name and ID: MC_DN_WHRABTS_UNKNWN_M032 (Fragment ID: 6513)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Whereabouts Unknown" Negative Action Dropdown menu options.

2.17.2 NOA Verbiage

There are no updates to this section.

2.17.3 NOA Variable Population

There are no updates to this section.

2.17.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_WHRABTS_UNKNWN_M032 (Fragment ID: 6514) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.18 Update the SSA/SSI Denied reason generation conditions

2.18.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 10916.

Reason Fragment Name and ID: MC_DN_TN_SSA_SSI_DENIED_M911_EN (Fragment ID: 10916)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: English, Spanish

Note: This reason is associated with "SSA/SSI Denied within 12 Months" Negative Action Dropdown menu options.

2.18.2 NOA Verbiage

There are no updates to this section.

2.18.3 NOA Variable Population

There are no updates to this section.

2.18.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_DN_TN_SSA_SSI_DENIED_M911_EN (Fragment ID: 10917) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.19 Update the Did not apply for Medicare reason generation conditions

2.19.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 7588.

Reason Fragment Name and ID:
MC_DN_DID_NOT_APPLY_MEDICARE_NON_COMP_M422 (Fragment ID: 7588)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese

Note: This reason is associated with "Didn't Apply Medicare" Negative Action Dropdown menu options.

2.19.2 NOA Verbiage

There are no updates to this section.

2.19.3 NOA Variable Population

There are no updates to this section.

2.19.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_DID_NOT_APPLY_MEDICARE_NON_COMP_M422 (Fragment ID: 7599) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.20 Update the Did not apply for Work Comp reason generation conditions

2.20.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 7586.

Reason Fragment Name and ID:
MC_DN_REFUSED_WORKER_COMP_NON_COMP_M420 (Fragment ID: 7586)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: English, Spanish

Note: This reason is associated with "Refused Wkr Cmp" Negative Action Dropdown menu options.

2.20.2 NOA Verbiage

There are no updates to this section.

2.20.3 NOA Variable Population

There are no updates to this section.

2.20.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_REFUSED_WORKER_COMP_NON_COMP_M420 (Fragment ID: 7597) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

2.21 Update the Did not apply for Military Benefits reason generation conditions

2.21.1 Overview

This effort will update the NOA generation logic to send a discontinuance notice instead of a denial notice when a Craig vs. Bonta individual is denied when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month when the Non-MAGI Denial reason is snippet 7581.

Reason Fragment Name and ID:
MC_DN_REFUSED_MILITARY_BENEFITS_NON_COMP_M415 (Fragment ID: 7581)
State Form/NOA: MC 239
Current Program(s): Medi-Cal (Non-MAGI)
Current Action Type: Denial
Current Fragment Level: Person
Currently Repeatable: Yes
Includes NA Back 9: Yes
Existing Languages: English, Spanish

Note: This reason is associated with "Refused UIB, Refused VA, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused Wkr Cmp, Refused Assign Supp Rights, FTP Name/Identity, Didn't Apply Medicare, FTP Eligibility Forms, Non Co-Op Chld/Med Supp, Refused UIB, Refused DIB, Refused Retirement, Refused SDI, Refused Military Ben, Refused VA, Refused Wkr Cmp, FTP Third Party Liability, FTP-Married Filing Jointly Spouse Information" Negative Action Dropdown menu options.

2.21.2 NOA Verbiage

There are no updates to this section.

2.21.3 NOA Variable Population

There are no updates to this section.

2.21.4 NOA Generation Conditions

Update Medi-Cal Denial Fragment Generation
Update the NOA logic to generate the Medi-Cal Discontinuance Fragment MC_TN_REFUSED_MILITARY_BENEFITS_NON_COMP_M415 (Fragment ID: 7592) when the program or person is denied and any person has an Other Program Assistance (OPA) record with aid codes 1E, 2E or 6E in the previous month.

New Program Generation: No
New Action Type: No
Update to Fragment Level: No
Ordering on NOA: There is no change to current functionality.

Generation Conditions
See section 2.1.4 generation conditions.

3 SUPPORTING DOCUMENTS

NUMBER	FUNCTIONAL AREA	DESCRIPTION	ATTACHMENT

4 REQUIREMENTS

REQ #	REQUIREMENT TEXT	HOW REQUIREMENT MET
2.18.3.3	The LRS/CalSAWS shall produce various notices, NOAs, forms, letters, stuffers, and flyers, including: … b. Redetermination, Recertification, and/or Annual Agreement notices and forms; … n. COLA notices;	Update Form Generation for Craig Vs. Bonta cases (OPA aide codes 1E, 2E and 6E).

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-247990

FC/KG – Allow Funeral Costs Payment Requests to be issuable to RDB Resources

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Romel Acosta
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
9/9/2024	1.0	Initial Draft	Romel Acosta
10/29/2024	1.1	Add assumption to clarify that Money Management Resources should not be used to issue Funeral Costs benefits.	Romel Acosta

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1 OVERVIEW

1.1 Current Design

Currently in CalSAWS to issue Funeral Costs to a vendor, the vendor must be added to the Foster Care Resource Data Bank as a provider to avoid the 'Vendor is Suspended' skip reason. By doing so counties are unable to 1099 the vendor since 1099 can only apply to RDB Resources and not FC RDB Resources.

For added context to the above, Funeral Costs payments must be issued to an FC RDB resource to avoid the 'Vendor is Suspended' skip reason because any FC/KG payment issued to a provider needs the Vendor/Provider to be approved for county use and not be Suspended. The Suspended field is only shown for FC RDB Resources and not for RDB Resources on the Approved for County Use List page, thus the field cannot be set by users for RDB Resources. Because of this, the system effectively sees the Suspended field as empty for RDB Resources, leading to it skipping Funeral Costs benefits for RDB Resources for the 'Vendor is Suspended' reason.

1.2 Requests

Update CalSAWS to allow FC/KG Funeral Costs payments issued via Service Arrangements to an RDB Resource with these payments not skipping for the reason 'Vendor is Suspended'.

With this update, users will no longer be required to create FC Resources to issue Funeral Costs Service Arrangement payments for FC/KG programs. Also, these FC/KG Funeral Costs payments will be 1099 reportable going forward since they will be issuable to a RDB Resource.

1.3 Overview of Recommendations

Update system functionality to not consider the Vendor Suspended requirement when FC programs, FC or KG, issue a Funeral Costs payment to a RDB Resource.

1.4 Assumptions

1. Effective this SCR, all Funeral Costs Service Arrangements are expected to be issued to RDB Resources. The system will still allow user to issue Funeral Costs benefits to FC RDB Resources, but it is advised that these payments should not be made since 1099 does not apply to FC RDB Resources.
2. Money Management Resources are not included under RDB Resources and are considered their own category of Resource. As such, the Vendor Suspension Skip Issuance Validation will still apply for Money Management Resources. Due to this, it is advised to not try to issue Funeral Costs benefits to Money Management Resources.

3. Only Funeral Costs Service Arrangements will be affected by this SCR. Any other FC/KG Service Arrangements for FC RDB Resources will still require the Vendor to be approved for county use and not be Suspended.
4. All Funeral Costs Service Arrangements will be issued as warrants.
5. 1099 does not apply for payments towards FC RDB Resources, but it can apply for payments towards RDB Resources.
6. LA will follow their existing business processes to issue Funeral Costs outside of CalSAWS. As such, their county-specific skip issuance eCAPS vendor established and CMS/CWS Vendor Number validations will not be affected. If LA chooses to start issuing Funeral Costs via CalSAWS in the future, they will need to request future system enhancements to allow this.

2 RECOMMENDATIONS

2.1 Issuance Batch

2.1.1 Overview

Issuance Batch is responsible for creating an Issuance record for each authorization that is subject to be paid on a Monthly/Nightly basis. It is also responsible for Skipping Issuances if they do not pass certain validations.

2.1.2 Description of Changes

1. Update the Skip Issuance logic to bypass the Vendor Suspension Validation for a Service Arrangement if it passes the below criteria:
    a. The Need Category is Foster Care/Kin-GAP Services
    b. The Need Type is Funeral Costs
    c. The Program Type is FC or KG
    d. The Payee is a Provider and said Provider is an RDB Resource
        i. Do not bypass the Vendor Suspension Validation for any Resource that is not a regular RDB Resource, i.e. FC RDB Resources and Money Management Resources.

2.1.3 Execution Frequency

No changes.

2.1.4 Key Scheduling Dependencies

No changes.

2.1.5 Counties Impacted

All counties.

2.1.6 Data Volume/Performance

No changes.

2.1.7 Failure Procedure/Operational Instructions

No changes

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.1.1.11	The LRS shall automatically trigger batch processing and/or authorize the action when individual or case information is entered through online, interface, or batch processes.	Update Issuance batch to bypass Vendor Suspension validation for Funeral Costs, FC/KG Service Arrangements with RDB Resource payees.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-249474

Add Time Limit NOA in threshold languages

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CalSAWS	DOCUMENT APPROVAL HISTORY	
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1 OVERVIEW

The purpose of this change is to Add Time Limit NOA fragments in additional threshold languages for CalWORKs program.

1.1 Current Design

Currently, the time on Aid NOAs M40-107A, M40-107B, M40-107F1, M40-107F2, M40-107G, M40-107J, M40-107J1, M40-107K are available in English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi, Hmong Languages, and M40-107F is available in English, Spanish, Chinese, Vietnamese, Cambodian, Arabic, Armenian, Korean, Lao, Farsi, Hmong Languages in CalSAWS.

1.2 Requests

1. Add Threshold languages to M40-107A with NOA code A422A
   (Snippet ID - 9588)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
2. Add Threshold languages to M40-107B with NOA code A416I
   (Snippet ID - 9582)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
3. Add Threshold languages to M40-107F with NOA Code A415I
   (Snippet ID 9581)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian, Russian and Mien.
4. Add Threshold languages to M40-107F1 with NOA Code A419C
   (Snippet ID - 9585)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
5. Add Threshold languages to M40-107F2 with NOA code A418C
   (Snippet ID - 9584)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
6. Add Threshold languages to M40-107G with NOA code A414C
   (Snippet ID - 9580)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
7. Add Threshold languages to M40-107J with NOA code A417A
   (Snippet ID - 9583).
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
8. Add Threshold languages to M40-107J1 with NOA code A426A
   (Snippet ID - 9599)
   Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
9. Add Threshold languages to M40-107J1with NOA code A421A
   (Snippet ID - 9587)
   Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
10. Add Threshold languages to M40-107J1 with NOA code A424A
    (Snippet ID - 9597)
    Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.

11. Add Threshold languages to M40-107J1 with NOA code A423A (Snippet ID - 9596)
    Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
12. Add Threshold languages to M40-107J1 with NOA code A425A (Snippet ID - 9598)
    Languages Include: Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mein, Punjabi, Russian, Tagalog, Ukrainian and Vietnamese.
13. Add Threshold languages to M40-107K with NOA code A420C (Snippet ID - 9586)
    Languages Include: Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mein, Punjabi, Russian, Tagalog, Thai, Ukrainian and Vietnamese.
14. Add Threshold languages to Action Fragment (Snippet ID – 4072)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
15. Add Threshold languages to Action Fragment (Snippet ID - 4154)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
16. Add Threshold languages to Action Fragment (Snippet ID - 4076)
    Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
17. Add Threshold languages to Action Fragment (Snippet ID - 4032)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
18. Add Threshold languages to Message Fragment (Snippet ID 5133)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
19. Add Threshold languages to Budget Fragment (Snippet ID 1289)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
20. Add Threshold languages to NOA_TYPE (Snippet ID 3175)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
21. Add Threshold languages to NOA_TYPE (Snippet ID 3171)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
22. Add Threshold languages to NOA_TYPE (Snippet ID 3170)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
23. Add Threshold languages to NOA_TEMPLATE (Snippet ID 3044)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.

1.3 Overview of Recommendations

1. Add Threshold languages to M40-107A with NOA code A422A (Snippet ID - 9588)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
2. Add Threshold languages to M40-107B with NOA code A416I (Snippet ID - 9582)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
3. Add Threshold languages to M40-107F with NOA Code A415I (Snippet ID 9581)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian, Russian and Mien.
4. Add Threshold languages to M40-107F1 with NOA Code A419C (Snippet ID - 9585)

Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.

5. Add Threshold languages to M40-107F2 with NOA code A418C (Snippet ID - 9584)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
6. Add Threshold languages to M40-107G with NOA code A414C (Snippet ID - 9580)
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
7. Add Threshold languages to M40-107J with NOA code A417A (Snippet ID - 9583).
   Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
8. Add Threshold languages to M40-107J1 with NOA code A426A (Snippet ID - 9599)
   Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
9. Add Threshold languages to M40-107J1with NOA code A421A (Snippet ID - 9587)
   Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
10. Add Threshold languages to M40-107J1 with NOA code A424A (Snippet ID - 9597)
    Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
11. Add Threshold languages to M40-107J1 with NOA code A423A (Snippet ID - 9596)
    Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
12. Add Threshold languages to M40-107J1 with NOA code A425A (Snippet ID - 9598)
    Languages Include: Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mein, Punjabi, Russian, Tagalog, Ukrainian and Vietnamese.
13. Add Threshold languages to M40-107K with NOA code A420C (Snippet ID - 9586)
    Languages Include: Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mein, Punjabi, Russian, Tagalog, Thai, Ukrainian and Vietnamese.
14. Add Threshold languages to Action Fragment (Snippet ID – 4072)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
15. Add Threshold languages to Action Fragment (Snippet ID - 4154)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
16. Add Threshold languages to Action Fragment (Snippet ID - 4076)
    Languages Include: Hindi, Punjabi, Japanese, Ukrainian and Mien.
17. Add Threshold languages to Action Fragment (Snippet ID - 4032)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
18. Add Threshold languages to Message Fragment (Snippet ID 5133)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
19. Add Threshold languages to Budget Fragment (Snippet ID 1289)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
20. Add Threshold languages to NOA_TYPE (Snippet ID 3175)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
21. Add Threshold languages to NOA_TYPE (Snippet ID 3171)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.

22. Add Threshold languages to NOA_TYPE (Snippet ID 3170)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.
23. Add Threshold languages to NOA_TEMPLATE (Snippet ID 3044)
    Languages Include: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.

1.4 Assumptions

1. The triggering conditions of the NOA Fragments for Threshold Generation remain the same and are not being updated.
2. The NOA template remains the same and is not being updated.
3. The existing variable population is not being updated with this effort.
4. Supporting Documents section references attachments found on Jira.

2 RECOMMENDATIONS

2.1 Add Threshold languages to M40-107A with NOA code A422A.

2.1.1 Overview

This effort will add additional threshold languages to M40-107A with NOA code A422A.

Reason Fragment Name and ID:
CW_AP_IN_TL_60_REDETERM_EXEMPTS_AND_CS_A422
(Fragment ID: 9588)
State Form/NOA: NA 530/M40-107A
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog and Vietnamese.

2.1.2 Form/NOA Verbiage

Add M40-107A NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.

NOA Mockups/Examples: Supporting Documents #1

2.1.3 Form/NOA Variable Population

No updates to variable population.

2.1.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.2 Add Threshold languages to M40-107B with NOA code A416I.

2.2.1 Overview

This effort will add additional threshold languages to M40-107B with NOA code A4161.

Reason Fragment Name and ID:
CW_IN_TL_60_REDETERM_EXEMPTS_AND_CS_A416
(Fragment ID: 9582)
State Form/NOA: NA 530/M40-107B
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Informational
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog and Vietnamese.

2.2.2 Form/NOA Verbiage

Add M40-107B NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Punjabi, Thai, Japanese, Ukrainian and Mien.

NOA Mockups/Examples: Supporting Documents #1

2.2.3 Form/NOA Variable Population

No updates to variable population.

2.2.4 Form/NOA Generation Conditions

No updates to existing trigger conditions

2.3 Add Threshold Languages to M40-107F with NOA code A415I.

2.3.1 Overview

This effort will add additional threshold languages to M40-107F with NOA code A415I to CalSAWS.

Reason Fragment Name and ID: CW_IN_TL_60_EXTENDED_EXEMPTS_CS_A415(Snippet ID: 9581)
State Form/NOA: NA 530/M40-107F
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Current Fragment Level: Program
Currently Repeatable: No
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)

Existing Languages: English, Spanish, Chinese, Vietnamese, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.3.2 Form/NOA Verbiage

Add MC NA 530/M40-107F NOA fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi, Russian and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.3.3 Form/NOA Variable Population

No updates to Form/NOA Generation Conditions.

2.3.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.4 Add Threshold Languages to M40-107F1 with NOA Code A419C.

2.4.1 Overview

This effort will add additional threshold languages to M40-107F1 with NOA code A419C to CalSAWS.

Reason Fragment Name and ID: CW_CH_TL_60_EXTEND_TIME_OUT_PARTICIPANT_A419 (Snippet ID: 9585)
State Form/NOA: NA 530/M40-107F1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Current Fragment Level: Program
Currently Repeatable: No
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi, Hmong.

2.4.2 Form/NOA Verbiage

Add MC NA 530/M40-107F1 NOA fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.4.3 Form/NOA Variable Population

No updates to Form/NOA Generation Conditions.

2.4.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.5 Add Threshold Language to M40-107F2 with NOA code A418C.

2.5.1 Overview

This effort will add additional threshold languages to M40-107F2 with NOA code A418C in CalSAWS.

Reason Fragment Name and ID:
CW_CH_TL_60_EXTENDER_END_EXEMPTS_NO_CS_A418 (Fragment ID: 9584)
State Form/NOA: NA 530/M40-107F2
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Change
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: Armenian, Arabic, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog and Vietnamese.

2.5.2 Form/NOA Verbiage

Add M40-107F2 reason fragments in threshold languages.

Add Threshold languages: Hindi, Japanese, Mien, Punjabi, Thai and Ukrainian.

NOA Mockups/Examples: Supporting Documents #1

2.5.3 Form/NOA Variable Population

No updates to the population logic.

2.5.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.6 Add Threshold languages to M40-107G with reason code A414C.

2.6.1 Overview

This effort will add additional threshold languages to M40-107G with NOA code A414C.

Reason Fragment Name and ID:
CW_CH_TL_60_GRANT_REDUCED_EXEMPTS_CS_A414
(Fragment ID: 9580)
State Form/NOA: NA 530/M40-107G
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Change
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: Armenian, Arabic, Cambodian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog and Vietnamese.

2.6.2 Form/NOA Verbiage

Add M40-107G NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Punjabi, Ukrainian, Mien, Japanese and Thai.

NOA Mockups/Examples: Supporting Documents #1

2.6.3 Form/NOA Variable Population

No updates to variable population.

2.6.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.7 Add Threshold languages to M40-107J with NOA Code A417A.

2.7.1 Overview

This effort will add additional threshold languages to M40-107J with NOA Code A417A.

Reason Fragment Name and ID: CW_AP_TL_60_PA_EXEMPTS_CS_A417
(Fragment ID: 9583)

State Form/NOA: NA 530/M40-107J
Current NOA Template: CW_NOA_TEMPLATE (ID: 3026)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog and Vietnamese.

2.7.2 Form/NOA Verbiage

Add M40-107J NOA fragments in available Threshold languages.

Add Threshold languages: Hindi, Japanese, Mien, Punjabi, Thai and Ukrainian.

NOA Mockups/Examples: Supporting Documents #1

2.7.3 Form/NOA Variable Population

No updates to variable population.

2.7.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.8 Add Threshold languages to M40-107J1 with NOA Code A426A.

2.8.1 Overview

This effort will add additional threshold languages to M40-107J1 with NOA Code A426A.

Reason Fragment Name and ID:
CW_AP_TL_REPAID_OVERPAY_PRORATE_AP_AFTER_60_A426
(Fragment ID: 9599)
State Form/NOA: NA 530/M40-107J1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog and Vietnamese.

2.8.2 Form/NOA Verbiage

Add M40-107J1 NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Japanese, Mien, Punjabi and Ukrainian.

NOA Mockups/Examples: Supporting Documents #1

2.8.3 Form/NOA Variable Population

No updates to variable population.

2.8.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.9 Add Threshold languages to M40-107J1 with NOA Code A421A.

2.9.1 Overview

This effort will add additional threshold languages to M40-107J1 with NOA Code A421A.

Reason Fragment Name and ID:
CW_AP_TL_60_PARTICIPANT_MET_CONDITION_A421
(Fragment ID: 9587)
State Form/NOA: NA 530/M40-107J1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog, and Vietnamese.

2.9.2 Form/NOA Verbiage

Add M40-107J1 NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Japanese, Mien, Punjabi and Ukrainian.

NOA Mockups/Examples: Supporting Documents #1

2.9.3 Form/NOA Variable Population

No updates to variable population.

2.9.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.10 Add Threshold languages to M40-107J1 with NOA Code A424A.

2.10.1 Overview

This effort will add additional threshold languages to M40-107J1 with NOA Code A424A.

Reason Fragment Name and ID:
CW_AP_TL_60_OVERPAY_REPAID_APPROVED_A424
(Fragment ID: 9597)
State Form/NOA: NA 530/M40-107J1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog, and Vietnamese.

2.10.2 Form/NOA Verbiage

Add M40-107J1 NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Japanese, Mien, Punjabi and Ukrainian.

NOA Mockups/Examples: Supporting Documents #1

2.10.3 Form/NOA Variable Population

No updates to variable population.

2.10.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.11 Add Threshold languages to M40-107J1 with NOA Code A423A.

2.11.1 Overview

This effort will add additional threshold languages to M40-107J1 with NOA Code A423A.

Reason Fragment Name and ID: CW_AP_TL_60_CS_REPAID_A423 (Fragment ID: 9596)
State Form/NOA: NA 530/M40-107J1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English, Spanish, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Tagalog and Vietnamese.

2.11.2 Form/NOA Verbiage

Add M40-107J1 NOA fragments in Threshold languages.

Add Threshold languages: Hindi, Japanese, Mien, Punjabi and Ukrainian.

NOA Mockups/Examples: Supporting Documents #1

2.11.3 Form/NOA Variable Population

No updates to variable population.

2.11.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.12 Add Threshold languages to M40-107J1 with NOA Code A425A.

2.12.1 Overview

This effort will add additional threshold languages to M40-107J1 with NOA Code A425A.

Reason Fragment Name and ID:
CW_AP_TL_REPAID_CS_PRORATE_APPROV_AFTER_60_A425 (Fragment ID: 9598)
State Form/NOA: NA 530/M40-107J1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Approval
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (1/24)
Existing Languages: English and Spanish

2.12.2 Form/NOA Verbiage

Add M40-107J1 NOA fragments in Threshold languages.

Add Threshold languages: Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Hindi, Japanese, Korean, Lao, Mien, Punjabi, Russian, Tagalog, Ukrainian and Vietnamese.

NOA Mockups/Examples: Supporting Documents #1

2.12.3 Form/NOA Variable Population

No updates to variable population.

2.12.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.13 Add Threshold languages to M40-107K with NOA code A420C.

2.13.1 Overview

This effort will add additional threshold languages to M40-107K with NOA code A420C.

Reason Fragment Name and ID:
CW_CH_TL_60_EXEMPT_CS_OVRPAY_INCR_GRANT_A420 (ID: 9586)
State Form/NOA: NA 530/M40-107K
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Action Type: Change
Current Fragment Level: Program
Currently Repeatable: No
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: CW 2184 (04/2021)
Existing Languages: English and Spanish.

2.13.2 Form/NOA Verbiage

Add M40-107K NOA fragments in Threshold languages.

Add Threshold languages: Arabic, Armenian, Cambodian, Chinese, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mein, Punjabi, Russian, Tagalog, Thai, Ukrainian and Vietnamese.

NOA Mockups/Examples: Supporting Documents #1

2.13.3 Form/NOA Variable Population

No updates to variable population.

2.13.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.14 Add Threshold Languages to Action Fragment (Snippet ID: 4072)

2.14.1 Overview

This effort will add additional threshold languages to Action Fragment (Snippet ID: 4072).

Action Fragment Name and ID: CW_CH_ACTION6 (ID: 4072)
State Form/NOA: NA 530/M40-107F1, NA 530/M40-107F2
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.14.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.14.3 Form/NOA Variable Population

No updates to variable population.

2.14.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.15 Add Threshold Languages to Action Fragment (Snippet ID: 4154)

2.15.1 Overview

This effort will add additional threshold languages to Action Fragment (Snippet ID: 4154).

Action Fragment Name and ID: CW_AP_ACTION11 (ID: 4154)
State Form/NOA: NA 530/M40-107J
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.15.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.15.3 Form/NOA Variable Population

No updates to variable population.

2.15.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.16 Add Threshold Languages to Action Fragment (Snippet ID: 4076)

2.16.1 Overview

This effort will add additional threshold languages to Action Fragment (Snippet ID: 4076).

Action Fragment Name and ID: CW_AP_ACTION7 (ID: 4076)
State Form/NOA: NA 530/M40-107J1
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.16.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.16.3 Form/NOA Variable Population

No updates to variable population.

2.16.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.17 Add Threshold Languages to Action Fragment (Snippet ID: 4032)

2.17.1 Overview

This effort will add additional threshold languages to Action Fragment (Snippet ID: 4032).

Action Fragment Name and ID: CW_CH_ACTION1 (ID: 4032)
State Form/NOA: NA 530/M40-107K
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.17.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.17.3 Form/NOA Variable Population

No updates to variable population.

2.17.4 Form/NOA Generation Conditions

No updates to existing trigger conditions

2.18 Add Threshold Languages to Message Fragment (Snippet ID: 5133)

2.18.1 Overview

This effort will add additional threshold languages to Message Fragment (Snippet ID: 5133).

Message Fragment Name and ID: CW_AP_DN_CH_TN_MESSAGE2 (ID: 5133)
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.18.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #2

2.18.3 Form/NOA Variable Population

No updates to variable population.

2.18.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.19 Add Threshold Languages to Budget Fragment (Snippet ID: 1289)

2.19.1 Overview

This effort will add additional threshold languages to Budget Fragment (Snippet ID: 1289).

Budget Fragment Name and ID: BUDGT_CW_APPROVAL_SAR (ID: 1289)
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.19.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #3

2.19.3 Form/NOA Variable Population

No updates to variable population.

2.19.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.20 Add Threshold Languages to NOA TYPE (Snippet ID: 3175)

2.20.1 Overview

This effort will add additional threshold languages to NOA TYPE (Snippet ID: 3175).

Fragment Name and ID: CW_NC_TL_60_NOA_TYPE (ID: 3175)
State Form/NOA: NA 530/M40-107F
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.20.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.20.3 Form/NOA Variable Population

No updates to Form/NOA Generation Conditions.

2.20.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.21 Add Threshold Languages to NOA TYPE (Snippet ID: 3171)

2.21.1 Overview

This effort will add additional threshold languages to NOA TYPE (Snippet ID: 3171).

Fragment Name and ID: CW_CH_TL_60_NOA_TYPE (ID: 3171)
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.21.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.21.3 Form/NOA Variable Population

No updates to Form/NOA Generation Conditions.

2.21.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

2.22 Add Threshold Languages to NOA TYPE (Snippet ID: 3170)

2.22.1 Overview

This effort will add additional threshold languages to NOA TYPE (Snippet ID: 3170).

Fragment Name and ID: CW_AP_TL_60_NOA_TYPE (ID: 3170)
Current NOA Template: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.22.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #1

2.22.3 Form/NOA Variable Population

No updates to Form/NOA Generation Conditions.

2.22.4 Form/NOA Generation Conditions

No updates to existing trigger conditions

2.23 Add Threshold Languages to NOA TEMPLATE (Snippet ID: 3044)

2.23.1 Overview

This effort will add additional threshold languages to NOA TEMPLATE (Snippet ID: 3044).

Reason Fragment Name and ID: CW_TL_60_NOA_TEMPLATE (ID: 3044)
Current Program(s): CalWORKs
Current Attached Form (s): Addendum 1, Addendum 2 and CW 2184
Existing Languages: English, Spanish, Chinese, Vietnamese, Russian, Tagalog, Cambodian, Arabic, Armenian, Korean, Lao, Farsi and Hmong.

2.23.2 Form/NOA Verbiage

Add fragments in Threshold languages.

Add Threshold languages: Japanese, Mien, Thai, Ukrainian, Hindi and Punjabi.

NOA Mockups/Examples: See Supporting Documents #4

2.23.3 Form/NOA Variable Population

No updates to variable population.

2.23.4 Form/NOA Generation Conditions

No updates to existing trigger conditions.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	NOA	NOA Verbiage	Fragments_Verbiage.xlsx
2	NOA	Message Fragment's Verbiage	NA 530.zip
3	NOA	Budget Mockup	NA 1239 SAR.zip
4	NOA	NOA Template's Attached Forms	Addendum 1.zip Addendum 2.zip CW 2184.zip

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
(CAR-1239) 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;	Time on Aid NOAs M40-107A, M40-107B, M40-107F, M40-107F1, M40-107F2, M40-107G, M40-107J, M40-107J1, M40-107K are being added in available threshold languages.

	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. - Client Correspondence - 2.18.3.3.	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-254391

Update Postpartum NOAs and add threshold languages.

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Steven Contreras
	Reviewed By	Nina Butler

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
05/13/24	1.0	Initial Revision	Steven Contreras
09/13/24	2.0	Verbiage Errors Corrected	Steven Contreras
09/27/24	3.0	Adding NOA Mockups	Steven Contreras
10/14/24	4.0	Mockups updated and comments removed	Steven Contreras
11/08/24	5.0	Updating existing languages to match database, action types, and NOA file names.	Steven Contreras
11/11/24	6.0	Removed high lights and variables.	Steven Contreras
11/12/24	7.0	Removed “Some” from 7029	Steven Contreras
12/04/24	8.0	Updating exiting and updated languages.	Steven Contreras
12/05/24	9.0	Language clarifications	Steven Contreras

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1 OVERVIEW

This effort will update the Medi-Cal Postpartum NOA reasons to match State updates per MEDIL I-21-13.

1.1 Current Design

DHCS has provided updated verbiage per MEDIL I-21-13/SIRFRA 1200.

1.2 Requests

Update existing CalSAWS Medi-Cal NOA with updated postpartum verbiage provided by DHCS.

1.3 Overview of Recommendations

1. Update MAGI Medi-Cal Limited Scope Approval postpartum NOA Reason verbiage.
2. Update MAGI Medi-Cal Retro Limited Scope Approval postpartum NOA Reason verbiage
3. Update MAGI Medi-Cal Pregnancy Income Disregard Approval NOA Reason verbiage.
4. Update non-MAGI Medi-Cal Postpartum Approval NOA Reason verbiage.
5. Update MAGI Full Scope to Limited Scope Change NOA Reason verbiage.

1.4 Assumptions

1. This effort will not update any of the existing generation conditions of any of the Medi-Cal NOAs.
2. This effort will not add/update Restricted Scope Postpartum as that is only for retro month processing and is no longer applicable for ongoing months.

2 RECOMMENDATIONS

2.1 Update MAGI Medi-Cal Limited Scope Approval postpartum NOA Reason verbiage

2.1.1 Overview

This recommendation will update the existing MAGI NOA fragment with the newest verbiage provided by DHCS.

Reason Fragment Name and ID: H_AP_LIMITED_SCOPE_APP_H905 (7007)

State Form/NOA: MC-MAGI-A (11/15)

Current NOA Template: MC_NOA_TEMPLATE, MH_NOA_TEMPLATE

Current Program(s): Medi-Cal (MAGI)

Current Action Type: Approval

Current Fragment Level: Person

Currently Repeatable: Yes, per person.

Includes NA Back 9: Yes

Current Forms/NOAs Generated with this NOA: NA

Existing Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese.

2.1.2 Form/NOA Verbiage

Update Postpartum Reason Fragment

Updated Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Russian, Spanish, Tagalog, Vietnamese.

Added Languages: Hindi, Punjabi. Ukrainian.

Languages to be turned off: Lao

NOA Mockups/Examples: See Supporting Documents #1

Description	Existing Text	Updated Text	Formatting*
STATIC	You qualify for pregnancy related Medi-Cal because you are pregnant and your	You qualify for pregnancy related Medi-Cal because you are pregnant and your	Arial Font size 10

	household income is below the Medi-Cal limit. Your eligibility for pregnancy related Medi-Cal begins <Date>. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes. Pregnancy related Medi-Cal covers, ~~any medical condition that can affect your health during your pregnancy or the health of your unborn child, such as pregnancy related services such as~~ prenatal care, labor, delivery, postpartum care, family planning, emergency care, and ~~some~~ dental services. We counted your household size and income to make our decision. For Medi-Cal, your household size is <MAGISize> and your monthly household income is <MAGI Income>. The monthly pregnancy related Medi-Cal income limit for your household size is <MAGI Monthy Limit>. Your income is below this limit, so you qualify for pregnancy related Medi-Cal. <MAGI Regulations> is the regulation or law we relied on for this decision.	household income is below the Medi-Cal limit. Your eligibility for pregnancy related Medi-Cal begins <Date>. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes. Pregnancy related Medi-Cal covers the full breadth of medically necessary services during pregnancy and postpartum, including prenatal care, labor, delivery, postpartum care, family planning, emergency care, and dental services. We counted your household size and income to make our decision. For Medi-Cal, your household size is <MAGISize> and your monthly household income is <MAGI Income>. The monthly pregnancy related Medi-Cal income limit for your household size is <MAGI Monthy Limit>. Your income is below this limit, so you qualify for pregnancy related Medi-Cal. <MAGI Regulations> is the regulation or law we relied on for this decision.	

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

2.1.3 Form/NOA Variable Population

Add/Update Fragment Variable Population

There are no new variable populations.

2.1.4 Form/NOA Generation Conditions

The effort will not update the existing generation conditions of this NOA.

2.2 Update MAGI Medi-Cal Retro Limited Scope Approval postpartum NOA Reason verbiage

2.2.1 Overview

This recommendation will update the existing MAGI NOA fragment with the newest verbiage provided by DHCS.

Reason Fragment Name and ID: H_AP_LIMITED_SCOPE_RETRO_H904 (7006)

State Form/NOA: MC-MAGI-A (11/15)

Current NOA Template: H_NOA_TEMPLATE, MH_NOA_TEMPLATE

Current Program(s): Medi-Cal (MAGI)

Current Action Type: Approval

Current Fragment Level: Person

Currently Repeatable: Yes, per person.

Includes NA Back 9: Yes

Current Forms/NOAs Generated with this NOA: N/A

Existing Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese.

2.2.2 Form/NOA Verbiage

Update Postpartum Reason Fragment

Updated Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Russian, Spanish, Tagalog, Vietnamese.

Added Languages: Hindi, Punjabi. Ukrainian.

Languages to be turned off: Lao

NOA Mockups/Examples: See Supporting Documents #2

Description	Existing Text	Updated Text	Formatting*
STATIC	You asked us to check if you could get Medi-Cal to cover your bills for any of the three months before you applied. Good news! You qualified for pregnancy related Medi-Cal in <Date1> because you are pregnant and your household income was below the Medi-Cal limit. You may get or may have already received other notices about your eligibility for other time periods. This notice is only telling you that you got Medi-Cal coverage for <Date 2>. Pregnancy related Medi-Cal covers ~~any medical condition that can affect your health during your pregnancy or the health of your unborn child, such as pregnancy related services such as~~ prenatal care, labor, delivery, postpartum care, family planning, emergency care, and ~~some~~ dental services. We counted your household size and income to make our decision. For Medi-Cal, your household size is <MAGI Size> and your monthly household income is <MAGI Income>. The monthly pregnancy related Medi-Cal income limit for your household size is <MAGI Income Limit>. Your income is below this limit, so you qualify for pregnancy related Medi-Cal. <MAGI Regulation> is the regulation or law we relied on for this decision.	You asked us to check if you could get Medi-Cal to cover your bills for any of the three months before you applied. Good news! You qualified for pregnancy related Medi-Cal in <Date1> because you are pregnant and your household income was below the Medi-Cal limit. You may get or may have already received other notices about your eligibility for other time periods. This notice is only telling you that you got Medi-Cal coverage for <Date 2>. Pregnancy related Medi-Cal covers the full breadth of medically necessary services during pregnancy and postpartum, including prenatal care, labor, delivery, postpartum care, family planning, emergency care, and dental services. We counted your household size and income to make our decision. For Medi-Cal, your household size is <MAGI Size> and your monthly household income is <MAGI Income>. The monthly pregnancy related Medi-Cal income limit for your household size is <MAGI Income Limit>. Your income is below this limit, so you qualify for pregnancy related Medi-Cal. <MAGI Regulation> is the regulation or law we relied on for this decision.	Arial Font size 10

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

2.2.3 Form/NOA Variable Population

There will be no new variable population or updates to existing variable population for this NOA fragment as part of this effort.

2.2.4 Form/NOA Generation Conditions

There will be no updates to the existing generation of this NOA.

2.3 Update MAGI Medi-Cal Pregnancy Income Disregard Approval NOA Reason verbiage.

2.3.1 Overview

This recommendation will update the existing MAGI NOA fragment with the newest verbiage provided by DHCS.

Reason Fragment Name and ID: H_AP_PREG_TEEN_INC_DISREGARD_H406 (7453)
State Form/NOA: MC-MAGI-A (11/15)
Current NOA Template: MC_NOA_TEMPLATE, MH_NOA_TEMPLATE
Current Program(s): Medi-Cal (MAGI)
Current Action Type: Approval
Current Fragment Level: Person
Currently Repeatable: Yes, per person.
Includes NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: NA
Existing Languages: English, Spanish.

2.3.2 Form/NOA Verbiage

Update Postpartum Reason Fragment

Updated Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Russian, Spanish, Tagalog, Vietnamese.

Added Languages: Hindi, Punjabi. Ukrainian.

NOA Mockups/Examples: See Supporting Documents #3

Description	Existing Text	Updated Text	Formatting*
STATIC	Good news! You qualify for Medi-Cal for pregnant women because you are under 21 years	Good news! You qualify for Medi-Cal for pregnant women because you are under 21	Arial Font size 10

	old and pregnant. Your eligibility for Medi-Cal begins <Date1>. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes. Pregnancy related Medi-Cal covers ~~any medical condition that can affect your health during your pregnancy or the health of your unborn child, such as pregnancy related services which includes~~ prenatal care, labor, delivery, postpartum care, family planning, emergency care, and ~~some~~ dental services. <MAGI Regulation> is the law and regulation we relied on for this decision.	years old and pregnant. Your eligibility for Medi-Cal begins <Date1>. Your Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes. Pregnancy related Medi-Cal covers the full breadth of medically necessary services during pregnancy and postpartum, including prenatal care, labor, delivery, postpartum care, family planning, emergency care, and dental services. <MAGI Regulation> is the law and regulation we relied on for this decision.	

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

2.3.3 Form/NOA Variable Population

There will be no new variable population or updates to existing variable population for this NOA fragment as part of this effort.

2.3.4 Form/NOA Generation Conditions

There will be no updates to the existing generation of this NOA.

2.4 Update non-MAGI Medi-Cal Postpartum Approval NOA Reason verbiage.

2.4.1 Overview

This recommendation will update the existing MAGI NOA fragment with the newest verbiage provided by DHCS.

Reason Fragment Name and ID: MC_AP_POST_PARTUM_APPROVED_M141 (6566)

State Form/NOA: MC 239

Current NOA Template: MC_NOA_TEMPLATE, MH_NOA_TEMPLATE

Current Program(s): Medi-Cal (MAGI)

Current Action Type: Approval

Current Fragment Level: Person

Currently Repeatable: Yes, per person.

Includes NA Back 9: Yes

Current Forms/NOAs Generated with this NOA: NA

Existing Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese.

2.4.2 Form/NOA Verbiage

Update Postpartum Reason Fragment

Updated Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Russian, Spanish, Tagalog, Vietnamese.

Added Languages: Hindi, Punjabi. Ukrainian.

Languages to be turned off: Lao

NOA Mockups/Examples: See Supporting Documents #4

Description	Existing Text	Updated Text	Formatting*
STATIC	Medi-Cal benefits are approved for: <Person's Name> You are eligible to receive Medi-Cal at no share of cost only for the month (s) of <Postpartum Months> under the ~~60-Day~~ Postpartum Program. Postpartum Medi-Cal ~~pays for medical care you receive as a result of your recent pregnancy. It does not pay for any other medical care.~~ ~~Your provider of medical service is aware that this coverage pays~~	Medi-Cal benefits are approved for: <Person's Name> You are eligible to receive Medi-Cal at no share of cost only for the month (s) of <Postpartum Months> under the 365-Day Postpartum Program. Postpartum Medi-Cal covers the full breadth of medically necessary services during pregnancy and postpartum.	Arial Font size 10

	~~for medical services related to your pregnancy or postpartum needs.~~		

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

2.4.3 Form/NOA Variable Population

There will be no new variable population or updates to existing variable population for this NOA fragment as part of this effort.

2.4.4 Form/NOA Generation Conditions

There will be no updates to the existing generation of this NOA.

2.5 Update MAGI Full Scope to Limited Scope Change NOA Reason verbiage.

2.5.1 Overview

This recommendation will update the existing MAGI NOA fragment with the newest verbiage provided by DHCS.

Reason Fragment Name and ID: H_CH_FULL_SCOPE_TO_LIMITED_SCOPE_H803 (7029)

State Form/NOA: MC-MAGI-C (11/2015))

Current NOA Template: MC_NOA_TEMPLATE, MH_NOA_TEMPLATE

Current Program(s): Medi-Cal (MAGI)

Current Action Type: Change

Current Fragment Level: Person

Currently Repeatable: Yes, per person.

Includes NA Back 9: Yes

Current Forms/NOAs Generated with this NOA: NA

Existing Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog, Vietnamese.

2.5.2 Form/NOA Verbiage

Update Postpartum Reason Fragment

Updated Languages: English, Arabic, Armenian, Cambodian, Chinese, Farsi, Hmong, Korean, Russian, Spanish, Tagalog, Vietnamese.

Added Languages: Hindi, Punjabi. Ukrainian.

Languages to be turned off: Lao

NOA Mockups/Examples: See Supporting Documents #5

Description	Existing Text	Updated Text	Formatting*
STATIC	Important change to your benefits. Your Medi-Cal will change from full-scope coverage to pregnancy related Medi-Cal on {Benefit Month} because your income and/or household size has changed. Your pregnancy related Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes. Pregnancy related Medi-Cal covers ~~any medical condition that can affect your health during your pregnancy or the health of your unborn child, such as pregnancy related services such as~~ prenatal care, labor, delivery, postpartum care, family planning, emergency care, and some dental services. We counted your household size and income to make our decision. For Medi-Cal, your household size is {MAGI Size} and your household	Important change to your benefits. Your Medi-Cal will change from full-scope coverage to pregnancy related Medi-Cal on {Benefit Month} because your income and/or household size has changed. Your pregnancy related Medi-Cal coverage will continue unless you are found no longer eligible. This could happen at the time your eligibility is renewed or when your situation changes. Pregnancy related Medi-Cal covers the full breadth of medically necessary services during pregnancy and postpartum including, prenatal care, labor, delivery, postpartum care, family planning, emergency care, and dental services. We counted your household size and income to make our decision. For Medi-Cal, your household size is {MAGI Size} and your household	Arial Font size 10

	income is {MAGI Income}. The pregnancy related Medi-Cal income limit for your household size is {MAGI Income Limit}. Your income is below this limit, so you qualify for pregnancy related Medi-Cal. If you have questions or think we made a mistake, call or write to your county eligibility worker right away. {MAGI Regulation} is the regulation or law we relied on for this decision.	income is {MAGI Income}. The pregnancy related Medi-Cal income limit for your household size is {MAGI Income Limit}. Your income is below this limit, so you qualify for pregnancy related Medi-Cal. If you have questions or think we made a mistake, call or write to your county eligibility worker right away. {MAGI Regulation} is the regulation or law we relied on for this decision.	

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

2.5.3 Form/NOA Variable Population

There will be no new variable population or updates to existing variable population for this NOA fragment as part of this effort.

2.5.4 Form/NOA Generation Conditions

There will be no updates to the existing generation of this NOA.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	NOA	MAGI Medi-Cal Limited Scope Approval postpartum NOA	NOA - H_AP_LIMITED_SCOPE_APP_H905_EN (7007) Original c CA-25439.pdf, NOA - H_AP_LIMITED_SCOPE_APP_H905_EN (7007) Updated c CA-254391.pdf
2	NOA	MAGI Medi-Cal Retro Limited Scope Approval postpartum NOA	NOA - H_AP_LIMITED_SCOPE_RETRO_H904_EN (7006) Original c CA-25439.pdf, NOA - H_AP_LIMITED_SCOPE_RETRO_H904_EN (7006) Updated c CA-25439.pdf
3	NOA	MAGI Medi-Cal Pregnancy Income Disregard Approval NOA	NOA - H_AP_PREG_TEEN_INC_DISREGARD_H406_EN (7453) Original c CA-254391.pdf, NOA - H_AP_PREG_TEEN_INC_DISREGARD_H406_EN (7453) Updated c CA-254391.pdf
4	NOA	Non-MAGI Medi-Cal Postpartum Approval NOA	NOA - MC_AP_POST_PARTUM_APPROVED_M141_EN (6566) Updated c CA-254391.pdf
5	NOA	MAGI Full Scope to Limited Scope Change NOA	NOA - H_CH_FULL_SCOPE_TO_LIMITED_SCOPE_H803_EN Updated c CA-254391.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
CAR-1243	The CalSAWS shall identify case actions that require a notice, NOA, form, letter, stuffer, or flyer, and shall generate that appropriate notice, NOA, form, letter, stuffer, or flyer, using variable case-specific information.	Updating the existing Medi-Cal NOAs to generate appropriate noticing for postpartum.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-255940

Create Non-State All County version of the DCFS 1725.1 and ADM 102 - DCFS 2322

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Aishwarya Shankar
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
03/20/2024	1.0	Initial Draft	Aishwarya Shankar
04/17/2024	2.0	2nd Draft	Aishwarya Shankar
04/29/2024	3.0	3rd Draft	Aishwarya Shankar
05/06/2024	4.0	4th Draft	Aishwarya Shankar
10/23/2024	5.0	5th Draft (final draft based on mockups discussed with committee and advocates)	Aishwarya Shankar

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1 OVERVIEW

The effort of this SCR will be to create the CSF 186 and CSF 187 forms which are based off of the existing DCFS 1725.1 form and ADM 102 DCFS 2322 form, respectively. These new forms are the 11/2023 versions created by the workgroup.

1.1 Current Design

Currently forms DCFS 1725.1 and ADM 102 DCFS 2322 reside in CalSAWS Template Repository and are R6 specific forms. The current DCFS 1725.1 form in the CalSAWS system is the 2011 version, and the current ADM 102 – DCFS 2322 form in the CalSAWS system is the 2010 version.

1.2 Requests

There are new 2023 Non-State All County versions of the DCFS 1725.1 form and ADM 102 – DCFS 2322 form that were created by a small group. Create new CSF 186 and CSF 187 forms based off of the 11/2023 versions created by the small group. Turn off existing DCFS 1725.1 and ADM 102 – DCFS 2322 form as they will be replaced by the new CSF 186 and CSF 187 forms, respectively.

1.3 Overview of Recommendations

1. Create new Non-State All County CSF 186 form based off of the 11/2023 version of DCFS 1725.1 form created by the small group.
2. Create new Non-State All County CSF 187 form based off of the 11/2023 version of ADM 102 –DCFS 2322 form created by the small group.
3. Turn off existing DCFS 1725.1 form as it will be replaced by the new CSF 186 form.
4. Turn off existing ADM 102 – DCFS 2322 form as it will be replaced by the new CSF 187 form.

1.4 Assumptions

1. The existing DCFS 1725.1 form is available in English and is generated by the Template Repository, and the new CSF 186 form will follow the same.
2. The existing ADM 102 – DCFS 2322 form is available in English and is generated only by the Template Repository, and the new CSF 187 form will follow the same.
3. Regarding the CSF 187 form - Per current functionality, resource/payee's or customer's address will be populated in the mail-to address section, and resource/payee takes precedence. But as per revised form, it will need to be mailed to parent/legal guardian. Since the system does not store the parent/legal guardian information, it's expected that the user will need to manually enter the parent/legal guardian's mailing address in the mail-to section. Case worker can use the print local option to print and send the form. So print central option will not be available for the new CSF 187 form.

4. There are no changes to any current functionality of these forms unless specified in the recommendation of this design document.

2 RECOMMENDATIONS

2.1 Add New CSF 186 Form

2.1.1 Overview

This recommendation is to add the new CSF 186 form which is based off of the DCFS 1725.1 form.

State Form: N/A-This is a Non-State form

Programs: Foster Care, Kin-GAP

Attached Forms: None

Forms Category: Forms

Languages: English

Template Repository Visibility: All Counties

2.1.2 Form Verbiage

Form Number and Version: CSF 186 (11/2023)

Form Mockup/Example: #1

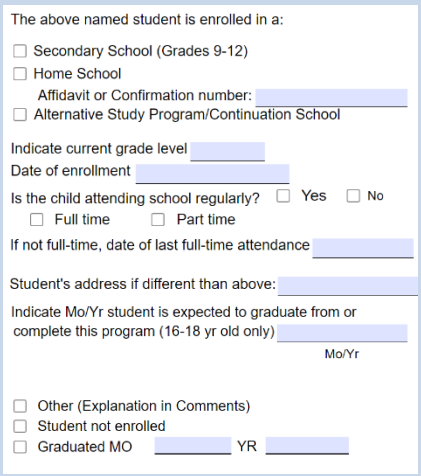
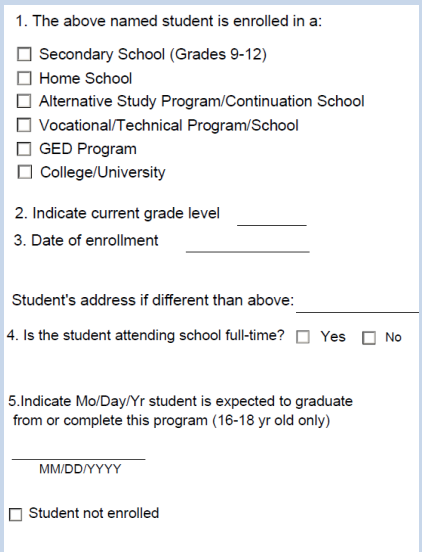
Form Title: School/Training Program Attendance Verification

Create CSF 186 Form XDP

The XDP of the CSF 186 form will be based off of the XDP of the DCFS 1725.1 form – DCFS1725_1_EN.xdp - with the following changes:

Location	Existing Language	Updated Language
Page 1 bullet point below "Student Name"	• Regular school attendance is defined by the county. • Children age 18 must be enrolled in a full time school program, which must be documented and are expected to graduate before their 19th birthday.	Youth who are 18 but are expected to graduate before their 19th birthday, must be enrolled in a full time school or training program. Parent/caretaker may provide verification they have received from the school, or they can choose to verify attendance in school and/or training program by giving the

		county permission to contact the school.
Page 1 first bolded box	You must complete this release of information and give us school information for the student listed above. If you are currently receiving Foster Care or KinGAP benefits, and we do not get this information by___ **Your benefits will be discontinued until you return the completed form.**	If you are currently receiving Foster Care or KinGAP benefits for a youth turning 18 and we do not get this information by _____, the youth's benefits will be discontinued the day prior to the youth turning 18. If these benefits were discontinued, they may be reinstated when the completed form is returned if they are attending school or training fulltime and expected to graduate before 19 or they meet an exception to the graduation requirement.
Page 1 – Line between the 2 bolded boxes	• When information is received from the school that your child is not regularly attending school, your Foster Care or KinGAP will be stopped.	Remove this line
Page 1 "TO BE COMPLETED BY..." section	**TO BE COMPLETED BY THE PARENT OR CARETAKER OF CHILD LISTED ABOVE** **I, hereby authorize** _____ (School Name) **to release to the County Welfare Department** **information concerning the above named student's enrollment or school**	**TO BE COMPLETED BY THE PARENT OR CARETAKER OF STUDENT LISTED ABOVE** **IF YOU WANT TO AUTHORIZE THE COUNTY TO OBTAIN THE VERIFICATION FOR YOU** **I, hereby authorize** _____ (School Name) **to release information to the County Welfare Department** **for the limited purpose of obtaining information on whether** _____ (Student Name)

	record. I understand that this release is valid for one year or until revoked in writing. _____ PARENT OR CARETAKER SIGNATURE _____ DATE _____ STUDENT SIGNATURE (IF 18 OR OLDER) _____ Date	**is attending a school or training program full-time and their anticipated graduation date. I understand that this release is valid for one year or until revoked in writing.** _____ PARENT OR CARETAKER SIGNATURE _____ DATE _____ STUDENT SIGNATURE (IF 18 OR OLDER) _____ DATE
Page 2 2-part bolded box	*Items are not numbered  The above named student is enrolled in a: ☐ Secondary School (Grades 9-12) ☐ Home School Affidavit or Confirmation number: ☐ Alternative Study Program/Continuation School Indicate current grade level Date of enrollment Is the child attending school regularly? ☐ Yes ☐ No ☐ Full time ☐ Part time If not full-time, date of last full-time attendance Student's address if different than above: Indicate Mo/Yr student is expected to graduate from or complete this program (16-18 yr old only) Mo/Yr ☐ Other (Explanation in Comments) ☐ Student not enrolled ☐ Graduated MO YR	*Items should be numbered 1-6 and written as shown in mockup  1. The above named student is enrolled in a: ☐ Secondary School (Grades 9-12) ☐ Home School ☐ Alternative Study Program/Continuation School ☐ Vocational/Technical Program/School ☐ GED Program ☐ College/University 2. Indicate current grade level 3. Date of enrollment Student's address if different than above: 4. Is the student attending school full-time? ☐ Yes ☐ No 5.Indicate Mo/Day/Yr student is expected to graduate from or complete this program (16-18 yr old only) MM/DD/YYYY ☐ Student not enrolled
Page 2 2-part box at bottom of page	2nd box has fields: Signature of School Official, Title, Phone, Date	2nd box has fields: Print Name of School Official, Signature of School Official, Title, Phone, Date

Page 2		Add bolded statement at top saying "MUST BE COMPLETED BY THE SCHOOL/TRAINING PROGRAM"

2.1.3 Form Variable Population

The existing variable population logic for the DCFS 1725.1 form will still apply to the new CSF 186 form's variable population logic.

2.1.4 Form Generation Conditions

1. Add Form to Template Repository

CSF 186 will be added to the template repository with the following document parameters:

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

*__TECHNICAL NOTE:__ DOC_TEMPL.PARAMTR_PAGE_IDENTIF = VER102.jsp

2. Add Form Control

The CSF 186 will have the following form control:

Tracking Barcode	BRM Barcode	Imaging Barcode
Yes	No	Yes

*__NOTE:__ The form control for CSF 186 follows the form control for the existing DCFS 1725.1

3. Add Form Print Options and Mailing Requirements

Blank Template	Print Local Without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Yes	Yes	Yes	Yes	Yes	Yes

Mailing Options:

Mail-To (Recipient): Customer name selected from dropdown in the document parameters page; the person selected from customer name dropdown or

resource/payee is the one it will be mailed to – resource/payee takes higher precedence.

Mailed From (Return): Sending Office

Mail-back-to Address: None

Outgoing Envelope Type: Standard Mail

Return Envelope Type: None

Additional Options:

Special Paper Stock: No

Enclosures: None

Electronic Signature: No

Electronic Signature (IVR/Text): No

Check to Sign: No

Post to Self Service Portal (SSP): No

2.2 Add New CSF 187 Form

2.2.1 Overview

This recommendation is to add the new CSF 187 form which is based off of the ADM 102 – DCFS 2322 form.

State Form: N/A-This is a Non-State form

Programs: Foster Care

Attached Forms: None

Forms Category: Forms

Languages: English

Template Repository Visibility: All Counties

2.2.2 Form Verbiage

Form Number and Version: CSF 187 (11/2023)

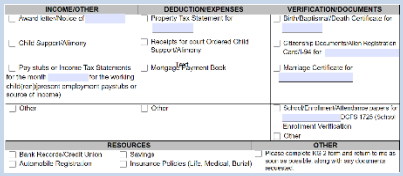
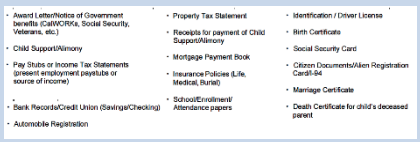
Form Mockup/Example: #2

Form Title: Request for Information

Create CSF 187 Form XDP

The CSF 187 form XDP will be based off of the XDP of the ADM 102 – DCFS 2322 form – DCFS2322ADM102_EN.xdp - with the following changes:

Location	Existing Language	Updated Language
Page 1		Remove page 1 contents from current XDP, starting at "Dear__" and ending with Comments Section
Page 2 bold title	FORMS/DOCUMENTS NEEDED FROM LEGAL GUARDIANS	FORMS/DOCUMENTS NEEDED FROM PARENTS/LEGAL GUARDIANS
Page 2 Date field		Remove the date field
Page 2 - Two boxes at top of page		Remove the following 2 boxes from the page Box 1 – "To" block Box 2 – has fields child's name, case no., ew telephone no., worker id, ew telephone no.
Page 2 – "I am writing to you…" to "Eligibility Worker" field	I am writing to you in regards to _____ who was placed in your care by the Department of Children and Family Services. In order for the County to secure funding for the placement cost of _____ , we need information regarding the child's income, or legal documents pertaining to the child. You will need to hold the **Kinship Guardianship Assistance Payment (Kin-GAP) Program Agreement (KG-3)** for further instructions, however <u>return</u> the **Statement of Facts Supporting Eligibility for Kinship Guardianship Assistance Payment (Kin-**	_____ is under the court (Name) jurisdiction of _____ County. We need information about your family's situation in the month of _____ (Month/Year) to secure funding for the placement cost of your child's care. Please submit any of the applicable items listed below for the month of _____. (Month/Year) **KEEP THIS LETTER FOR YOUR RECORDS.** Failure to provide the documents and/or other information may result in a change in the source of funding. This may result in decreased or modified benefits available to your child. If you have any questions or are unable to

	GAP) Program (KG 2) with requested information attached. Please: Bring them to the district office on _____ at _____ . **Call me** at the above number for an appointment no later than the following date: **KEEP THIS LETTER FOR YOUR RECORDS.** Failure to provide the documents and/or other information by the above date may result in the denial/discontinuance of foster care. If you have any questions or are unable to obtain any of the items by the due date, please call me immediately at my telephone number which can be found above.	obtain any of the applicable items, please call us immediately at the number listed above.
Page 2 "Eligibility Worker" field after "Keep this letter for your records" note		Remove the "Eligibility Worker" field
Page 2 Checklist		*Remove list headers and make items a bulleted list formatted as per mockup 

2.2.3 Form Variable Population

The existing variable population logic for the ADM 102 – DCFS 2322 form will still apply to the new CSF 187 form's variable population logic. The current variable population logic only populates the standard header information.

2.2.4 Form Generation Conditions

1. Add Form to Template Repository

CSF 187 will be added to the template repository with the following document parameters:

Required Document Parameters: Case Number, Customer Name, Language, Program, Resource/Payee

2. Add Form Control

The CSF 187 will have the following form control:

Tracking Barcode	BRM Barcode	Imaging Barcode
Yes	No	Yes

*__NOTE:__ The form control for CSF 187 follows the form control for the existing ADM 102 – DCFS 2322 form.

3. Add Form Print Options and Mailing Requirements

Blank Template	Print Local Without Save	Print Local and Save	Print Central and Save	Reprint Local	Reprint Central
Yes	Yes	Yes	No	Yes	No

Mailing Options:

Mail-To (Recipient): Customer name selected from dropdown in document parameters page or the resource/payee's address will be populated in the mail-to section - resource/payee takes higher precedence over customer name.

Address populated in the mail-to section needs to be manually overridden with the parent/legal guardian's mailing address by the case worker.

Mailed From (Return): Sending Office

Mail-back-to Address: None

Outgoing Envelope Type: Standard Mail

Return Envelope Type: None

Additional Options:
Special Paper Stock: No
Enclosures: None
Electronic Signature: No
Electronic Signature (IVR/Text): No
Check to Sign: No
Post to Self Service Portal (SSP): No

2.3 Turn off the DCFS 1725.1 Form

2.3.1 Overview

Turn off the DCFS 1725.1 form.

Current Program: Foster Care, Kin-GAP
Current Forms Category: Forms
Current Languages: English
Template Repository Visibility: Los Angeles County
Current Print Options: ALL
Current Posted to SSP: No

2.3.2 Form Verbiage

There are no changes to this section.

2.3.3 Form Variable Population

There are no changes to this section.

2.3.4 Form Generation Conditions

Turn off this form as it will be replaced by the new Non-State All County CSF 186 form.

2.4 Turn off the ADM 102-DCFS 2322 Form

2.4.1 Overview

Turn off the ADM 102-DCFS 2322 form.

Current Program: Foster Care, Kin-GAP
Current Forms Category: Forms
Current Languages: English
Template Repository Visibility: Los Angeles County
Current Print Options: ALL
Current Posted to SSP: No

2.4.2 Form Verbiage

There are no changes to this section.

2.4.3 Form Variable Population

There are no changes to this section.

2.4.4 Form Generation Conditions

Turn off this form as it will be replaced by the new Non-State All County CSF 187 form.

2.5 Automated Regression Test

2.5.1 Overview

Create new automated regression test scripts to verify that the CSF 186 and CSF 187 forms can be generated in English language via the Template Repository.

Technical Note: Verification of the form content and variable population is out of scope.

2.5.2 Description of Changes

Create new automated regression test scripts to verify that each of the following forms can be searched for by Form Number, and generated through the Template Repository in English language:

1. CSF 186
2. CSF 187

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Forms	CSF 186 Mockup	CSF186_Mockup.pdf
2	Forms	CSF 187 Mockup	CSF187_Mockup.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
CAR-1242	The LRS shall produce notices, NOAs, forms, letters, stuffers, and flyers, either generated by the LRS or initiated by COUNTY-specified Users, that may be sent to an applicant, participant, caregiver, sponsor, authorized representative, Vendor, landlord, and/or any other public or private individual or agency.	This SCR adds new CSF 186 and CSF 187 forms, which can be generated and sent to the appropriate individual.

CalSAWS

California Statewide Automated Welfare System

CA-257070

2025 Social Security Title II and Title XVI Cost of Living Adjustments (SSA COLA)

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Sheron Jaikumar M I
	Reviewed By	Sheron Jaikumar M I, Renee Gustafson, Sunitha Sampathkumar, Thomas Lazio, Chad Quan, Howard Suksanti, Praveen Badabhagni, Ramakrishna Kuchibhotla, Jeyasundari Murugan, Noel Acosta, Michael Wu, Tisha Mutreja, Richard J. Weeks, Dylan Patel, Edgars Reinholds, Himanshu Jain, Raj Devidi, Geetha Ramalingam, Priya Sridharan, Erika Kusnadi, Appalaraju Indala, Tiffany Huckaby

DATE	VERSION	REVISION DESCRIPTION	AUTHOR
10/15/2024	.01	Created Document	Sheron Jaikumar M I
11/12/2024	.02	Updated with ACIN I-52_24 details.	Sheron Jaikumar M I
11/25/2024	.03	Updated with ACWDL 24-15 and 24-16 details.	Sheron Jaikumar M I

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CA-257070 – 2025 Social Security Title II and Title XVI Cost of Living Adjustments (SSA COLA)

1 OVERVIEW

Per ACIN No. I-52-24 and ACWDL 24-12, Social Security Administration (SSA) income will increase by 2.5 percent for 2025.

Per ACWDL 24-15, the monthly Medicare Part B Supplemental Medical Insurance Base premium will increase to $185.00.

The information for the Effective SSI/SSP Cash Grant Levels for Determining Pickle Eligibility from January 1, through December 31, 2025, and the 2025 Pickle Disregard Computation Chart were provided by ACWDL 24-16.

1.1 Current Design

CalSAWS stores the customer's SSA income and uses the information to evaluate eligibility for any program.

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

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

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

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

1.2 Requests

1. With the 2025 SSA Cost of Living Adjustment (COLA), SSA has approved a 2.5 percent increase for SSA benefits. This causes an increase in the income for a customer who is currently receiving SSA benefits. Income information stored in CalSAWS for these customers will be updated to address the increase.

2. The 2025 SSA COLA published SSA income increase rate is 2.5%. The current value of the 'Backout Multiplier' does not match with the updated rate increase and needs to be updated.

3. With the 2025 SSA COLA information, DHCS provided the updated the 2024 Pickle Disregard Computation Chart effective 01/01/2025. CalSAWS Pickle values will be updated to match the new chart.

4. With the 2025 SSA COLA, SSI/SSP payment standards are updated. CalSAWS will be updated to match the new SSI/SSP payment standards.

5. With the 2025 SSA COLA, income would increase for the customer who is currently receiving SSA.

6. The 2025 Medicare Part B Premium changed from $174.70 to $185.00. Medicare Part B Premium amounts stored in CalSAWS for these customers will be updated to address the increase.

1.3 Overview of Recommendations

1. Apply a data change to add the new SSA income amount effective 01/01/2025 for a person receiving SSA income in continuing EDBC-based programs.

2. The 2025 SSA COLA published SSA income increase rate is 2.5%. Update the value of the 'Backout Multiplier' to match the rate increase.

3. Update CalSAWS Pickle values to match the 'Pickle Disregard Computation Chart' effective 01/01/2025.

4. Update CalSAWS to match the new SSI/SSP payment standards.

5. Income would increase for the customer who is currently receiving SSA.

6. Update Medicare Part B Premium amounts stored in CalSAWS for the customers to $185.00 to address the increase.

7. Create a Journal entry to document the data changes for SSA Income and Medicare Part B Premium amounts.

8. Generate lists for the counties after the data change is run.

1.4 Assumptions

1. CalSAWS does not maintain the Pickle In-kind and Support Maintenance (ISM) values.
2. Medicare Part A premium amount is not relevant to SSA COLA. Existing Medicare Part A records in the database are entered by the user and will not be updated by this data change.
3. Other than what is referenced in this document, all EDBC-based program eligibility determination logic remains unchanged.
4. There are no changes to Forms or NOAs as a result of this SCR. If the SSA COLA adjustment results in a decrease or loss of benefits, CalSAWS will leverage existing negative change NOA logic to notify participants.
5. OPA of SSI/SSP, SSP Only, and SSI Only for CF program will be updated with the new SSI Income amounts with CA-280612 with a priority release in January 2025.
6. The Data Change also applies to cases that have a yellow banner requiring case review as a result of the benefit match process.
7. CA-257071 will run a one-time batch to process SSA COLA records updated with this SCR.
8. Recommendation 2.6 Data Change to Apply the Medicare Part B Premiums will apply to all Payment Methods.

2 RECOMMENDATIONS

2.1 Data Change to Apply the New SSA Income Amount

2.1.1 Overview

The new SSA income amount has increased by 2.5% effective 01/01/2025. Apply a data change to add the new SSA income amount effective 01/01/2025 for a person receiving SSA income in continuing EDBC-based programs.

2.1.2 Description of Change

1. Identify SSA income records with all of the following:
    a. The income category is Social Security
    b. The income amount detail has a begin date on or after 01/01/2024 but before 01/01/2025
    c. The "Reported Amount" is not $0
    d. The income amount detail has no end date (high-dated)
    e. The income record has either $0 or no value in the "Income Adjustment" and "Unreported Amount" field
    f. The participant should be non-hidden and non-duplicate

    And either of the following:

    a. The participant with the eligible income record is Active, Pending or Ineligible on an Active, Pending, or Ineligible EDBC-based program* on or after 01/01/2025
    Or
    b. The participant is Denied or Discontinued on below mentioned EDBC-based program* within the rescission period

Program	Rescission Period (Days)
Medi-Cal	90
CalFresh	30
Immediate Need	30
Diversion	30
CalWORKs	30
CAPI	365
FC/KG/AAP	90
GA/GR	30
RCA	30

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

* For reference, these are the EDBC-based programs: Adoption Assistance Program (AAP), Cash Assistance Program for Immigrants (CAPI), CF program, CW program, Diversion program, Foster Care (FC) program, IN program, Kin-GAP (KG) program, Medi-Cal (MC) program, RCA program, General Assistance/General Relief LA (GA/GR) program, General Assistance/General

Relief (GA/GR) Automated Solution, Approved Relative Caregiver (ARC) program, Transitional CalFresh (TCF) program

2. End date the identified high-dated SSA income record effective 12/31/2024.
3. Create a new SSA income record for the person identified in #1 with a copy of the 2024 record and update the following values:
    a. Begin date: 01/01/2025
    b. Amount: increase the identified 2024 amount by 2.5% (multiplying by 1.025) and round down to the nearest whole dollar.
    c. Change Reason: COLA
    d. Reported Date: Implementation Date of the SCR

    Note: The verification status will be the same as the verification status of the identified 2024 record.
4. Create a Journal Entry for cases where an associated non-hidden, non-duplicate person had the data change applied to their SSA income record based on recommendation 2.1.2.1

    The Journal Entry will be displayed as follows on Journal Detail page:
    Journal Category: All
    Journal Type: Basic Information
    Short Description: SSA COLA Income Record Update
    Long Description: CalSAWS updated at least one SSA income record for this case in accordance with the 2025 SSA COLA.
    Note: There will be one journal entry per case.

2.1.3 Estimated Number of Records Impacted/Performance

Approximately 4,798,874 income records to be impacted in CalSAWS

2.2 Backout Multiplier

2.2.1 Overview

The SSA COLA will not be applied to certain Medi-Cal programs until the 2025 Federal poverty levels (FPLs) are updated, typically in April. The Federal Poverty Level (FPL) related budgets use the updated SSA income information, and the new FPL increase rate is not effective until the month of April for FPL budgets, CalSAWS uses a 'Backout Multiplier' to account for the difference. The following categories will trigger the backout logic:

- FPL Percent Programs
- Aged and Disabled
- Medicare Premium Payment Programs

2.2.2 Description of Changes

1. Update the 'Backout Multiplier'(CT335_A2)
    a. Set the 'Backout Multiplier'(CT335_A2) value to 1.025 for year 2025.
    b. Set the 'Backout Multiplier'(CT335_A2) value to 1.00 for year 2026 and after. EDBC will use this value effective 01/01/2025 until the next SSA COLA changes are applied.
2. Update the "SSA COLA Adjustment End Month Number"(CT335_A5) and the "SSA MPPP COLA Adjustment End Month Number"(CT335_A6) in the code tables as below
    a. End date the current records of CT335_A5 and CT335_A6 to '12/31/2024'.
    b. Add new high-dated records for CT335_A5 and CT335_A6 with begin date of '01/01/2025' and value of '12' (December). This will allow the 'Backout Multiplier' from Recommendation 2.1 to be applied until the 2025 FPL limits are updated in CalSAWS.

Note: According to ACWDL 24-12, the SSA COLA will not be applied to certain Medi-Cal programs until the Federal Poverty Levels are updated, typically in April. The values, CT335_A5 and CT335_A6 will be updated to '3' (March) once the 2025 FPL limits are updated in CalSAWS. Changing this value back to 3 will allow the full SSA Income amount to be applied beginning in the 04/2025 Benefit month, without the 'Backout Multiplier'.

2.2.3 Programs Impacted

Medi-Cal

2.2.4 Performance Impacts

N/A

2.3 Pickle Disregard Computation

2.3.1 Overview

CalSAWS will apply the updated Pickle disregard for 2024.

2.3.2 Description of Changes

1. Update the Pickle Disregard Computation Chart (CT1790_01) with the 2024 Pickle Multiplier values available in ACWDL 24-16 Enclosure #3 "The 2024 Pickle Disregard Computation Chart" effective 01/01/2025.

2.3.3 Programs Impacted

Medi-Cal

2.3.4 Performance Impacts

N/A

2.4 SSI, SSP and Total Payment Standard Amounts

2.4.1 Overview

CalSAWS will apply the updated SSI, SSP and total payment standard.

2.4.2 Description of Changes

1. Update the SSI, SSP and total payment standard amounts for individual and Couple effective 01/01/2025 (CT963). Refer to the 'Independent Living Arrangement' table of the ACWDL 24-16 Enclosure #1 "The 2025 SSI-SSP Payment Standards" for values.

2.4.3 Programs Impacted

Medi-Cal

2.4.4 Performance Impacts

N/A

2.5 SSA Income COLA Mid-Period/Change Reason Logic

2.5.1 Overview

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

2.5.2 Description of Changes

1. Update the EDBC logic to allow the SSA Income COLA to apply existing SSA income by suppressing the Change Reason logic for January 2025 (CT335_S1 and CT335_S2).

2.5.3 Programs Impacted

Programs subject to mid-period/change reason logic.
Note: EDBC-based programs: CAPI, CF, CW, Diversion, IN, RCA, GA/GR, TCF

2.5.4 Performance Impacts

N/A

2.6 Data Change to Apply the Medicare Part B Premium Amount

2.6.1 Overview

The Medicare Part B Premium amount increased to $185.00 effective 01/01/2025.

2.6.2 Description of Change

1. Identify the Medicare Part B Premium records with all of the following:
    a. The Medicare Part B Premium amount is $174.70 or less
    Note: The Medicare Part B Premium amount is greater than $0
    b. The Begin date of the Medicare Part B Premium record has a begin date before 01/01/2025.
    c. The Medicare Part B Premium record does not have an end date (high-dated)
    d. The participant should be non-hidden and non-duplicate
    And either of the following:
    e. The participant with Medicare Premium Part B record is Active, Pending, or Ineligible on an Active, Pending, or Ineligible EDBC-based program* on or after 01/01/2025.
    OR
    f. A participant is Denied or Discontinued on below mentioned EDBC-based program* within the recission period

Program	Rescission Period (Days)
Medi-Cal	90
CalFresh	30

    Note: The rescission period is the amount of time the user normally rescinds a denied or discontinued case instead of a reapplication.
    *For reference, these are the EDBC-based programs: CF, TCF, MC.

    Note: If there is more than one high dated Medicare Part B Premium record for the same person, do not apply the data change.
2. Apply the data change to the identified records with the following actions:
    a. Duplicate the existing record
    b. End date the existing record 12/31/2024
    c. Set the begin date of the new record to 01/01/2025
    d. Set the Medicare Part B amount on the new record to $185.00
    e. Set the verification status of the new record the same as the verification status of previously existing record.
    f. Change Reason: COLA
    g. Reported Date: Implementation Date of the SCR
3. Create a Journal Entry for cases where an associated non-hidden, non-duplicate person had the data change applied to their Medicare based on recommendation 2.6.2.1.

    The Journal Entry will be displayed as follows on Journal Detail page:
    Journal Category: All
    Journal Type: Basic Information

Short Description: SSA COLA Medicare Premium Record Updated
Long Description: CalSAWS updated at least one Medicare Premium record for this case in accordance with the 2025 SSA COLA.
Note: There will be one journal entry per case.

2.6.3 Estimated Number of Records Impacted/Performance

Approximately 1,271,280 records to be impacted in CalSAWS.

3 SUPPORTING DOCUMENTS

[This section should include any supporting documents for the design as imbedded documents. Some examples of supporting documents include the Security Matrix, Form Design Documents, NOA Design Documents, and ETL Source-to-Target Mappings.]

Number	Functional Area	Description	Attachment
1	Eligibility	ACWDL 24-12	ACWDL 24-12.pdf
2	Eligibility	ACIN I-52-24	I-52_24.pdf
3	Eligibility	ACWDL 24-15	ACWDL 24-15.pdf
4	Eligibility	ACWDL 24-16	ACWDL 24-16.pdf

3.1 Outreach

3.2 Lists

All lists will display the standard list columns

Standard Columns:

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

The lists will be updated to the following location on December 09, 2024:
CalSAWS Web Portal >System Changes>SCR and SIR Lists>2024>CA-257070

1. **List Name:** Individuals whose SSA Income was not updated
   List Criteria: List includes an individual what meets the following criteria
   a. Program and Program Person Status is Active, Pending, or Ineligible for at least one of the identified EDBC-based programs* on or after 01/01/2025.
      * EDBC-based programs: AAP, CAPI, CF, CW, Diversion, FC, IN, KG, MC, RCA, GA/GR, ARC, TCF
   b. Is a non-hidden and non-duplicate person
      Note: If an individual is hidden on one case but non-hidden on another case, they will be considered on the list criteria as well
   c. Does not have a "UP" Role
   d. Has an SSA income detail record that was not changed by the 2025 SSA COLA data change
      i. The income category is Social Security
      ii. The income amount detail has a begin date before 01/01/2025
      iii. The income amount detail has no end date (high-dated) or is end dated on or after 01/01/2025.
      iv. The "Reported Amount" is not $0, or "Income Adjustment" and "Unreported Amount" amount have non-zero values.
      v. The income amount detail is not updated by staff_id = '92' (System)

      Note: This list will not bring back records where the "Reported Amount" is $0, and "Income Adjustment" or "Unreported Amount" is blank

   Additional Column(s):
   - Begin Date
   - SSA End Dated
   - Adjusted Amount >$0
   - Unreported Amount >$0
   - Reported Amount
   - Household Status

Note: A Blank "Household Status" means there is no existing high-dated household record associated with the individual
- SSI/SSP Individual
  Note: This column will consist of values (Y/N)
- Program Type
- CIN #
- Person Name
  Note: Person Name Format is: <First Name Last Name>
- DOB
- Aid Code

Frequency: One-time

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

2. **List Name**: GA/GR Managed and Non-Managed with Updates
   List Criteria: Cases where all the following conditions are true:
   a. The data change has been applied by Recommendation 2.1.
   b. Case contains at least one program, that is not run by batch: GA/GR Managed and GA/GR Non-Managed
   c. The data change in recommendation 2.1 was applied to a person that is "Pending", "Active", or "Ineligible" effective 01/01/2025 on the GA/GR Managed and GA/GR Non-Managed Programs.

   Additional Column:
   - Program Type
   - Person Name
     Note: Person Name Format is <First Name Last Name>

   Frequency: One-time

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

3. **List Name**: Individuals whose Medicare Part B Premium was not updated
   List Criteria: List includes an individual that meets the following criteria:
   a. Program and Program Person Status is Active, Pending, or Ineligible on at least one of the identified EDBC-based programs* on or after 01/01/2025
      * EDBC-based programs: MC, CF, TCF
   b. Is a non-hidden and non-duplicate person
      Note: If an individual is hidden on one case but non-hidden on another case, they need to be considered on the list.
   c. Does not have a "UP" Role
   d. has Medicare Part B Premium record that was not changed by the 2025 SSA COLA data change

ii. The Medicare Part B Premium record has no end date (high-dated) or is end dated on or after 01/01/2025.
iii. The Medicare Part B Premium record has a begin date before 01/01/2025
iv. The individual had more than one high-dated Medicare part B premium record.
v. The Medicare Part B Premium record is not updated by staff_id = '92' (System).

Additional Columns:

- Part B Payment Amount
- Part B Payment Method
- Begin Date
- Medicare End Date
- Duplicate Medicare
- Household Status
  Note: A blank "Household Status" means there is no existing high-dated household record associated with the individual
- SSI/SSP Individual
  Note: This column will consist of values (Y/N)
- Program Type
- CIN #
- Person Name
  Note: Person Name Format is <First Name Last Name>
- DOB
- Aid Code

Frequency: One-time

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

4. **List Name**: Individuals who did not receive RSDI COLA
   List Criteria: List includes an active non-hidden and non-duplicate individual on an active Medi-Cal program in January 2025 or later where there is an SSA income record and where the questions answered are as below:
   a. Since April 1977, has this person received or has been entitled to receive both RSDI and SSI/SSP in the same month? is "Yes"
   b. Has this person been discontinued from SSI/SSP? is "Yes"
   c. Has this person received a RSDI COLA increase in any month since SSI/SSP was discontinued? is "No".

   Additional Columns:

   - CIN #
   - Person Name
     Note: Person Name Format is <First Name Last Name>
   - DOB
   - Receiving SSI/SSP
     Note: This column will consist of values (Y/N)
   - Aid code

Frequency: One-time

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

CalSAWS

California Statewide Automated Welfare System

CA-257071

Batch EDBC to apply 2025 SSA Cost of Living Adjustments (COLA)

CalSAWS	DOCUMENT APPROVAL HISTORY	
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DATE	VERSION	REVISION DESCRIPTION	AUTHOR
10/15/2024	.01	Created Document	Sheron Jaikumar M I
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CA-257071 – Batch EDBC to apply 2025 SSA Cost of Living Adjustments (COLA)

1 OVERVIEW

Per ACIN No. I-52-24 and ACWDL 24-12, Social Security Administration (SSA) income will increase by 2.5 percent for 2025.

Per ACWDL 24-1x, the monthly Medicare Part B Supplemental Medical Insurance Base premium increased to $185.00.

Run Batch EDBC to correctly apply the 2025 SSA COLA values.

1.1 Current Design

CalSAWS stores the customer's SSA income and uses the information to evaluate eligibility for any program. If a customer is paying the Medicare Part B premium, EDBC uses this amount as a deduction for certain budgets. CA-257070 updated the SSA income and Medicare Part B Premium records as per the 2025 SSA COLA ACWDL 24-12, ACWDL 24-1x, and ACIN I-52-24.

1.2 Requests

CA-257070 updated the SSA income and Medicare Part B Premium records as per the 2025 SSA COLA ACWDL 24-12, ACWDL 24-1x, and ACIN I-52-24. Any 2025 EDBC run prior to the update used the previous 2024 values in the EDBC budget. Run Batch EDBC to correctly apply the 2025 SSA COLA values.

1.3 Overview of Recommendations

1. Run Batch EDBC for the targeted Populations starting on 12/14/2024.
2. Generate lists to aid the counties after Batch EDBC completes.

1.4 Assumptions

1. the Sub Type code = 'CT942-SA' – Annual SSA COLAs and Related Changes when the batch is run.
2. In CalSAWS, when records are inserted in SYS_TRANSACT_COLA in 'All Programs' mode with same Run Reason during Batch Run, 'SSA COLA' Run Reason will display only for one program record instead of all the program records.
3. Cases that have a yellow banner requiring case review as a result of the benefit match process will skip if a worker has not processed EDBC since

conversion. These cases will show on the Batch eligibility Report with a reason of "EDBC has not been run since conversion".

4. CA-257730 will run Batch EDBC for February 2025 Benefit Month for OPA records that were updated with the 2025 SSI COLA values under CA-280612.
5. CA-259984 will run on December 05, 2024, to discontinue all individuals who are on QMB/SLMB aid codes and are receiving SSI/SSP benefits. As the batch sweep jobs for CA-257071 only looks for Active individuals, the above population will not be picked up by the CA-257071 batch sweep jobs.

2 RECOMMENDATIONS

2.1 Batch EDBC

2.1.1 Overview

CA-257070 updated the SSA income and Medicare Part B Premium records as per the 2025 SSA COLA ACWDL 24-12, ACWDL 24-1x, and ACIN I-52-24. Run Batch EDBC to correctly apply the 2025 SSA COLA values.

2.1.2 Description of Change

1. Run the FC/KG SSA COLA Batch Sweep Job PB00C206 with the following criteria:
    a. RUN_RSN = 'SSA COLA'
    b. RUN_TYPE_CODE = 'Single Program'
    c. SUB_TYPE_CODE = 'CT942-SA' to create the following Journal entry:
        Short Description: Batch EDBC ran for <month, year>
        Long Description: Batch EDBC Ran for <Effective Month, Year>. Batch EDBC processed for the <Program Name> program for following reasons: 'Annual SSA COLAs and Related Changes'.

    d. EFF_DATE = 01/01/2025
    e. CREATED_BY = Staff ID '1229624'
    f. UPDATED_BY = Staff ID '1229624'
2. Run the Non-FC/KG SSA COLA Batch Sweep PB00C202 with the following criteria:
    a. RUN_RSN = 'SSA COLA'
    b. RUN_TYPE_CODE = 'All Programs'
    c. SUB_TYPE_CODE = 'CT942-SA' to create the following Journal entry:
        Short Description: Batch EDBC ran for <month, year>
        Long Description: Batch EDBC Ran for <Effective Month, Year>. Batch EDBC processed for the <Program Name> program for following reasons: 'Annual SSA COLAs and Related Changes'.

    d. EFF_DATE = 01/01/2025
    e. CREATED_BY = Staff ID '1229619'
    f. UPDATED_BY = Staff ID '1229619'
3. Generate lists to aid the counties after batch EDBC completes. Refer to section 4 'Outreach' for further details.

2.1.3 Execution Frequency

On demand to run SSA COLA Batch Sweep jobs, starting on 12/14/2024

2.1.4 Key Scheduling Dependencies

Refer to 2.1.8 Operational Instructions.

2.1.5 Counties Impacted

All Counties

2.1.6 Category

Core

2.1.7 Data Volume/Performance

There will be approximately 2 million programs processed in CalSAWS. The exceptions from the batch run will be available online through the 'On Request' "Batch Eligibility Report". Users can run the "Batch Eligibility Report" to see list of cases processed by batch EDBC the previous night.

2.1.8 Failure Procedure/Operational Instructions

1. **12/14/2024**: Run the SSA COLA batch sweep job for FC and KG programs from (SCR CA-257071 SSA COLA) to insert records into SYS_TRANSACT_COLA for Foster Care and KinGap programs for the 01/2025 benefit month.
2. Run SSA COLA Batch EDBC for the Foster Care and KinGap Programs.
3. **12/14/2024**: Run the SSA COLA batch sweep for **remaining** SSA population from (SCR CA-257071 SSA COLA) to insert records into SYS_TRANSACT_COLA for targeted programs for the 01/2025 benefit month.
4. Run the COLA Batch Sweep for CF programs with associated NB programs from CA-270653(State Minimum Wage) to insert records into SYS_TRANSACT_COLA for targeted programs for the 01/2025 benefit month.
5. Run SSA COLA Batch EDBC for the remaining SSA population by counties listed below:
    a) **12/14/2024**: Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Kern, Kings, Lake, Lassen, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Plumas, Riverside, San Benito, San Bernardino, San Joaquin, Shasta, Sierra, Siskiyou, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yuba.
    b) **12/15/2024**: Los Angeles, Orange, San Diego, Sacramento, Alameda, Fresno, San Franscisco, Santa Clara, Contra Costa, Placer, San Mateo, Santa Barbara, Santa Cruz, San Luis Obispo, Solano, Sonoma, Tulare, Ventura, Yolo.

Operational Note: The Order of the steps mentioned above matters. Allow each step to complete before moving to the next step.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Eligibility	ACWDL 24-12	ACWDL 24-12.pdf
2	Eligibility	ACIN I-52-24	I-52_24.pdf
3	Eligibility	Draft ACWDL	MCED 4071 DRAFT ACWDL-2025 SSI-SSI
4	Eligibility	Enclosure 1 2025 SSI-SSP Payment Standards.	MCED 4071 Draft Enclosure 1 2025 SSI
5	Eligibility	Enclosure 2 The 2025 In-Kind Support and Maintenance Values for Computing Pickle Eligibility	MCED 4071 Draft Enclosure 2 The 202
6	Eligibility	Enclosure 3 The 2024 Pickle Disregards Computation Chart (2024 Pickle Multipliers)	MCED 4071 Draft Enclosure 3 The 202
7	Eligibility	Draft ACWDL	DRAFT ACWDL-2025 Medica

4 OUTREACH

4.1 Lists

Generate lists to aid the counties after Batch EDBC completes.

Lists 1-5 will have the standard list columns to display on the listings.
Standard Columns:

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

1. **List Name:** Cases with Programs Closed by Batch
   List Criteria: Cases where this Batch EDBC process closed a program.
   Additional Column(s): Program Type, Program Closure Reason, Deceased only Case.

   Frequency: One-time
   County Action: These are likely the result of the household changes or ongoing data collection which was not yet processed through EDBC by the user. Since the purpose of this Batch EDBC process was not to close households, review these cases to verify the closure was accurate.

2. **List name**: Cases with Person Closed by Batch
   List Criteria: Cases with Active programs where this Batch EDBC closed a person.
   Additional Column(s): CIN #, Person Name, DOB, Program Type, Person Closure Reason
   Frequency: One-time
   County Action: These are likely the result of household changes or ongoing data collection which was not yet processed through EDBC by the user. Since the purpose of this Batch EDBC process was not to close persons, review these cases to verify the closure was accurate.

3. **List Name**: Cases with Read-Only EDBCs by Batch
   List Criteria: Cases where this Batch EDBC resulted in a Read-Only EDBC with all the Read-Only Reasons.
   Additional Column(s): Program Type, Read-Only Reason
   Frequency: One-time
   County Action: Since Batch EDBC could not automatically apply the intended change to these cases, users may process EDBC to apply intended changes, if applicable.

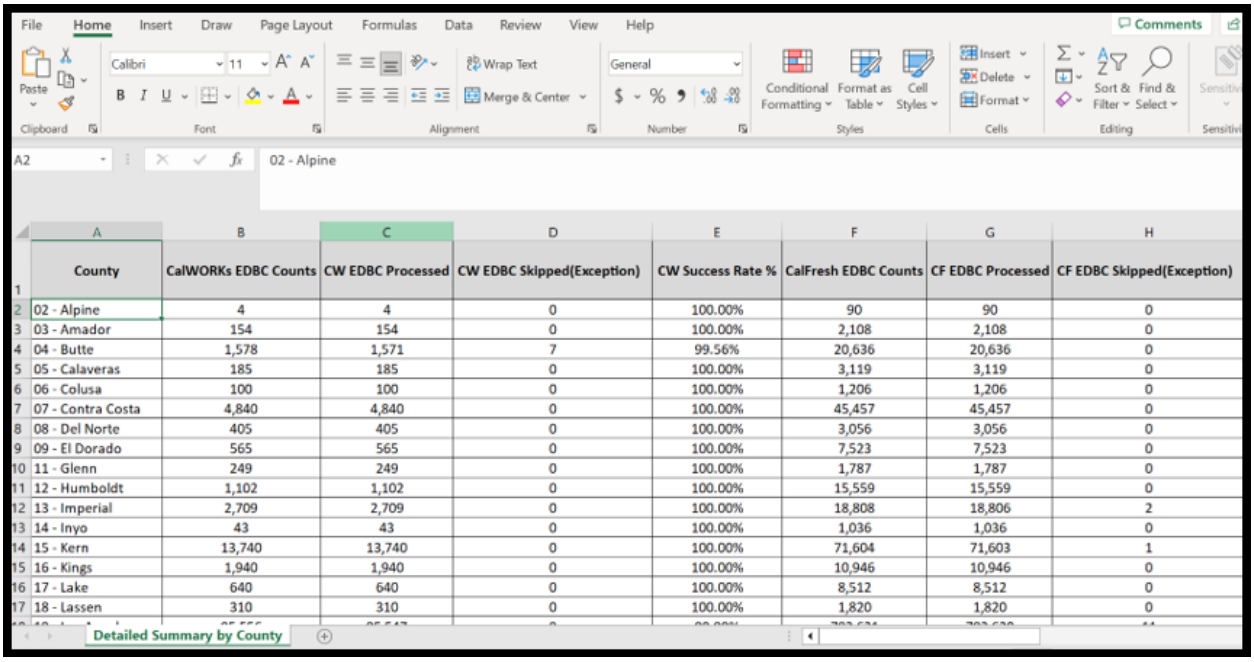
4. **List Name**: Medi-Cal Cases with FPL $1 under limit
   List Criteria: Cases that have a passed Medi-Cal FPL program with a person

receiving SSA whose net income is one dollar under the FPL limit.
Frequency: One-time
County Action: These cases could have passed the FPL program in error due to rounding in the 'Back Out' process. Counties can use this list to verify that the income test results are correct and take action if needed.

5. **List Name**: Cases Skipped by Batch
   List Criteria: Cases skipped in the Batch EDBC run including cases with a skip reason of 'EDBC has not been run since conversion'.
   Additional Column(s): Program Type, Skip Reason
   Frequency: One-time
   County Action: Since Batch EDBC did not automatically apply the intended change to these cases, users may process EDBC to apply intended changes, if applicable.

6. **List Name:** 'SSA COLA Stats by County Report'
   List Criteria: EDBC Count for each program included in the COLA by County.
   Additional Column(s):
   - <program> EDBC Counts
   - <program> EDBC Processed
   - <program> EDBC Skipped (Exception)
   - <program> EDBC Read Only
   - <program> EDBC Stack Trace (UEID)
   - <program> Success %
   - Total EDBC Count
   - Total EDBC Processed
   - Total EDBC Skipped (Exception)
   - Total EDBC Read Only
   - Total EDBC Stack Trace (UEID)
   - Overall, Success Rate %
   - Total NOAs Generated

   Note: The 'Total' and 'Overall Success' fields above will include all programs in the COLA.



County	CalWORKs EDBC Counts	CW EDBC Processed	CW EDBC Skipped(Exception)	CW Success Rate %	CalFresh EDBC Counts	CF EDBC Processed	CF EDBC Skipped(Exception)
02 - Alpine	4	4	0	100.00%	90	90	0
03 - Amador	154	154	0	100.00%	2,108	2,108	0
04 - Butte	1,578	1,571	7	99.56%	20,636	20,636	0
05 - Calaveras	185	185	0	100.00%	3,119	3,119	0
06 - Colusa	100	100	0	100.00%	1,206	1,206	0
07 - Contra Costa	4,840	4,840	0	100.00%	45,457	45,457	0
08 - Del Norte	405	405	0	100.00%	3,056	3,056	0
09 - El Dorado	565	565	0	100.00%	7,523	7,523	0
11 - Glenn	249	249	0	100.00%	1,787	1,787	0
12 - Humboldt	1,102	1,102	0	100.00%	15,559	15,559	0
13 - Imperial	2,709	2,709	0	100.00%	18,808	18,806	2
14 - Inyo	43	43	0	100.00%	1,036	1,036	0
15 - Kern	13,740	13,740	0	100.00%	71,604	71,603	1
16 - Kings	1,940	1,940	0	100.00%	10,946	10,946	0
17 - Lake	640	640	0	100.00%	8,512	8,512	0
18 - Lassen	310	310	0	100.00%	1,820	1,820	0

Figure 4.1.6 – SSA COLA Stats by County Report Example

Frequency: One-time

The list will be posted to the following location: CalSAWS Web Portal>System Changes>SCR and SIR Lists>2024>CA-257071.

CalSAWS

California Statewide Automated Welfare System

CA-257176-ACIN I-XX-24 2025 CAPI COLA

CalSAWS	DOCUMENT APPROVAL HISTORY		
	Prepared By	Tom Lazio	
	Reviewed By		
DATE	**VERSION**	**REVISION DESCRIPTION**	**AUTHOR**
10/23/2024	1.0	Initial Draft	T. Lazio

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1 OVERVIEW

All County Information Notice (ACIN) I-XX-24 transmitted new payment standards and ISM presumed maximum values for the Cash Assistance Program for Immigrants (CAPI) for 2025. This document identifies necessary changes to CAPI in CalSAWS beginning January 1, 2025.

1.1 Current Design

Currently CalSAWS uses the January 1, 2024, payment standards to compute CAPI benefit amounts based on SCR CA-243003.

1.2 Requests

Effective January 1, 2025, benefits for all active CAPI programs must be calculated and issued based on the new amounts from ACIN I-XX-24.

1.3 Overview of Recommendations

1. Update CalSAWS code tables with the new CAPI COLA values for 2025 and end date code table records from the previous year as of December 31, 2024.
2. Update the Presumed Maximum Value (PMV) 2025 values for CAPI In-kind support and maintenance (ISM) unearned income and end date code table records from the previous year as of December 31, 2024

1.4 Assumptions

1. CA-282588 will run batch EDBC to apply the new CAPI payment amounts.
2. No Client Correspondence changes are included in this SCR. Existing CAPI COLA NOA that was created with SCR CA-200882 will generate for this COLA when applicable. Note: If the CAPI benefit amount changes based on the CAPI COLA and another change (e.g., income increase/decrease), the system will only send the change NOA related to the non-COLA change, per existing logic.

2 RECOMMENDATIONS

2.1 Eligibility - Update CAPI Payment Amounts

2.1.1 Overview

Update the code tables with the new CAPI payment standards for 2025 for Independent Living, Reduced Needs, and Non-Medical Out-of-Home Care for individuals and couples.

2.1.2 Description of Changes

1. Insert new code table records for CAPI payment amounts with an effective date of 1/1/2025 to high date.
2. End-date the existing high-dated values effective 12/31/2024.
3. The following table contains the new rates for individuals and couples who live independently or in households with in-kind room and board (Reduced Needs):

	INDEPENDENT LIVING			**REDUCED NEEDS**		
	RESIDING IN OWN HOUSEHOLD			HOUSEHOLD OF ANOTHER WITH IN-KIND ROOM & BOARD		
INDIVIDUAL:	**TOTAL CAPI**		TOTAL SSI/SSP	**TOTAL CAPI**		TOTAL SSI/SSP
AGED OR DISABLED	**$1,206.94**		$1,206.94	**$889.87**		$889.87
AGED OR DISABLED – without cooking facilities (with restaurant meal allowance)	**$1,335.81**		$1,335.81			
BLIND	**$1,291.32**		$1,291.32	**$974.25**		$974.25
DISABLED MINOR - Living with parent(s) - Living with non-parent relative or non-relative guardian	**$1,064.27**		$1,064.27	**$747.20**		$747.20
COUPLE:	**TOTAL CAPI**	ONE CAPI, ONE SSI	TOTAL SSI/SSP	**TOTAL CAPI**	ONE CAPI, ONE SSI	TOTAL SSI/SSP
AGED or DISABLED - per couple	**$2,057.83**	$2,057.83	$2,057.83	**$1,582.37**	$1,582.37	$1,582.37
AGED or DISABLED - without cooking facilities (with restaurant meal allowance)	**$2,315.57**	$2,315.57	$2,315.57			
BLIND - per couple	**$2,283.35**	$2,283.35	$2,283.35	**$1,807.89**	$1,807.89	$1,807.89
BLIND/AGED OR DISABLED - per couple	**$2,197.44**	$2,197.44	$2,197.44	**$1,721.98**	$1,721.98	$1,721.98

Title XIX Medical Facility	Total CAPI	Total SSI/SSP
Per Individual	**N/A***	**N/A***
Per Couple	**N/A***	**N/A***

***No Change to the Title Medical Facility rate.**

4. The following table contains the new rates for individuals and couples who receive Non-Medical Out-of-Home care.

	NON-MEDICAL OUT-OF-HOME CARE					
	HOUSEHOLD OF RELATIVE WITH IN-KIND ROOM & BOARD			IN LICENSED FACILITY OR HOUSEHOLD OF RELATIVE WITHOUT IN-KIND ROOM & BOARD		
INDIVIDUAL:	**TOTAL CAPI**		TOTAL SSI/SSP	**TOTAL CAPI**		TOTAL SSI/SSP
AGED OR DISABLED	**$1,269.07**		$1,269.07	**$1,599.07**		$1,599.07
AGED OR DISABLED – without cooking facilities (with restaurant meal allowance)						
BLIND	**$1,269.07**		$1,269.07	**$1,599.07**		$1,599.07
DISABLED MINOR - Living with parent(s) - Living with non-parent relative or non-relative guardian	**$1,269.07**		$1,269.07	**$1,599.07**		$1,599.07
COUPLE:	**TOTAL CAPI**	ONE CAPI, ONE SSI	TOTAL SSI/SSP	**TOTAL CAPI**	ONE CAPI, ONE SSI	TOTAL SSI/SSP
AGED or DISABLED - per couple	**$2,570.87**	$2,570.87	$2,570.87	**$3,198.14**	$3,198.14	$3,198.14
AGED or DISABLED - without cooking facilities (with restaurant meal allowance)						
BLIND - per couple	**$2,570.87**	$2,570.87	$2,570.87	**$3,198.14**	$3,198.14	$3,198.14
BLIND/AGED OR DISABLED - per couple	**$2,570.87**	$2,570.87	$2,570.87	**$3,198.14**	$3,198.14	$3,198.14

2.1.3 Programs Impacted

CAPI

2.1.4 Performance Impacts

N/A

2.2 Eligibility - Update CAPI Presumed Maximum Value (PMV)

2.2.1 Overview

SCR CA-208537 added a new rate table in CalSAWS to store the Presumed Maximum Value (PMV) which is the maximum value that can be used for the CAPI In-kind support and maintenance (ISM) unearned income.

2.2.2 Description of Changes

1. End-date the existing high-dated values effective 12/31/2024.
2. Insert the following values with an effective date of 1/1/2025 to high date:

PMV INDIVIDUAL VALUE	PMV COUPLE VALUE
$342.33	**$503.33**

2.2.3 Programs Impacted

CAPI

2.2.4 Performance Impacts

N/A

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.8.1.21	The LRS shall automate eligibility determination and benefit calculation for certain individual and case changes.	New CAPI payment standards and PMV amounts for 2025 are added to CalSAWS.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-264017

Add Functionality to Associate Staff to an External Agency

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Erika Kusnadi-Cerezo
	Reviewed By	Michael Wu, Matthew Lower, Chitra Barsagade, Himanshu Jain

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/03/2024	1.0	Initial	Kusnadi.E

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1 OVERVIEW

1.1 Current Design

Currently in CalSAWS, users are not able to identify staff that belong to external agencies.

1.2 Requests

Update CalSAWS with the ability to identify staff that belong to an external agency.

1.3 Overview of Recommendations

1. Update the Staff Detail page with new fields that users can use to identify staff that belong to an external agency.
2. Update the Staff Search page to allow users to search for Staff that have been identified as external agency staff.

1.4 Assumptions

1. All existing functionalities will remain unchanged unless called out as part of this SCR.
2. Counties will need to update the Staff Detail record manually to identify staff that are part of an external agency.
3. SCR CA-264044 updates security reports to allow for identification of external agencies staff and usage of CalSAWS.
4. SCR CA-283188 adds the ability to add external agencies by county into CalSAWS and associate to External Agency Staff.

2 RECOMMENDATIONS

2.1 Staff Detail

2.1.1 Overview

The Staff Detail page allows a user to provide information about staff accessing the CalSAWS system. This SCR will add new fields to the Staff Detail page to allow users to indicate if the staff belongs to an external agency.

2.1.2 Staff Detail Mockup

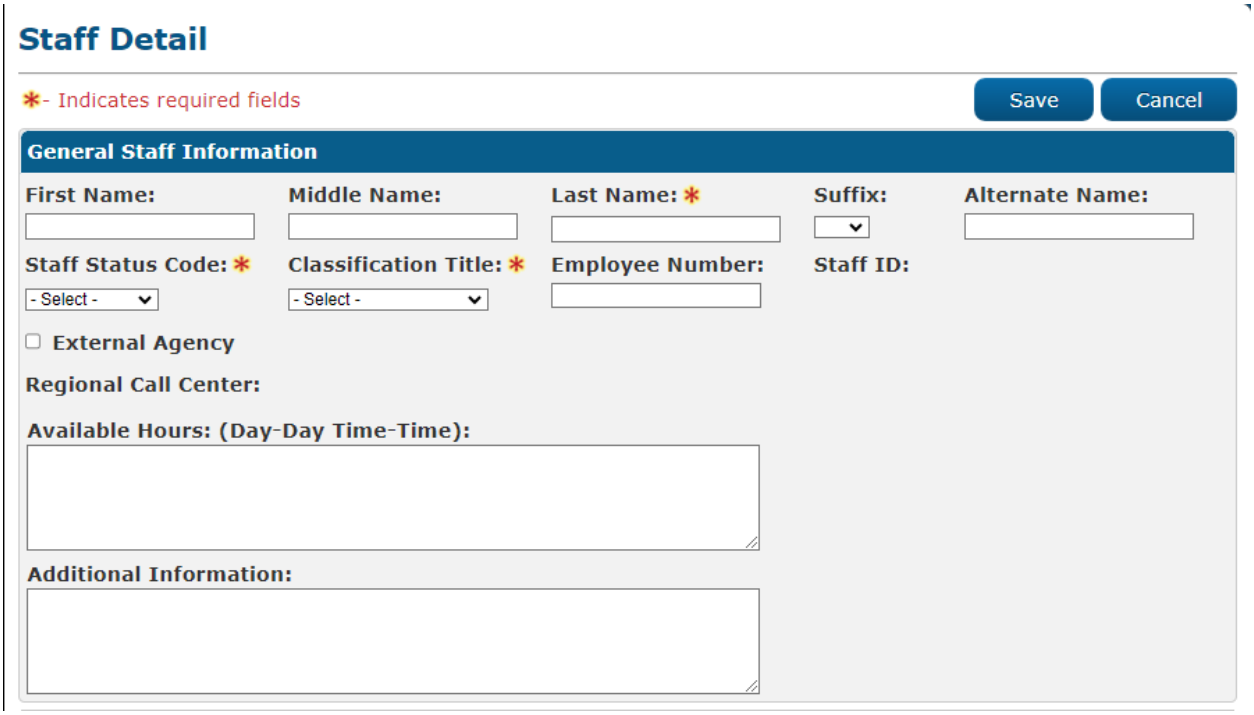

Figure 2.1.1a – Staff Detail page (Create Mode)

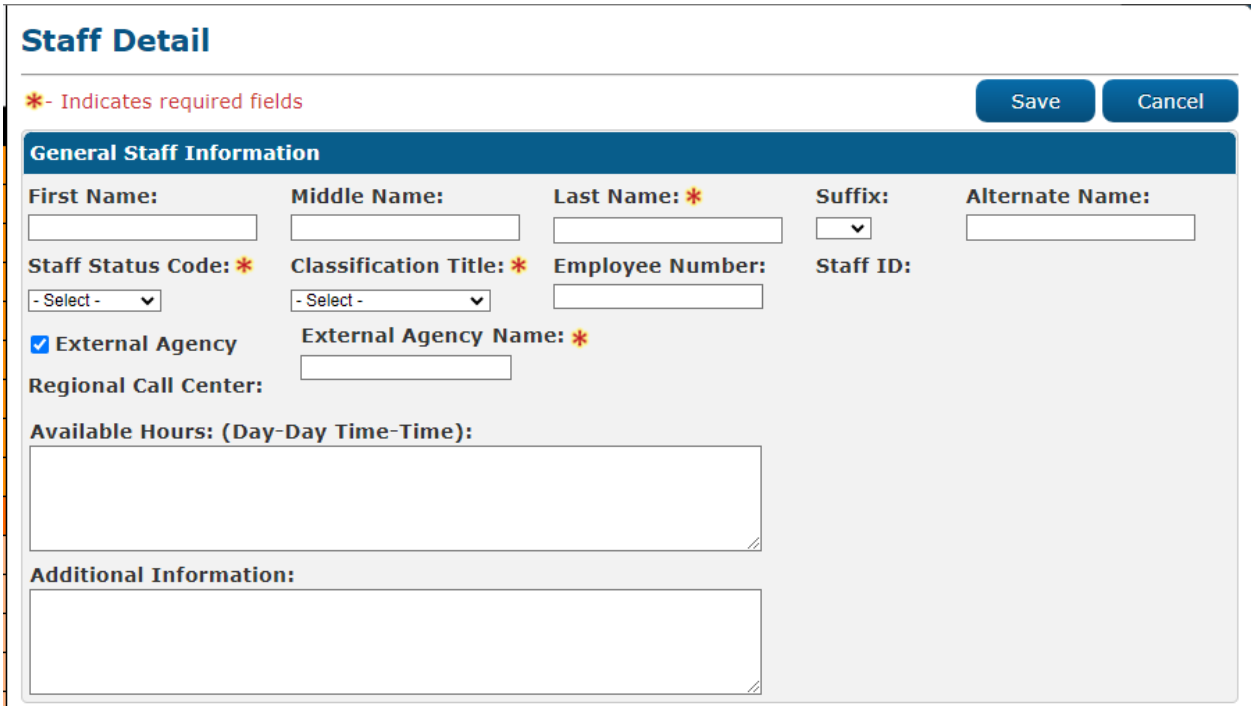

Figure 2.1.1b – Staff Detail page (Create Mode)

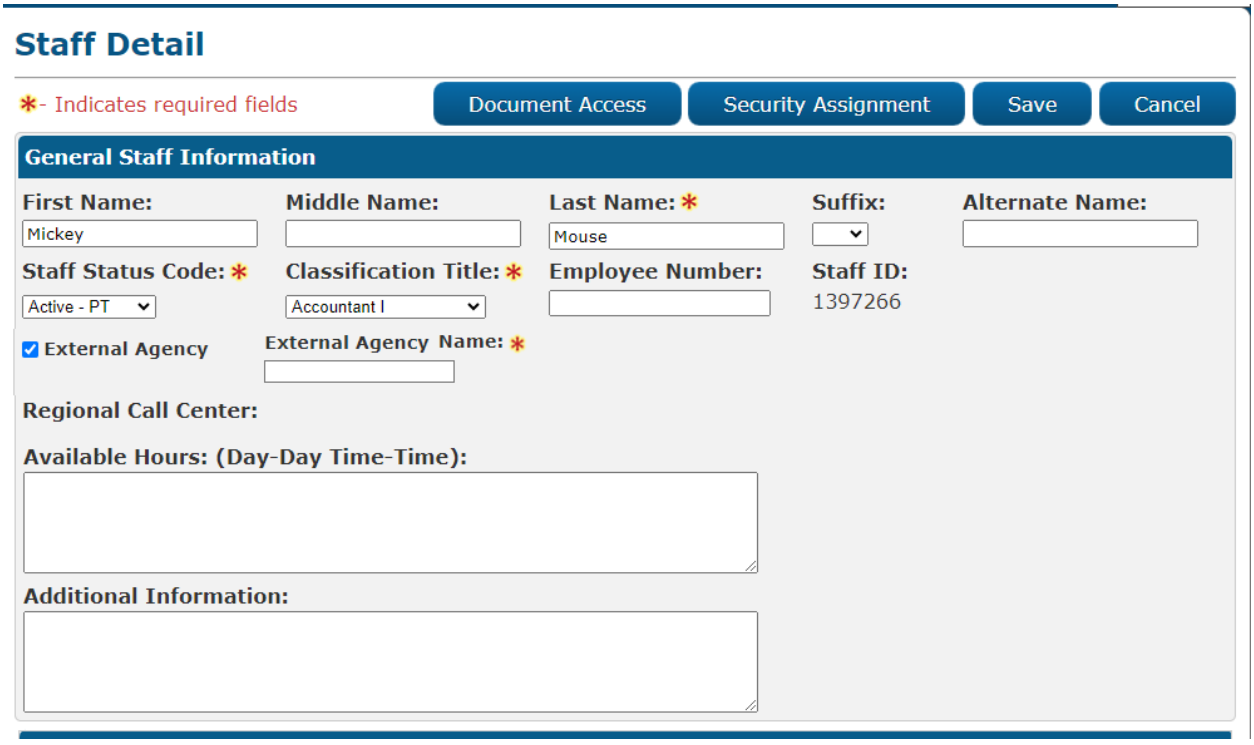

Figure 2.1.2 – Staff Detail page (Edit Mode)

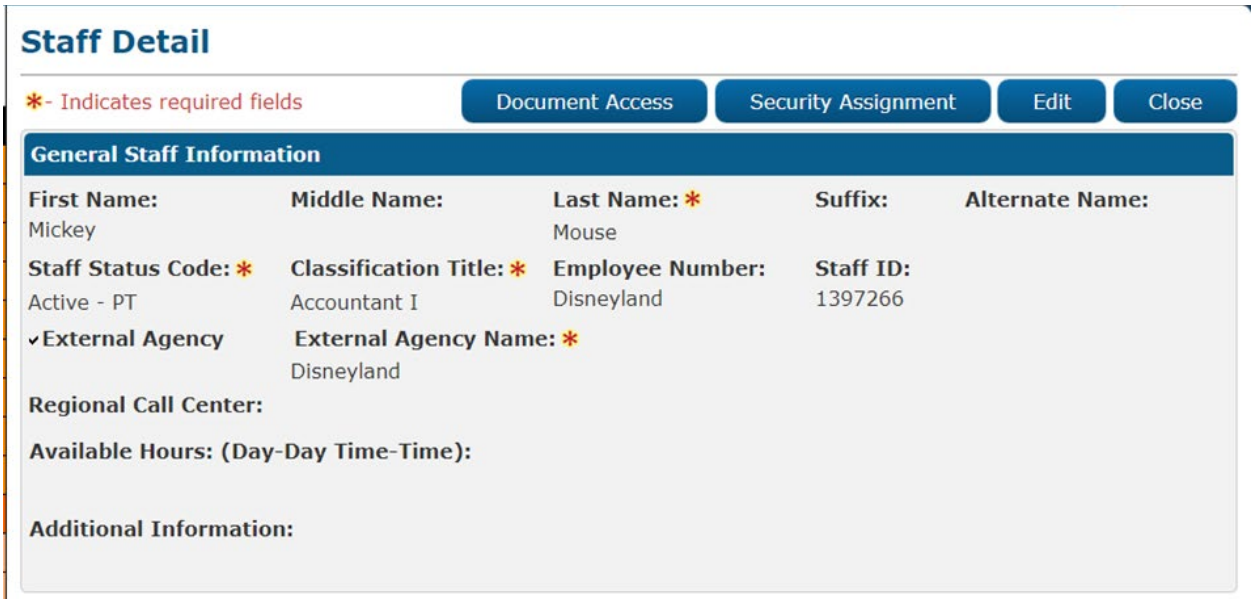

Figure 2.1.3 – Staff Detail page (View Mode)

2.1.3 Description of Changes

1. Add two new fields on the Staff Detail page.
    a. 1st field titled 'External Agency' and is a check box.
        i. This will be an editable field and will not be checked off by default.
            1. Existing/historical records will not have the 'External Agency' field checked off.
    b. 2nd field will be title 'External Agency Name:' and will have a text box.
        i. This field will only display when the 'External Agency' field is checked off.
        ii. This field will be required and editable.
        iii. There will be a maximum of 30-character limit.
            1. Once the maximum amount of character is reached, users are not able to enter more characters.
            2. Only alpha and numerical values are allowed.
        iv. Information inputted on the 'External Agency Name' field will not be saved or it will be removed when the 'External Agency' field is not checked off upon saving.

Note: Users will need to be assign to the StaffDetailEdit security right to access the Staff Detail page in Edit mode.

2.1.4 Page Location

- **Global: Admin Tools**
- **Local: Office Admin**

- **Task: Staff**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Update Page Mapping to include the new fields being added to the page

2.1.7 Accessibility

Accessibility was assessed and no changes are needed.

2.1.8 Page Usage/Data Volume Impacts

N/A

2.2 Staff Search

2.2.1 Overview

The Staff Detail search page allows a user to search for staff by various criteria. This SCR adds a new 'External Agency' field that can be used to search for Staff that have the External Agency field checked on the Staff Detail page.

2.2.2 Staff Search Mockup

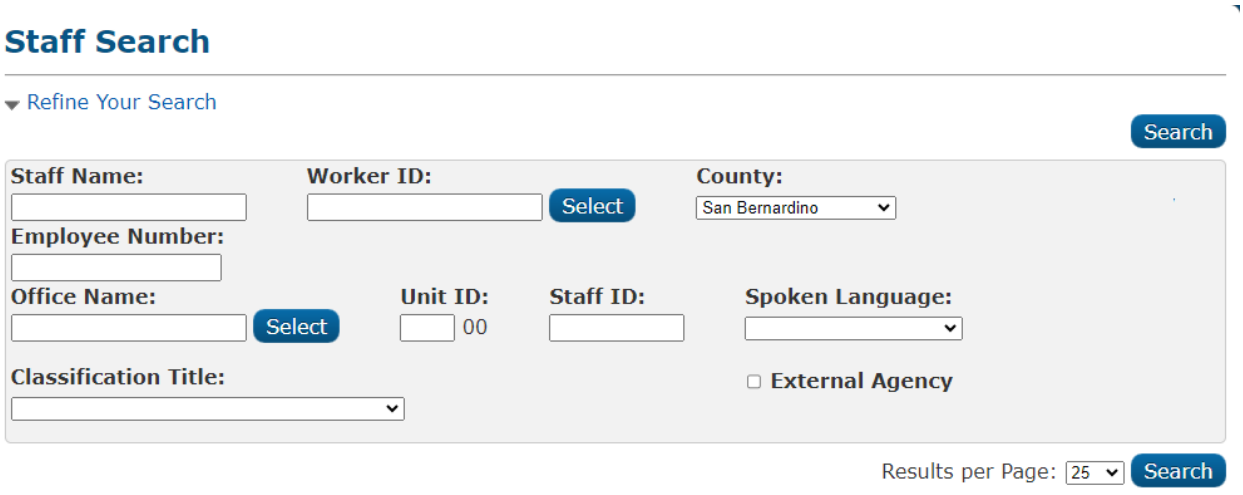

Figure 2.2.1– Staff Search page

2.2.3 Description of Changes

1. Add a new field on the Staff Search page.
    a. Field will be title 'External Agency' and will have a check box.
        i. The field will not be checked off by default.
2. Update the Search logic to return Staff that have the 'External Agency' field checked off on the Staff Detail page (this is a new field being added as part of this SCR) on the Search Result Summary when the 'External Agency' field is checked off on the Refine Your Search section on the Staff Search page.
    a. When the 'External Agency' field is not checked off, return all Staff that meets all the other search criteria on the Search Result Summary Section.

Example: Mickey Mouse, Minnie Mouse, Donald Duck and Daisy Duck all belong to Office Disney. Mickey and Minnie have the External Agency checked off (field on the Staff Detail page) while Donald and Daisy do not.

On the Staff Search page, when the user selects Disney on the Office Name parameter and check off the External Agency field, only Mickey and Minnie will be returned on the Search Result Summary.

On the Staff Search page, when the user selects Disney on the Office Name parameter and leave the External Agency field unchecked, Mickey, Minnie, Donald and Daisy will be returned on the Search Result Summary.

2.2.4 Page Location

- **Global: Admin Tools**
- **Local: Office Admin**
- **Task: Staff**

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

Update Page Mapping to include the new field that is being added to the Staff Search page.

2.2.7 Accessibility

Accessibility was assessed and no changes are needed.

2.2.8 Page Usage/Data Volume Impacts

N/A

2.3 Automated Regression Test

2.3.1 Overview

Create new automated regression test scripts to verify that the Staff Detail page can be saved with External Agency select and External Agency Name populated, and that the saved record can be retrieved via the Staff Search page.

2.3.2 Description of Changes

1. Create a regression script to: (1) Navigate to the Staff Detail page in create mode, select the External Agency checkbox, enter a valid External Agency Name value, and save the page; (2) search for the saved record via the Staff Search page and verify that the record displays in the search results.

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.25.1.3	The LRS shall maintain information on all COUNTY staff and any appropriate staff from other agencies that access LRS cases and/or LRS Data.	This SCR is adding the ability for staff to also differentiate between staff that belong to county and external agencies.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-268774

Update the DHCS Renewals Master Request Report to V2.5

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Esequiel Herrera-Ortiz, Jeric Derama
	Reviewed By	Esequiel Herrera-Ortiz, Thao Ta, Ravneet Bhatia, Gokul Suresh

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
12/12/2023	1.0	Initial Version	Esequiel Herrera-Ortiz
10/1/2024	1.1	Added "Benficiary-Provided Information", "Over Income", and "Failure to Respond" recategorization logic.	Jeric Derama
10/16/2024	1.2	Per discussion with Esequiel updated logic for Auto Ex-Parte and Manual Ex-Parte. Removed Aid Code 38 recommendation.	Jeric Derama
10/29/2024	1.3	Updated appendix to include definitions and logic/indicator explanations, added scenarios for Auto and Manual Ex-Parte, and added original design document as well as Current Mock-Ups of the report.	Jeric Derama
10/30/2024	1.4	Updated appendix scenarios and updated hierarchy.	Jeric Derama
11/8/2024	1.5	Removed 4M aid code based on the Aid Code List	Jeric Derama

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1 OVERVIEW

The DHCS Renewals Master Request report will be updated per the latest instructions provided by DHCS.

1.1 Current Design

The DHCS Renewals Master Request is a monthly report that provides counts on: Medi-Cal renewals, Medi-Cal renewals processing, and Medi-Cal continuance and discontinuance as a result of renewal processing. The base population of the report consists of aided individuals who are Active Members on an Active Medi-Cal program with a Renewal Due Date three months prior to the report month and accounts for the processing prior and within the reporting period from the Renewal Due Date till the end of the report month. The report has a state version which is sent directly to DHCS via FTP process. The report also has a county version containing details at the individual level which is available and accessible through the CalSAWS application.

1.1.1 DHCS Renewals Master Request – County Version Existing Mock-Up:

SAWS:	CalSAWS	Report Date:	10/02/2024
Unit of Reporting:	Case Level	Reporting Period (monthly reporting):	06-01-2024 to 09-30-2024

Counties (A)	Renewals Due This Month (B)
San Bernardino	29291

Figure 1.1.1.1 – DHCS Renewals Master Request – County Version, Case Summary Tab

SAWS:	CalSAWS	Report Date:	10/02/2024
Unit of Reporting	Individual Level	Reporting Period	06-01-2024 to 09-30-2024

MAGI

	Total Number of Renewals Due	Completion Timeframe Continued and Discontinued Eligibility					Completed & Resulted in Continued Medi-Cal				Completed & Resulted in Discontinued Medi-Cal				Eligibility Reinstatemen
		Total Number Completed (B=C+D+E+F)& (B=G+K)	Month Due	Month 1 Post Due Month	Month 2 Post Due Month	Month 3 Post Due Month	Total Number of Renewals Completed Resulting in (G= H+I+J)	Auto Ex-Parte	Manual Ex-Parte	Beneficiary-Provided Information	Total Number of Renewals Completed Resulting in Discontinuance (K=L+M+N)	Failure to Respond	Over Income	Other Reasons	Reinstatements During the 90-day Cure Period
Counties	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)
San Bernardino	47508	40097	37956	482	986	673	36195	30102	819	5274	3013	1943	0	1070	465

NON-MAGI

	Total Number of Renewals Due	Completion Timeframe Continued and Discontinued Eligibility					Completed & Resulted in Continued Medi-Cal				Completed & Resulted in Discontinued Medi-Cal				Eligibility Reinstatemen
		Total Number Completed (B=C+D+E+F) & (B=G+K)	Month Due	Month 1 Post Due Month	Month 2 Post Due Month	Month 3 Post Due Month	Total Number of Renewals Completed Resulting in Continued Eligibilitv (G= H+I+J)	Auto Ex-Parte	Manual Ex-Parte	Beneficiary-Provided Information	Total Number of Renewals Completed Resulting in Discontinuance (K=L+M+N)	Failure to Respond	Over Property	Other Reasons	Reinstatements During the 90-day Cure Period
Counties	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)
San Bernardino	5356	3456	3149	78	126	103	4136	0	94	4042	411	356	0	55	75

Figure 1.1.1.2 – DHCS Renewals Master Request – County Version, Individual Summary Tab

CalSAWS DHCS Renewals Master Request

San Bernardino
Run Date: OCT-02-24 02:10 PM
Date: 06-01-2024 to 09-30-2024

													Fully Processed			Continued to MC					Discontinued from MC			
												MAGI:	40097			MAGI:	36195				MAGI:	3013		Total:
												NON-MAGI:	3456			NON-MAGI:	4136				NON-MAGI:	411		

Office Number	Office Name	Worker ID	First Name	Last Name	Case Number	CIN	MAGI/NON-MAGI	RE Processed Date	Fully Processed	Month Due	Month 1 Post Due Month	Month 2 Post Due Month	Month 3 Post Due Month	Number of Processing Days	Continued to Medi-Cal	Auto Ex-Parte	Manual Ex-Parte	Beneficiary Provided	Discontinued from Medi-Cal	Failure to Respond	Over Income/ Over Property	Other Reason	Recission	Rescind Date	C E
08	Office Name	36LSXXXXXX	First Name	Last Name	1234567	12345678A	MAGI	04/04/2024	Y	Y	N	N	N	0	Y	Y	N	N	N	N	N	N	N	-	C

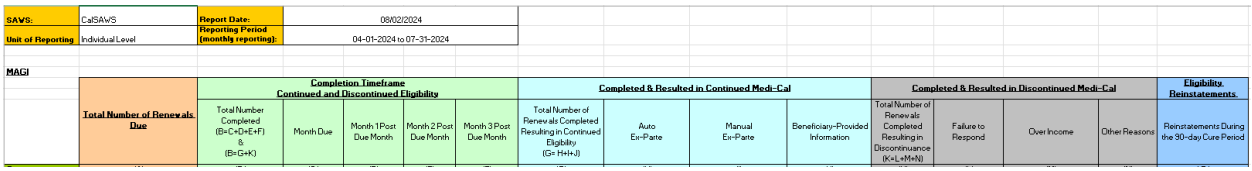
Figure 1.1.1.3 – DHCS Renewals Master Request – County Version, Detail Tab

1.1.2 DHCS Renewals Master Request – State Version

SAWS:	CalSAWS	Report Date:	08/02/2024
Unit of Reporting	Case Level	Reporting Period (monthly reporting):	04-01-2024 to 07-31-2024

Counties (A)	Renewals Due This Month (B)

Figure 1.1.2.1 – DHCS Renewals Master Request – State Version, Case Summary Tab



SAWS:	CalSAWS	Report Date:	08/02/2024
Unit of Reporting	Individual Level	Reporting Period (monthly reporting):	04-01-2024 to 07-31-2024

MAGI

		Completion Timeframe Continued and Discontinued Eligibility					Completed & Resulted in Continued Medi-Cal				Completed & Resulted in Discontinued Medi-Cal				Eligibility Reinstatements
	Total Number of Renewals Due	Total Number Completed (B+C+D+E+F) & (B+G+K)	Month Due	Month 1 Post Due Month	Month 2 Post Due Month	Month 3 Post Due Month	Total Number of Renewals Completed Resulting in Continued Eligibility (G+ H+I+J)	Auto Ex-Parte	Manual Ex-Parte	Beneficiary-Provided Information	Total Number of Renewals Completed Resulting in Discontinuance (K+L+M+N)	Failure to Respond	Over Income	Other Reasons	Reinstatements During the 30-day Cure Period

Figure 1.1.2.2 – DHCS Renewals Master Request – State Version, Individual Summary Tab, MAGI

NON-MAGI

		Completion Timeframe Continued and Discontinued Eligibility					Completed & Resulted in Continued Medi-Cal				Completed & Resulted in Discontinued Medi-Cal				Eligibility Reinstatements
	Total Number of Renewals Due	Total Number Completed (B+C+D+E+F) &	Month Due	Month 1 Post Due Month	Month 2 Post Due Month	Month 3 Post Due Month	Total Number of Renewals Completed Resulting in Continued Eligibility	Auto Ex-Parte	Manual Ex-Parte	Beneficiary-Provided Information	Total Number of Renewals Completed Resulting in	Failure to Respond	Over Property	Other Reasons	Reinstatements During the 30-day Cure Period

Figure 1.1.2.3 – DHCS Renewals Master Request – State Version, Individual Summary Tab, NON-MAGI

1.2 Requests

The following updates will be made to the Renewals Master Request report:

1. Update aid code logic, prevent duplicate persons in scenarios where they have more than one aid code, and remove the MAGI aid code 4M.
2. Update the Renewals Master Request report logic to recategorize individuals reported as Discontinued for "Other Reasons" as either Continued under "Beneficiary Provided Information", Discontinued for "Failure to Respond", or Discontinued for "Over Income" to more accurately assess the disposition as Continued or Discontinued.
3. Update the report logic to look at the individual level instead of the household level when considering Auto Ex-Parte. Update the report logic to look at Stable Income for Non-Magi Auto Ex-Parte.
4. Update the report logic for Manual Ex-Parte to look three months prior to the renewal due month, whereas it's currently looking two months prior.

1.3 Overview of Recommendations

1. Update the report logic to remove the conditions which are preventing some MAGI and Non-MAGI aid codes from the report as listed in the **appendix – 5.3**. When a person is aided with two or more aid codes, any MAGI aid code will take precedence. This is to avoid duplicates. Also update the logic to no longer capture MAGI aid code 4M.
2. Report individuals that have a Renewal Due Date in the report month, have been discontinued, have no discontinuance reason but have one of the role reasons listed below under "Beneficiary-Provided Information." These are individuals who were previously Active Members but were Discontinued due to

receiving aid on a different program. These individuals are currently being reported as Discontinued under "Other Reasons".

- Eligible for Cash-Based Medi-Cal - Provides Linkage,
- Receiving Adoption Assistance Program,
- Receiving Foster Care benefits,
- Receiving Foster Care ARC benefits,
- Receiving SSI,
- Receiving SSI/SSP,
- Receiving Kin-GAP,
- Receiving Refugee Cash Assistance

3. Report individuals that have a Renewal Due Date in the report month, that have been discontinued, have no discontinuance reason but have one of the role reasons listed below under "Failure to Respond". These are individuals who were previously Active Members but were Discontinued due to failing to provide verification. These individuals are currently being reported as Discontinued under "Other Reasons".
    - Failed to Verify Name/Identity
    - Did Not Apply for Medi-Care
    - Child/Medical Support Noncooperation
    - Child of FTP Income
    - No Linkage - No Property Verif
    - Refused to Apply for /Accept Unconditionally Available Income - UIB
    - Refused to Assign Child Support Rights
    - Spouse of FTP Income
    - Failed to Provide SSN,
    - Failure To Provide Other Health Care Coverage,
    - Failed to Complete Redetermination
4. Report individuals that have a Renewal Due Date in the report month, that were Discontinued with a discontinuance reason of Inter-county Transfer (ICT) under "Beneficiary-Provided Information". These individuals should have coverage on a different case. These individuals are currently being reported as Discontinued under "Other Reasons".
    - Inter-county Transfer
5. Report individuals that have a Renewal Due Date in the report month, that were Discontinued with one of the discontinuance reasons listed below under "Beneficiary-Provided Information". These individuals should have coverage on a different case. These individuals are currently being reported as Discontinued for "Other Reasons".
    - Gets CAPI
    - Inter-County Transfer
    - Receiving Adoption Assistance Program
    - Receiving CalWORKs Aid
    - Receiving Foster Care ARC benefits
    - Receiving Foster Care benefits
    - Receiving Kin-GAP
    - Receiving Refugee Cash Assistance

- Receiving SSI
- Receiving SSI/SSP

6. Report individuals that have a Renewal Due Date in the report month, that were Discontinued with a reason of "No Elig Members" and one of the role reasons listed below as "Beneficiary-Provided Information". These individuals are receiving aid through another program. These individuals are currently being reported as Discontinued for "Other Reasons".
    - Receiving SSI
    - Receiving SSI/SSP,
    - Receiving Adoption Assistance Program,
    - Receiving Foster Care benefits,
    - Receiving Foster Care ARC benefits,
    - Receiving Kin-GAP,
    - Receiving Refugee Cash Assistance,
    - Eligible for Cash-Based Medi-Cal - Provides Linkage
7. Report individuals that have a Renewal Due Date in the report month, that were discontinued with a discontinuance reason of "No Elig Members" under either "Failure to Respond" or "Over Income" depending on the CalHEERS Eligibility Status Reason hierarchy provided by DHCS. These individuals are currently being reported as Discontinued for "Other Reasons".
    1. Failure to apply for/accept unconditionally available income
    2. Deceased - Admin Verified
    3. MAGI Medi-Cal Current Monthly Income - Admin Verification Failed
    4. MAGI Medi-Cal Projected Annual Income - Admin Verification Failed
    5. Individual not a California Resident
    6. Residency - Admin Verification Failed
    7. Failure to comply with Third Party Liability
    8. Incarceration - Admin Verified
    9. MEDS MEC Check
    10. Income Limit - Not Within Range
    11. M1/M2-Parent/Caretaker Relative Disc/Denied due to Dependent Child w/o MEC
    12. Medicare - Admin Verified (Only for the New Adult Group)
    13. Failure to provide or apply for SSN
    14. SSN - Admin Verification Failed
    15. SSN Waiver - Admin Verification Failed
    16. Failure to provide identity/name
    17. Failure to apply for Medicare
    18. Failure to provide 2.1Q (Child Support)
    19. MAGI Medi-Cal Household Income Other Member - Admin Verification Failed
    20. Failure to provide Other Health Insurance information
    21. Negative Action Discontinued
    22. [No CalHEERS Eligibility Status Reason]
8. Update the report logic to consider a person Auto Ex-Parte at the individual level rather than the household level. Furthermore, update logic for Non-MAGI Auto Ex-Parte to include households that have Stable Income.

9. Update the report logic for Manual Ex-Parte to include one extra prior month over the existing logic for Online EDBCs for their respective run dates and begin dates.

1.4 Assumptions

1. Existing discontinuance logic will not be changed only the categorization of Continuance and Discontinuance reported individuals will change.
2. Rolling REs (see **appendix - 5.1**) are not included in this report.

2 RECOMMENDATIONS

The DHCS Renewals Master Request report will be updated per the latest instructions provided by DHCS.

2.1 DHCS Renewals Master Request

2.1.1 Overview

The DHCS Renewals Master Request reports on renewals, the processing of renewals, and continuance and discontinuance of Medi-Cal based on the renewal due month. Logic changes are to be made to recategorize processed renewals that are categorized as discontinuances due to "Other Reasons" to either discontinuances under "Over Income" / "Failure to Respond" or continuances under "Beneficiary Provided Information". Changes will also be made to Auto Ex-Parte and Manual Ex-Parte logic. Finally, aid code changes will be made to be less restrictive.

2.1.2 Description of Change

1. Update aid code logic for MAGI aid codes and NON-MAGI aid codes to make them less restrictive:
    1. For MAGI Aid Codes listed in the **appendix – 5.3.1**:
        1. Remove the check "MAGI Aid Code" indicator.

        Tech Note: CODE_DETL.REFER_TABLE_20_DESCR for Category 184
    2. Non-MAGI Aid Codes listed in the **appendix – 5.3.2**:
        1. Remove check that the "Eligibility Medi-Cal Benefit Categorization" does not exist or is not "Secondary".

        Tech Note: CODE_DETL.REFER_TABLE_2_DESCR for Category 184
        2. Remove check that the "C-IV Program" is "MC".

        Tech Note: CODE_DETL.REFER_TABLE_5_DESCR for Category 184

    Note: If a person has more than one aid code the MAGI aid code takes precedence.
    3. Update the aid code logic to no longer capture MAGI aid code 4M.
2. Update Auto Ex-Parte Logic to also look into the individual level instead of just the household level if the individual has the following (please see **appendix – 5.2** for the current logic):
    1. Has at least one CalHEERS eligible detail record that doesn't have a reason code of "Soft Pause" ("SP").
    2. Has an Eligible MAGI Medi-Cal Status Code of "Eligible" ("EL") (CT402 - CalHEERS Aid Status Codes) for the CalHEERS eligible detail record.
    3. Has an Effective Date that is equivalent to one month prior to the Renewal Due Date.
    4. Has a Run Reason Code of "Renewal - batch administrative renewal" ("RE") (CT395 - MAGI Run Reason).

5. Has a Type Code of "DER" ("DR") (CT297 - CalHEERS Transaction Type).

3. Update the Auto Ex-Parte Logic (please see **appendix – 5.2** for the current logic) for Non-MAGI households to mark them Auto Authorized if they:
    1. Have a Non-MAGI Aid Code.
    2. Have an EDBC with a "Non-MAGI Auto Renewal Indicator" of "Y".
    3. Have an EDBC Begin Date between three months prior to the Renewal Due Date and one month after the Renewal Due Date.
4. Update the Manual Ex-Parte Logic (please see **appendix – 5.2** for the current logic) to also look for households with Online EDBC run dates that are up to six months prior to the report month and begin dates that are up to five months prior to the report month.
5. Update the logic to recategorize individuals from Discontinued under "Other Reasons" to Continued under "Beneficiary-Provided Information" if they fulfill one of the following sets of conditions:
    1. **Set One**:
        1. Have a discontinued indicator is set to "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
        2. Rescind indicator is either "N" or NULL. **(Please see appendix – 5.2 for the discontinued indicator).**
        3. Discontinuance Reason Code (CT73 – Program Reason Codes) is NULL.
        4. Program Person Role Reason Code (CT73 – Program Reason Codes) is one of the following:
            - Eligible for Cash-Based Medi-Cal - Provides Linkage
            - Receiving Adoption Assistance Program ("FU")
            - Receiving Foster Care benefits ("FV")
            - Receiving Foster Care ARC benefits ("FV1")
            - Receiving SSI ("JW")
            - Receiving SSI/SSP ("25")
            - Receiving Kin-GAP ("FT")
            - Receiving Refugee Cash Assistance ("FS")
    2. **Set Two**:
        1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
        2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
        3. Have a Discontinuance Reason Code of "No Eligible Members" ("11") (CT73 - Program Reason Codes)
        4. Have an EDBC Person Role Reason Code (CT73 – Program Reason Codes) with one of the following:
            - Eligible for Cash-Based Medi-Cal - Provides Linkage
            - Receiving Adoption Assistance Program ("FU")
            - Receiving Foster Care benefits ("FV")

- Receiving Foster Care ARC benefits ("FV1")
- Receiving SSI ("JW")
- Receiving SSI/SSP ("25")
- Receiving Kin-GAP ("FT")
- Receiving Refugee Cash Assistance ("FS")

3. **Set Three**:
    1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
    2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
    3. Have a Discontinuance Reason Code (CT73 – Program Reason Codes) with one of the following:
        - Gets CAPI ("Y8")
        - Inter-County Transfer ("85")
        - Receiving Adoption Assistance Program ("FU")
        - Receiving CalWORKs Aid ("GKJ")
        - Receiving Foster Care benefits ("FV")
        - Receiving Foster Care ARC benefits ("FV1")
        - Receiving SSI ("JW")
        - Receiving SSI/SSP ("25")
        - Receiving Kin-GAP ("FT")
        - Receiving Refugee Cash Assistance ("FS")

6. Update the logic to recategorize individuals from Discontinued under "Other Reasons" to Discontinued under "Failure to Respond" if they fulfill one of the following set conditions:
    1. **Set One**:
        1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
        2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
        3. Discontinuance Reason Code (CT73 – Program Reason Codes) is NULL.
        4. Have a Program Person Detail Role Reason Code (CT73 – Program Reason Codes) with one of the following:
            - Failed to Verify Name/Identity ("CJ")
            - Did Not Apply for Medi-Care ("8F")
            - Child/Medical Support Noncooperation ("DX")
            - Child of FTP Income ("K8")
            - No Linkage - No Property Verif ("KB")
            - Refused to Apply for /Accept Unconditionally Available Income – UIB ("30")
            - Refused to Assign Child Support Rights ("CD")
            - Spouse of FTP Income ("K7")
            - Failed to Provide SSN ("C4")
            - Failure To Provide Other Health Care Coverage ("JT")
            - Failed to Complete Redetermination ("RD")
    2. **Set Two**:

1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
3. Have a Discontinuance Reason Code (CT73 – Program Reason Codes) with one of the following:
    - Refused UIB ("30")
    - SSN Enumeration ("C4")
    - Refused Assign Supp Rights ("CD")
    - FTP Name/Identity ("CJ")
    - Non Co-Op Chld/Med Supp ("DX")

3. **Set Three**:
    1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
    2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
    3. Have a Discontinuance Reason Code of "No Eligible Members" ("11") (CT-73 Program Reason Codes)
    4. Have an EDBC Person Role Reason Code (CT73 – Program Reason Codes) with one of the following:
        - Failed to Verify Name/Identity ("CJ")
        - Did Not Apply for Medi-Care ("8F")
        - Child/Medical Support Noncooperation ("DX")
        - Child of FTP Income ("K8")
        - No Linkage - No Property Verif ("KB")
        - Refused to Apply for /Accept Unconditionally Available Income – UIB ("30")
        - Refused to Assign Child Support Rights ("CD")
        - Spouse of FTP Income ("K7")
        - Failed to Provide SSN ("C4")
        - Failure To Provide Other Health Care Coverage ("JT")
4. **Set Four**:
    1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
    2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
    3. Have a Discontinuance Reason Code of "Failed MAGI" ("ZY") (CT-73 Program Reason Codes)
    4. Have a CalHEERS Eligibility Reason, Reason Code (CT466 - Eligibility Evaluation Reason) with one of the following:
        - Failure to apply for Medicare ("AM")
        - Failure to provide 2.1Q (Child Support) ("CS")
        - Failure to provide or apply for SSN ("FS")
        - Failure to provide Other Health Insurance information ("HI")
        - Failure to provide identity/name ("NG")
        - Residency - Admin Verification Failed ("RF")

- Failure to comply with Third Party Liability ("TP")
- Failure to apply for/accept unconditionally available income ("WS")

7. Update the logic to recategorize individuals from Discontinued under "Other Reasons" to Discontinued under "Over Income" if they fulfill the following conditions:
    1. Have a discontinued indicator of "Y". **(Please see appendix – 5.2 for the discontinued indicator).**
    2. Rescind indicator that is either "N" or NULL. **(Please see appendix – 5.2 for the rescind indicator).**
    3. Have a CalHEERS Eligibility Reason, Reason Code (CT466 - Eligibility Evaluation Reason) with one of the following:
        - MAGI Medi-Cal Current Monthly Income - Admin Verification Failed ("CF")
        - MAGI Medi-Cal Household Income Other Member - Admin Verification Failed ("HF")
        - Income Limit - Not Within Range ("IN")
        - MAGI Medi-Cal Projected Annual Income - Admin Verification Failed ("PF")
    4. Is not already captured by under "Failure to Respond" logic mentioned above.
8. For individuals to be recategorized under either "Failure to Respond" or "Over Income" their CalHEERS Eligibility Reason, Reason Code (CT466 – Eligibility Evaluation Reason) will be used to evaluate based on a hierarchical order
    1. Failure to apply for/accept unconditionally available income ("WS") – **Maps to "Failure to Respond"**
    2. Deceased - Admin Verified ("DF") -
    3. MAGI Medi-Cal Current Monthly Income - Admin Verification Failed ("CF") – **Maps to Over Income**
    4. MAGI Medi-Cal Projected Annual Income - Admin Verification Failed ("PF") – **Maps to Over Income**
    5. Individual not a California Resident ("OS")
    6. Residency - Admin Verification Failed ("RF") – **Maps to "Failure to Respond"**
    7. Failure to comply with Third Party Liability ("TP") – **Maps to "Failure to Respond"**
    8. Incarceration - Admin Verified ("IF")
    9. MEDS MEC Check ("MM")
    10. Income Limit - Not Within Range ("IN") – **Maps to Over Income**
    11. M1/M2-Parent/Caretaker Relative Disc/Denied due to Dependent Child w/o MEC ("MR")
    12. Medicare - Admin Verified (Only for the New Adult Group) ("MF")
    13. Failure to provide or apply for SSN ("FS") – **Maps to "Failure to Respond"**
    14. SSN - Admin Verification Failed ("SF")

15. SSN Waiver - Admin Verification Failed ("SV")
16. Failure to provide identity/name ("NG") – **Maps to "Failure to Respond"**
17. Failure to apply for Medicare ("AM") – **Maps to "Failure to Respond"**
18. Failure to provide 2.1Q (Child Support) ("CS") – **Maps to "Failure to Respond"**
19. MAGI Medi-Cal Household Income Other Member - Admin Verification Failed ("HF") – **Maps to Over Income**
20. Failure to provide Other Health Insurance information ("HI") – **Maps to "Failure to Respond"**
21. Negative Action Discontinued ("NS")
22. [No CalHEERS Eligibility Status Reason] ("Did not Apply for Aid" will be the default value).

2.1.3 Report Location

- **Global: Reports**
- **Local: Scheduled**
- **Task: State**

2.1.4 Security Updates

1. Security Rights

Security Right	Right Description	Right to Group Mapping
N/A	N/A	N/A

2. Security Groups

Security Group	Group Description	Group to Role Mapping
N/A	N/A	N/A

2.1.5 Report Usage/Performance

Logic updates are not expected to affect the overall performance of the reports.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Reports	DHCS Renewals Master Request Report design	DHCS+Renewals+ Master+Request.do
2	Reports	DHCS Renewals Master Request Template and Aid Code List v 2.5 (01.05.2023)	DHCS Renewals Master Request Tem

4 REQUIREMENT

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.24.1.11	The CalSAWS shall support all reports required by federal, State, and local laws, rules, regulations, ordinances, guidelines, directives, policies, and procedures, including statistical, operational, workload, and fiscal reports.	The DHCS Renewals Master Request report will be updated to recategorize continued and discontinued and capture auto authorized individuals and aid code data as per the latest guidelines provided by DHCS.

5 APPENDIX

5.1 Medi-Cal Definitions

Auto Ex-Parte / Auto Authorized: When an individual's Medi-Cal renewal due date is automatically advanced through CalHEERS via ehit (batch job).

Manual Ex-Parte / Manually Authorized: When an individual's Medi-Cal renewal due date is manually advanced when a worker runs EDBC on their Medi-Cal program and does not have the need to contact the individual/household (a packet is not generated/sent).

Rolling Renewal: When a Medi-Cal program has a renewal within a 9 month window after the current renewal due date. The Renewals Master Request report does not capture rolling renewals.

5.2 Renewals Master Request Report Specific Logic Definitions

Auto Authorization Logic (Current): The auto authorization logic looks at active Medi-Cal programs that have active members in the renewal due month that fulfill the following conditions:

- Has either a Batch EDBC or Converted EDBC ran at least within the past five months from the report month and effective within the last four months from the report month. Furthermore, this EDBC has a run reason code of "RE".
- Has a CalHEERS transaction tied to each member's CalHEERS details and has an eligibility status of "Eligible".
- Has a referenced CalHEERS transaction with:
    - An effective date of four months prior to the report month,
    - A type code of "Eligibility Determination Request",
    - A run reason code of "Renewal - batch administrative renewal",
    - A batch reason code of "Batch MAGI Redetermination EDR".

Discontinuance Indicator (DISC_IND): This is a Renewals Master Request report indicator only and is marked "Y" if a Rescission does not happen before Renewal or doesn't exist and the participant's role is not of type "Member" ("ME") then the individual is considered discontinued.

Manual Authorization Logic (Current): The manual authorization logic looks at active Medi-Cal programs that have active members in the renewal due month that fulfill the following conditions:

- Has an Online EDBC ran at least within the past five months from the report month and effective within the last four months from the report month. Furthermore, this EDBC has a run reason code of "RE".

- Has a CalHEERS transaction tied to each member's CalHEERS details with the following:
    - An effective date of four months prior to the report month,
    - A type code of "Determination Response",
    - A run reason code of either "Renewal - batch administrative renewal", or "Renewal - manual renewal",
- And does **NOT** have a Medi-Cal Packet with the following:
    - A "Sent" status with a status date less than the EDBC run date.
    - A packet effective date between five months prior to the report month and three months prior to the report month.

Rescind Indicator (RESCIND_IND): This is a Renewals Master Request report indicator only and is indicator is marked "Y" if the discontinuance indicator is marked "Y", if the rescind before renewal indicator is "N" or does not exist, and if the rescission event exists otherwise no value is inputted.

Rescind Before Renewal Indicator (RESCIND_BEFORE_RE): This is a Renewals Master Request report indicator only and is marked "Y" if the rescind ("AS") event date is less than or equal to the report month minus three months. The indicator is marked "N" if rescind ("AS") event date is greater than the report month minus three months.

Stable Income: When an active Medi-Cal household aided by a Non-MAGI aid code has an EDBC captured by the report that has the "Non-MAGI Auto Renewal Indicator" set to "Y" then the household will be considered to have stable income.

5.3 MAGI and Non-MAGI Aid Code Lists

5.3.1 Restricted MAGI Aid Code List to be newly captured

Aid Code	Aid Code Description
2A	2A - Abandoned Baby
3N	3N - AFDC-1931(B) Full
3V	3V - AFDC-1931(B)-ESO/Pregancy
44	44 - 200%-Pregnancy Citizen
47	47 - 200%-Infant-Full
48	48 - 200%-Pregnancy-OBRA
4M	4M - FC Continuing Medi-Cal
69	69 - 200% OBRA Infant

72	72 - 133% Child-Full
74	74 - 133% Child-ESO
7A	7A - 100% Child-Full
7C	7C - 100% Child-OBRA-ESO
8N	8N - 133% Excess Property Child-ESO
8P	8P - 133% Excess Property Child-Full
8R	8R - 100% Excess Property Child-Full
8T	8T - 100% Excess Property Child-ESO
H1	H1 - Infant 200-250%
H2	H2 - Child 1-6 133-150%
H3	H3 - Child 1-6 150-250% P
H4	H4 - Child 6-19 100-150%
H5	H5 - Child 6-19 150-250% P

Figure 5.2.1.1 – MAGI Aid Code List

5.3.2 Restricted Non-MAGI Aid Code List to be newly captured

Aid Code	Aid Code Description
7H	7H - TB
80	80 - QMB
8A	8A - QWDI
8C	8C - SLMB
8D	8D - Qualified Individual 1-135%
G1	G1 - MC SOC State Inmates

Figure 5.2.2.1 – Non-MAGI Aid Code List

5.4 Auto and Manual Ex-Parte Scenarios

Scenario #1:

A household has three individuals (A, B, and C) under the Medi-Cal program. All individuals are under a MAGI aid code and has a renewal due date of June 2024. CalHEERS identified one individual (A) as eligible and did not identify the other two (B, C) as eligible effective May 2024. All individuals will be captured under "Total Number of Renewals Due" in the report month September 2024 generated in October 2024 for the reporting period June 2024 to September 2024. Additionally individual (A) will be categorized under "Auto Ex-Parte" for MAGI and within a category in the "Completion Timeframe" of the report.

Scenario #2:

A household has five individuals under the Medi-Cal program. All individuals are under a Non-MAGI aid code and has a renewal due date of June 2024. All individuals are considered for Stable Income and will be counted under a category in "Completion Timeframe" and "Auto Ex-Parte" for Non-MAGI for the report month of September 2024, generated in October 2024 for reporting period June 2024 – September 2024.

Scenario #3:

A household has one individual under the Medi-Cal program. The individual is under a MAGI aid code and has a renewal due date of June 2024. The worker runs an online EDBC a month prior to auto authorization and prior to packet generation. The individual will be captured under MAGI for a category in "Completion Timeframe" and "Manual Ex-Parte" for the report month of September 2024, generated in October 2024 for reporting period June 2024 – September 2024.

Scenario #4

A household has four individuals A, B, C, and D under the Medi-Cal program. All individuals have a renewal due date of June 2024. One individual (A) is aided under MAGI and Non-MAGI and the rest have aid codes only under Non-MAGI aid codes. Individual A fulfills the requirements of auto-authorization for MAGI. All individuals A, B, C, and D also fulfill the requirements for stable income. Individual A will be counted under a category in "Completion Timeframe" and "Auto Ex-Parte" under MAGI as MAGI auto authorization takes priority. The three individuals B, C, and D under Non-MAGI aid codes will be counted under a category in "Completion Timeframe" and "Auto Ex-Parte" under Non-MAGI for the report month of September 2024, generated in October 2024 for reporting period June 2024 – September 2024.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-269157 - Update the trigger (EDBC_SOLCT_CF) to not send the CF 285A Packet to Individuals on Kin-GAP, Incarcerated or 'Pending' CalFresh on another case

10/02/2024

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Owner	Satish Kumar
	Preparer	Satish Kumar
	Reviewer	Business Analyst
	Approver	Caroline Bui / Norma Meza

APPROVAL DATE	APPROVED VERSION	REVIEWED AND APPROVED BY

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CA-269157 - Update the trigger (EDBC_SOLCT_CF) to not send the CF 285A Packet to Individuals on Kin-GAP, Incarcerated or 'Pending' CalFresh on another case

1 OVERVIEW

Per ACL 21-52, this SCR identifies the changes required to the existing functionality in CalSAWS system during Medi-Cal renewal processes.
Medi-Cal beneficiaries may be potentially eligible for CalFresh, using existing functionality and income and expense details available in the system, or upon receipt of the Medi-Cal renewal information, the system will run Eligibility Determination and Benefit Calculation (EDBC) to complete the Medi- Cal renewal process and to assess if the household is potentially eligible for CalFresh benefits.
If the household is deemed potentially eligible for CalFresh, the system will generate a CF 285A packet during batch.

1.1 Current Design

For Medi-Cal renewals, the PB00R1948 batch job will run the CalFresh non-financial and financial eligibility rules, using the income and expense details available at the time of approving the Medi-Cal program.

The system sends a CF 285A/PUB 520 Packet in batch when a Medi-Cal household is potentially eligible for CalFresh benefits.

The job has functionality to skip the CalFresh Eligibility test when there is

1. Medi-Cal program no longer open - (Skip whole program),
2. Medi-Cal program was already actioned and is not being run through RE - (skip whole program),
3. Retro Medi-Cal month for the Medi-Cal program - (skip whole program),
4. Person has a living arrangement of type "Nursing Home" - (skip person),
5. Person has a requested Medi-Cal type of "Medical Savings Programs (MP)" - (skip person),
6. Person has a requested Medi-Cal type of "LTC" - (skip person),
7. Person has MPPP aid from OPA based on aid code - (skip person),
8. Person has Minor Consent aid from OPA based on aid code - (skip person),
9. Person has LTC aid from OPA based on aid code - (skip person),
10. Person has a requested Medi-Cal type regarded as "Minor Consent" - (skip person),
11. Person has Safe at Home case flag - (skip person),
12. Person has Status Reason for Out of home or Related Reason - (skip person *This includes incarcerated persons.*)

13. Person is Active, Pending, or ineligible on a CalFresh, Foster Care or RCA program on the current case - (skip person),
14. Person has an Other Program Assistance for CalFresh, Foster Care, or RCA - (skip person),
15. If the primary Applicant is skip from any of the above, then skip the whole program and Foster Care Medi-Cal programs.

1.2 Requests

Exclude Medi-Cal program person(s) from the CalFresh eligibility checks for CF 285A form generation who meet any of the following conditions:

1. Any Individuals in the case receiving Kin-GAP assistance.
2. Any Incarcerated individuals in the case.
3. Any Individuals 'Pending' CalFresh on another case.
4. Any Individuals with Out-of-State Kin-GAP or AAP income.
5. A Requested Medi-Cal Type of 'Child Welfare Services Medi-Cal' not currently excluded.

1.3 Overview of Recommendations

Update CalFresh Solicitation Letter rules to exclude Medi-Cal program person(s) from the CalFresh eligibility checks for CF 285A form generation who meet any of the following conditions:

1. Any Individuals in the case receiving Kin-GAP assistance.
2. Any Incarcerated individuals in the case.
3. Any Individuals 'Pending' CalFresh on another case.
4. Any Individuals with Out-of-State Kin-GAP or AAP income.
5. A Requested Medi-Cal Type of 'Child Welfare Services Medi-Cal' not currently excluded.

1.4 Assumptions

1. This change is only related to Medi-Cal assistance cases, and which are potentially eligible for CalFresh assistance based on the eligibility budget calculations.
2. There is no change to the trigger conditions of PB00R1948 batch job.
3. This SCR only adds additional exclusion conditions to exclude the Medi-Cal cases to determine if they are eligible for CalFresh assistance.

2 RECOMMENDATIONS

2.1 Medi-Cal / CalFresh EDBC Rules Updates

2.1.1 Overview

When EDBC is run on Medi-Cal cases, CalSAWS checks for CalFresh eligibility to set the form indicator flag that is picked by the correspondence batch job PB00R1948 to generate the CF 285A Application Packet. These rules check to exclude Medi-Cal persons who also Minor Consent, Safe at Home and Foster Care.

2.1.2 Description of Changes

Update CalFresh Solicitation Letter rules to modify the CF 285A form generation rules to exclude Medi-Cal program person(s) from the CalFresh eligibility checks for CF 285A form generation who meet any of the following conditions:

1. Any Individuals in the case receiving Kin-GAP assistance.
2. Any Incarcerated individuals in the case.
3. Any Individuals 'Pending' CalFresh on another case.
4. Any Individuals with Out-of-State Kin-GAP or AAP income. (need to look for income entry in Other Program Assistance and skip the CF eligibility check)
5. A Requested Medi-Cal Type of 'Child Welfare Services Medi-Cal' not currently excluded.

2.1.3 Programs Impacted

Medi-Cal
CalFresh

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	HOW REQUIREMENT MET
2.8.5.2	The LRS shall evaluate all new and/or changed information to determine if any new correspondence needs to be generated and distributed to the applicant/participant, and then shall generate and distribute the correspondence, as appropriate.	During the renewal process of Medi-Cal Cases, new rules are created to skip the CalFresh eligibility check for the medical cases with specific scenarios,

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-272696

Update the ICT termination batch job to terminate when ICT approved.

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Supritha Sundaram
	Reviewed By	Balakumar Murthy, Ken Ford, John Pratt, Teresa Magnuson

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
06/05/2024	1.0	Initial Draft	Supritha Sundaram
8/08/2024	2.0	Update with EW05	Supritha Sundaram
9/16/2024	2.1	Add assumptions	Supritha Sundaram
10/1/2024	2.2	Clarified descriptions from Teresa's comments	Supritha Sundaram

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OVERVIEW

The purpose of the SCR CA-272696 is to prevent potential overlap of benefits during ICT transfer by updating the ICT termination batch jobs to terminate eligibility in sending county at the same time the approval disposition is received

Commented [TM1]: "at the same time the approval disposition is received."

1.1. Current Design

The ICT batch jobs do not run the termination until the following month, sometimes delaying the termination transaction in MEDS and preventing the receiving county's aid from picking up. This is resulting in the need to call/contact sending county for every ICT to ask them to terminate prior to our approval.

1.2. Requests

With this SCR, we have to run EDBC effective month of approval in the receiving county through come up month and ensure discontinuance in sending county occurs before or same time as approval in receiving county.

Commented [TM2]: "through"

1.3. Overview of Recommendations

Update EictTransactionSweep and EictCaseFsDiscSweep batch jobs to terminate eligibility in sending county at time of approval disposition received.

CalSAWS batch job looks for these cases to terminate nightly, however the batch job does not terminate the program, instead the batch job flags the case to terminate on effective date.

Due to the batch job not running the termination until the following month, the termination transaction is not sending to MEDS timely which is preventing the receiving county's aid from picking up. This is resulting in the need to call/contact sending county for every ICT to ask them to terminate prior to our approval.

The CalSAWS batch job should look for cases nightly and terminate them the same day with the termination effective for the end of the month prior to the receiving county's approval date.

Assumptions

County should not run retro EDBC for past dates

RECOMMENDATIONS

2.1 Update EictTransactionSweep (PB00E151).

2.1.1 Overview

1. Update existing logic to always process discontinuance with effective date sent to receiving county.

2.1.2 Description of Change

PB00E151 batch job looks for Medi-cal and CalWORKS programs that have ICT dispositions back from the receiving County and are still active in the sending County and inserts into SYS_TRANSACT to discontinue the program in sending county.

Commented [TM3]: "Medi-Cal and CalWORKS"

PB00E151 should set the Medi-cal and CalWORKS discontinuance begin date/termination effective date to the end of the month prior to the receiving county's approval effective date on the Program Begin status date from receiving county, which should be the same as the effective date on the disposition.

Commented [TM4]: "Medi-Cal and CalWORKS"

This should ensure that EW40 transaction to MEDS is sent before the EW20 transaction

2.1.3 Execution Frequency

PB00E151 Daily

2.1.4 Key Scheduling Dependencies

Same as before

2.1.5 Counties Impacted

All

2.1.6 Category

Core-prime

2.1.7 Data Volume/Performance

N/A

2.1.8 Failure Procedure/Operational Instructions

The existing error handling/operational procedure will be followed.

3.1 Update EictCaseFsDiscSweep (PB00E270).

3.1.1 Overview

Update existing logic to always process discontinuance with effective date sent to receiving county.

3.1.2 Description of Change

PB00E270 batch job looks for CalFRESH programs that have ICT dispositions back from the receiving County and are still active in the sending County and inserts into SYS_TRANSACT to discontinue the program in sending county.

PB00E270 should set the CalFRESH discontinuance begin date/termination effective date to the end of the month prior to the receiving county's approval effective date on the Program Begin status date from receiving county, which should be the same as the effective date on the disposition.

This should ensure that EW40 transaction to MEDS is sent before the EW20 transaction

3.1.3 Execution Frequency

PB00E270 Daily

3.1.4 Key Scheduling Dependencies

Same as before

3.1.5 Counties Impacted

All

3.1.6 Category

Core-prime

3.1.7 Data Volume/Performance

N/A

3.1.8 Failure Procedure/Operational Instructions

The existing error handling/operational procedure will be followed.

3.2 Suppress EW05

3.2.1 Overview

Suppress EW05 transaction for ICT cases.

3.2.2 Description of Change

Sending EW05 to MEDS from Calsaws will shut down the county's eligibility and post the receiving County's eligibility when the sending County's eligibility is still active in MEDS. Since this SCR will handle the first action, EW05 will no longer be necessary to be sent. Modify MEDS Interface jobs to suppress EW05 transaction when cash-based Medi-Cal/Medi-Cal is approved from the receiving county.

3.2.3 Execution Frequency

MEDS interface jobs Daily

3.2.4 Key Scheduling Dependencies

Same as before

3.2.5 Counties Impacted

All

3.2.6 Category

Core-prime

3.2.7 Data Volume/Performance

N/A

3.2.8 Failure Procedure/Operational Instructions

The existing error handling/operational procedure will be followed.

3.2.9 Assumptions

When the EW40 fails due to discrepancies such as an SSN mismatch, alerts will be generated. They county should manually submit the MEDS Online transactions.

APPENDIX

N/A

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-275013

ACWDL 20-21 - Update MC RE Packets Variable Population Logic - Phase 2

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Justin Bourbonniere
	Reviewed By	Raj Devidi, Nina Butler, Laura Alba, Maggie Orozco-Vega, Elisa Miller, Sireesha Kommajosyula, William Baretsky

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/01/2024	1.0	Initial Design	Justin Bourbonniere
11/20/2024	1.1	Region 6 Feedback	Justin Bourbonniere

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1 OVERVIEW

This SCR will update the following MC RE Packets: MAGI Redetermination Packet (MAGI RE Packet), Non-MAGI Redetermination Packet (Non-MAGI RE Packet), Mixed Household Redetermination Packet (Mixed Household RE Packet). The household members section will populate inmates permanently out of the home and tax dependents permanently out of the home. The income section will populate income types without a source. When a person on the case is a dependent the tax information section will specify who the person is a dependent of.

1.1 Current Design

Currently Medi-Cal Renewal packets exclude people who are permanently out of the home, including inmates and tax dependents. The income will not be populated if a source is not specified for the income. The tax information section populates the word "dependent" without stating who the person is a dependent of.

1.2 Requests

For the following MC RE Packets:

1. MAGI Redetermination Packet (MAGI RE Packet)
    a. Update the variable population of the "Tax Information" section to populate "Dependent of <person name>" or "Dependent of Non-custodial parent" instead of "Dependent".
    b. Update the variable population in the "Household members" section to populate inmates who are permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
    c. Update the variable population in the "Household members" section to populate tax dependents who are permanently out of the home.
    d. Update the Medi-Cal RE packets data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.
2. Non-MAGI Redetermination Packet (Non-MAGI RE Packet)
    a. Update the variable population in the "Household members" section to populate inmates who are permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
    b. Update the Medi-Cal RE packets data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.
3. Mixed Household Redetermination Packet (Mixed Household RE Packet)

a. Update the variable population of the “Tax Information” section to populate “Dependent of <person name>” or “Dependent of Non-custodial parent” instead of “Dependent”.
b. Update the variable population in the “Household members” section to populate inmates who are permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
c. Update the variable population in the “Household members” section to populate tax dependents who are permanently out of the home.
d. Update the Medi-Cal RE packets data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

1.3 Overview of Recommendations

For the following MC RE Packets:

1. MAGI Redetermination Packet (MAGI RE Packet)
    a. Update the variable population of the “Tax Information” section to populate “Dependent of <person name>” or “Dependent of Non-custodial parent” instead of “Dependent”.
    b. Update the variable population in the “Household members” section to:
        i. Populate Inmates who are part of the tax household and permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
        ii. Populate Tax dependents who are permanently out of the home if the dependent is claimed by someone in the home.
    c. Update the Medi-Cal RE packets data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

2. Non-MAGI Redetermination Packet (Non-MAGI RE Packet)
    a. Update the data population for the “Household section” to populate the following people, in addition to the current population logic:
        i. Inmates who are permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
    b. Update the data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

3. Mixed Household Redetermination Packet (Mixed Household RE Packet)

a. Update the variable population of the “Tax Information” section to populate “Dependent of <person name>” or “Dependent of Non-custodial parent” instead of “Dependent”.
b. Update the variable population in the “Household members” section to:
    i. Populate Inmates who are part of the tax household and permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
    ii. Populate Tax dependents who are permanently out of the home if the dependent is claimed by someone in the home.
c. Update the Medi-Cal RE packets data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

Note: These same changes must also be done to the MC 210 RV, MC 216, and MC 217 stand-alone forms.

1.4 Assumptions

1. All other logic associated to the MC RE Packets listed in this document are not changed unless explicitly specified in the recommendation sections.
2. All CalSAWS API functionality will retain current functionality unless stated in this SCR.

2 RECOMMENDATIONS

2.1 Updates to Existing MAGI RE Packet for LA County and Migration Counties Recommendation

2.1.1 Overview

This recommendation is to update the variable population logic of the existing MAGI RE Packet to update the variable population in the "Household members" section to populate inmates who are permanently out of the home and tax dependents who are permanently out of the home.

Update the MAGI RE packet data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

Update the MAGI RE Packet data population for the 'Tax Information section' when a person on the case is a dependent the tax information section will specify who the person is a dependent of.

There are separate packets for LA County and Migration Counties.

Current Program: Medi-Cal

Current Forms Category: Application

Current Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Spanish, Tagalog, Thai, Ukrainian, Vietnamese.

Current Imaging Category: Customer Reporting

Current Imaging Form Name: MAGI RE Packet

Template Repository Visibility: Los Angeles County, Migration Counties

2.1.2 Form Verbiage

There are no changes to this section for the MAGI RE Packet.

2.1.3 Form Variable Population

The variable population logic of the MC 216 is used to populate the form in the packet for both LA County and Migration Counties.

1. Update the variable population of the "Tax Information" section "What is this person's tax filing status?" variable population where "dependent" currently populates instead populate as follows:

a. If the person is not claimed as a dependent by a non-custodial parent on the Tax Household Detail page populate "Dependent of <person name>".
Where <person name> is the name shown on the Tax Household Detail page under 'Who claims this person as a Dependent this year?"

OR

b. If the person is claimed as a dependent by a non-custodial parent on the Tax Household Detail page populate "Dependent of Non-Custodial Parent".

2. Update the data population for the "Household section" to populate the following people, in addition to the current population logic:
   a. Inmates who are part of the tax household and permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
   b. Tax dependents who are permanently out of the home if the dependent is claimed by someone in the home. This is based on the most recent record in the Tax Household Page.

3. Update the data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

   Note: These same changes must also be done to the MC 216 stand-alone form.
   Note: People other than inmates and tax dependents who are permanently out of the home will not populate.

2.1.4 Form Generation Conditions

There are no changes to this section for the MAGI RE Packet.

2.2 Updates to Existing Non-MAGI RE Packet for LA County and Migration Counties Recommendation

2.2.1 Overview

This recommendation is to update the variable population logic of the existing Non-MAGI RE Packet to update the variable population in the "Household members" section to populate inmates who are permanently out of the home.

Update the Non-MAGI RE packet data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

There are separate packets for LA County and Migration Counties.

Current Program: Medi-Cal

Current Forms Category: Application

Current Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Spanish, Tagalog, Thai, Ukrainian, Vietnamese.

Current Imaging Category: Customer Reporting

Current Imaging Form Name: Non-MAGI RE Packet

Template Repository Visibility: Los Angeles County, Migration Counties

2.2.2 Form Verbiage

There are no changes to this section for the Non-MAGI RE Packet.

2.2.3 Form Variable Population

The variable population logic of the MC 210 RV is used to populate the form in the packet for both LA County and Migration Counties.

1. Update the data population for the "Household section" to populate the following people, in addition to the current population logic:
   a. Inmates who are permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.

2. Update the data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

   Note: These same changes must also be done to the MC 210 RV stand-alone form.
   Note: People other than inmates who are permanently out of the home will not populate.

2.2.4 Form Generation Conditions

There are no changes to this section for the Non-MAGI RE Packet.

2.3 Updates to Existing Mixed Household RE Packet for LA County and Migration Counties Recommendation

2.3.1 Overview

This recommendation is to update the variable population logic of the existing Mixed Household RE Packet to update the variable population in the "Household members" section to populate inmates who are permanently out of the home and tax dependents who are permanently out of the home.

Update the Mixed Household RE packet data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

Update the Mixed Household RE Packet data population for the 'Tax Information section' when a person on the case is a dependent the tax information section will specify who the person is a dependent of.

There are separate packets for LA County and Migration Counties.

Current Program: Medi-Cal

Current Forms Category: Application

Current Languages: Arabic, Armenian, Cambodian, Chinese, English, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Spanish, Tagalog, Thai, Ukrainian, Vietnamese.

Current Imaging Category: Customer Reporting

Current Imaging Form Name: Mixed Household RE Packet

Template Repository Visibility: Los Angeles County, Migration Counties

2.3.2 Form Verbiage

There are no changes to this section for the Mixed Household RE Packet.

2.3.3 Form Variable Population

The variable population logic of the MC 217 is used to populate the form in the packet for both LA County and Migration Counties.

1. Update the variable population of the "Tax Information" section 'What is this person's tax filing status?" variable population where 'dependent' currently populates instead populate as follows:
    a. If the person is not claimed as a dependent by a non-custodial parent on the Tax Household Detail page populate "Dependent of <person name>".
    Where <person name> is the name shown on the Tax Household Detail page under 'Who claims this person as a Dependent this year?"

OR

b. If the person is claimed as a dependent by a non-custodial parent Tax Household Detail page populate "Dependent of Non-Custodial Parent". This is based on the most recent record in the Tax Household Page.

2. Update the data population for the "Household section" to populate the following people, in addition to the current population logic:
    a. Inmates who are part of the tax household and permanently out of the home. Except inmates who have the option "exclude incarcerated" selected in the Household Status MC Exceptions Field found on the Household Status Detail Page implemented in CA-275463.
    b. Tax dependents who are permanently out of the home if the dependent is claimed by someone in the home.

3. Update the data population for the 'Source of income' field on the Income section to populate 'Source' if it exists, otherwise populate the 'Type' from the income list page.

    Note: These same changes must also be done to the MC 217 stand-alone form.
    Note: People other than inmates and tax dependents who are permanently out of the home will not populate.

2.3.4 Form Generation Conditions

There are no changes to this section for the Mixed Household RE Packet.

2.4 Self-Service Portal: Forms Batch Job for MC 216

2.4.1 Overview

The Forms Status Batch job (PB00C3XX) sends MC 216 form information to the Self-Service Portal to display to the customer. This section outlines the necessary modification for the Forms Status batch for MC 216 form to send/display the prepopulated information from CalSAWS to the Self-Service Portal.

2.4.2 Description of Change

1. Update Forms Status batch job logic to send the following field values for MC 216 - MAGI RE Packet:

a. What is this person's tax filing status?
    i. Populate value as described in Section 2.1.3.
b. Household members
    i. In addition to the current population logic, include the individuals as described in Section 2.1.3.
c. Source of Income
    i. Populate as described in Section 2.1.3.

2.4.3 Execution Frequency

No changes. This batch job runs during nightly batch on CalSAWS business days (Monday – Saturday).

2.4.4 Key Scheduling Dependencies

N/A

2.4.5 Counties Impacted

All CalSAWS Counties

2.4.6 Category

N/A

2.4.7 Data Volume/Performance

N/A

2.4.8 Failure Procedure/Operational Instructions

Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc.

2.5 Self-Service Portal: Forms API MC 217 Endpoint

2.5.1 Overview

The Forms Status Batch job (PB00C3XX) sends MC 217 form information to the Self-Service Portal to display to the customer. This section outlines the necessary modification for the Forms Status batch for MC 217 form to send/display the prepopulated information from CalSAWS to the Self-Service Portal.

2.5.2 Description of Change

1. Update Forms Status batch job logic to send the following field values for MC 217 - Mixed Household RE Packet:
    a. What is this person's tax filing status?
        i. Populate the value as described in Section 2.3.3.
    b. Household members
        i. In addition to the current population logic include the individuals as described in Section 2.3.3.
    c. Source of Income
        i. Populate the value as described in Section 2.3.3.

2.5.3 Execution Frequency

No changes. This batch job runs during nightly batch on CalSAWS business days (Monday – Saturday).

2.5.4 Key Scheduling Dependencies

N/A

2.5.5 Counties Impacted

All CalSAWS Counties

2.5.6 Category

N/A

2.5.7 Data Volume/Performance

N/A

2.5.8 Failure Procedure/Operational Instructions

Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc.

2.6 Self-Service Portal: Forms Status Batch job for MC 210 RV

2.6.1 Overview

The Forms Status Batch job (PB00C3XX) sends MC 210 RV form information to the Self-Service Portal to display to the customer. This section outlines the necessary modification for the Forms Status batch for MC 210 RV form to send/display the prepopulated information from CalSAWS to the Self-Service Portal.

2.6.2 Description of Change

1. Update Forms Status batch job logic to send the following field values for MC 210 RV - Non-MAGI RE Packet:
    a. What is this person's tax filing status?
        i. Populate the value as described in Section 2.2.3.
    b. Household members
        i. In addition to the current population logic include the individuals as described in Section 2.2.3.
    c. Source of Income
        i. Populate the value as described in Section 2.2.3.

2.6.3 Execution Frequency

No changes. This batch job runs during nightly batch on CalSAWS business days (Monday – Saturday).

2.6.4 Key Scheduling Dependencies

N/A

2.6.5 Counties Impacted

All CalSAWS Counties

2.6.6 Category

N/A

2.6.7 Data Volume/Performance

N/A

2.6.8 Failure Procedure/Operational Instructions

Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc.

2.7 Automated Regression Test

2.7.1 Overview

Create new regression test scripts based on the system test scenarios for the permanent functional changes outlined above

2.7.2 Description of Change

1. Evaluate each system test scenario for the potential of automation. Known exclusionary criteria:
    a. Temporary or one-time changes (ex., Data Change Requests, operational batch job execution)
    b. Technical limitations (ex., visual comparison of a static document against a template)
    c. Security restrictions (ex., access to an external service requiring Multi-Factor Authentication)
    d. Required manual intervention (ex., physical printing, document scanning, forced service outage)
2. For each scenario determined to be an automation candidate, modify the system test scenario to be executable as part of the Regression Test Suite. This may include the following:
    a. Repeatability: The script must be able to execute multiple times between data refreshes
    b. Targetability: The script must fully and accurately verify the actual result against the expected result of the scenario.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
#1	Forms	Translations required	CA-275013 Translation request.xlsx

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.7 CAR-1243	The LRS shall identify case actions that require a notice, NOA, form, letter, stuffer, or flyer, and shall generate that appropriate notice, NOA, form, letter, stuffer, or flyer, using variable case-specific information.	Updating the variable population logic of the MC RE Packets.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-275180

1099 Reconciliation Report- Update Service Type Code Mapping for CalWIN Counties

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Esequiel Herrera-Ortiz
	Reviewed By	Ravneet Bhatia, Gokul Suresh

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/01/2024	1.0	Initial Revision	Esequiel Herrera-Ortiz

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1 OVERVIEW

Counties receive their 1099 Interface Files from one of four different batch jobs. The differences between them are as follows:

San Bernardino / Merced (Ten99Dao)

- Includes payments issued via Payment Request or EDBC
- Accounts for Payment Adjustments and Recovery Account Collections.
- All payments for an organization are combined into one line.
- Takes into consideration several issuance statuses.
- **Excludes** Issuances which were cancelled.
- **Does not** have an organization Tax Type Code check on EDBC issued issuances.
- **Excludes** issuances that have a CREATED_BY value equal to a county code. These are issuances created by Data Change Request.

Stanislaus (Ten99Dao)

- Includes payments issued via Payment Request and EDBC
- Accounts for Payment Adjustments and Recovery Account Collections.
- Takes into consideration several issuance statuses.
- **Excludes** Issuances which were cancelled.
- **Does not** have an organization Tax Type Code check on EDBC issued issuances.
- **Excludes** issuances that have a CREATED_BY value equal to a county code. These are issuances created by Data Change Request.

Note: the Stanislaus process is like the San Bernardino/Merced file but is a file on its own.

Riverside (Riverside1099Dao)

- Includes payments issued via Payment Request and EDBC
- **Does not** account for Payment Adjustments and Recovery Account Collections.
- Only takes into consideration the 'Issued' issuance status.
- **Does not** exclude Issuances which were cancelled.
- Has an organization Tax Type Code check on EDBC issued issuances.
- **Does not** exclude issuances that have a CREATED_BY value equal to a county code. These are issuances created by Data Change Request.

Los Angeles

The CalSAWS system does not send a 1099 Interface File to Los Angeles County. That information is provided to them outside the system through their eCAPS interface. For Los Angeles, the base population logic for the 1099 Reconciliation Report will not be changed. The report is currently not picking up data for the county.

All Other CalSAWS Counties (MigrationTen99Dao)

- Includes payments issued via Payment Request and EDBC.
- **Does not** account for Payment Adjustments and Recovery Account Collections.
- Takes into consideration several issuance statuses.
- Excludes issuances which were cancelled.

- **Does not** have an organization Tax Type Code check on Service Payments or EDBC issued issuances.
- **Excludes** issuances that have a CREATED_BY value equal to a county code. These are issuances created by Data Change Request.

The CalSAWS system provides the 1099 Reconciliation Report which is used by the counties to review amounts paid to providers prior to the actual 1099 submission. This report displays summary information for every Tax Identification Number (TIN) where 1099 reportable payments were issued for the county. The report displays the total amount that will be reported for each TIN.

1.1 Current Design

Currently the 1099 Reconciliation Report is missing the service type mapping for the CalWIN counties. The report is defaulting to using the service type mapping of Alpine County. This is causing the reports to not pull transactions which are provided by the CalWIN counties but are not provided by Alpine County.

1.2 Requests

1. Update the service type mapping to include the missing CalWIN counties. This allows the 1099 Reconciliation Report to reconcile with the 1099 Interface Files sent to the counties. This change only applies to the current year and onward. This change does not apply to prior years.

1.3 Overview of Recommendations

1. Update the service type mapping to include the missing CalWIN counties. This allows the 1099 Reconciliation Report to reconcile with the 1099 Interface Files sent to the counties. This change only applies to the current year and onward. This change does not apply to prior years.

1.4 Assumptions

1. External Recovery Accounts are not included in the 1099 Interface Files, 1099 Reconciliation Report as they are not tied to a specific program or benefit month.
2. The existing report logic for Los Angeles County will not be updated with this SCR since they use the eCAPS interface. The report is currently not picking up data for the county either.
3. The changes outline in this SCR only apply to the year this SCR goes into production. It will not be applied to retro prior years.
4. Any change to the 1099 Interface File logic requires an update to the 1099 Reconciliation Report logic.

5. The base population logic for this report will need to be applied as of the beginning of the calendar year to have the report reconcile with the 1099 Interface File.
6. The 1099 Reconciliation Report will include information for Ventura County and Yolo County even though they have opted out of the 1099 Interface File process.

2 RECOMMENDATIONS

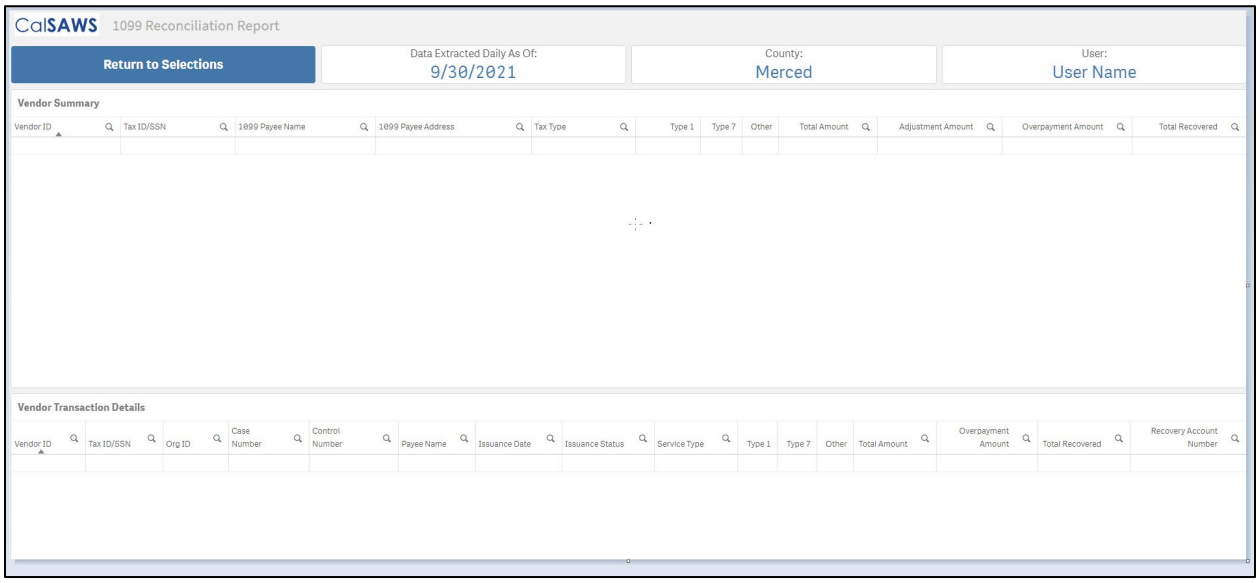
2.1 1099 Reconciliation Report

2.1.1 Overview

The 1099 Reconciliation Report provides detailed Vendor Payment Information for a given Organization ID that is reported on the 1099 Interface Files.

The report will be updated to include the Service type mapping for the CalWIN counties.

2.1.2 1099 Reconciliation Report Screenshot



Note: The template will not be updated as part of this change.

2.1.3 Description of Change

1. Update the service code mapping in the for the MigrationTen99Dao base logic to include the service code mapping for the missing CalWIN counties. See the attached Service Type by County mapping to see the current service mapping for all counties.

    a. Alameda (REFER_TABLE_51_DESCR)
    b. Contra Costa (REFER_TABLE_52_DESCR)
    c. Fresno (REFER_TABLE_53_DESCR)

d. Nevada (REFER_TABLE_30_DESCR)
e. Orange (REFER_TABLE_54_DESCR)
f. Placer (REFER_TABLE_55_DESCR)
g. Sacramento (REFER_TABLE_56_DESCR)
h. San Deigo (REFER_TABLE_57_DESCR)
i. San Francisco (REFER_TABLE_58_DESCR)
j. San Louis Obispo (REFER_TABLE_59_DESCR)
k. San Mateo (REFER_TABLE_60_DESCR)
l. Santa Barbara (REFER_TABLE_61_DESCR)
m. Santa Clara (REFER_TABLE_62_DESCR)
n. Santa Cruz (REFER_TABLE_63_DESCR)
o. Shasta (REFER_TABLE_46_DESCR)
p. Sierra (REFER_TABLE_34_DESCR)
q. Solano (REFER_TABLE_64_DESCR)
r. Sonoma (REFER_TABLE_65_DESCR)
s. Stanislaus (REFER_TABLE_5_DESCR)
t. Tulare (REFER_TABLE_66_DESCR)
u. Ventura (REFER_TABLE_67_DESCR)
v. Yolo (REFER_TABLE_68_DESCR)

Note: The base population is a combination of Issuances issued via Service Arrangement and EDBC.

a. Issuances Issued Via Service Arrangement

- Payment Request Status:

Code-109	Description
PI	Issuance Created

- **The Service Type is one of the services approved and provided by the county. Refer to Appendix 7.1 for the current listing of available services per county mapping.**
- Issuance does **not** display a created by value equal to the county code.

  Technical Note: This is done by excluding CREATED_BY equal to county codes.
- The Issuance was issued to an organization.

  *Technical Note: This can be checked ISSUANCE.ORG_ID is not null.

- The Issuance Issue Date is between the last successful date the report's data collection batch job ran and the current date of the batch run.
- The Issuance associated to the Payment Request has the latest status of:

Code-111	Description
PD	Paid
RL	Released
IS	Issued
RI	Reissued
HD	Held
RT	Returned
SP	Stop Payment
MI	Manually Issued

- The Issuance was never cancelled. If the issuance is later cancelled the issuance will drop from the report.

Code-111	Description
CA	Cancelled

b. Issuances Issued Via EDBC

- The issuance was issued via EDBC.

Technical Note: This can be checked by ISSUANCE.EDBC_ID is not null.

- The Issuance was issued to an organization.

Technical Note: This can be checked ISSUANCE.ORG_ID is not null.

- Issuance does not display a created by value equal to the county code.

  Technical Note: This is done by excluding CREATED_BY equal to county codes.
- The Issuance Issue Date is between the last successful date the report's data collection batch job ran and the current date of the batch run.

  Note: The report's data collection batch job runs on a weekly basis.
- The Issuance has the latest status of:

Code-111	Description
PD	Paid
RL	Released
IS	Issued
RI	Reissued
HD	Held
RT	Returned
SP	Stop Payment
MI	Manually Issued

- The Issuance was never cancelled. If the issuance is later cancelled the issuance will drop from the report.

Code-111	Description
CA	Cancelled

2.1.4 Report Location

- **Global: Reports**
- **Local: On Request**
- **Task: Fiscal**

2.1.5 Counties Impacted

All the prior CalWIN counties are impacted by the changes outlined in this section.

2.1.6 Security Updates

No updates will be made to the report's security.

2.1.7 Report Usage/Performance

The report's performance is expected to be the same.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Reports	Mapping of Service Types offered by Counties.	Service Types by County.xlsx

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.24.1.11	The LRS shall support all reports required by federal, State, and local laws, rules, regulations, ordinances, guidelines, directives, policies, and procedures, including statistical, operational, workload, and fiscal reports.	The 1099 Reconciliation Report is used to reconcile the 1099 Interface File received by counties.

4.2 Migration Requirements

DDID #	REQUIREMENT TEXT	Contractor Assumptions	How Requirement Met

5 MIGRATION IMPACTS

SCR Number	Functional Area	Description	Impact	Priority	Address Prior to Migration?
CA-231228	Reports	This is a joint 58 county design where there is regional approval aligning to the governance model.	No Impact	No	N/A

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-275523

Add MEDS Alert Link to Tasks

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Vallari Bathala
	Reviewed By	Justin Dobbs, Sarah Rich, Dymas Pena, Carlos Albances

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/08/2024	1.0	Initial Revision	Vallari Bathala, Justin Dobbs

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1 OVERVIEW

This enhancement will introduce the ability to navigate from a MEDS Alert Task directly to the MEDS Alert via a new hyperlink on the Task.

1.1 Current Design

CA-210615 introduced the ability to configure Task generation for MEDS Alerts. When staff receive a MEDS Alert Task, the user must navigate to the MEDS Alert Search page and perform the appropriate search to access and view the MEDS Alert Detail page for the specific MEDS Alert.

There is no direct link to the MEDS Alert from the Task.

1.2 Requests

Add a link to MEDS Alert Tasks that will navigate to the MEDS Alert Detail page.

1.3 Overview of Recommendations

1. Update MEDS Alert Task processing to associate MEDS Alert Tasks to the specific MEDS Alert. This association will facilitate a hyperlink on MEDS Alert Tasks allowing navigation to the specific MEDS Alert.
2. Modify the My Tasks, Task Search and Task Detail pages to display a hyperlink for MEDS Alert Tasks that will navigate to the MEDS Alert.

1.4 Assumptions

1. This enhancement will not enable the hyperlink for historic MEDS Alert Tasks, the hyperlink will only be available for MEDS Alert Tasks going forward from the time of this enhancement.
2. For MEDS Alert Tasks to generate, The Task Information panel must be configured and set to 'Active' status for each MEDS Alert.

2 RECOMMENDATIONS

This section describes the recommendations to associate Tasks that result from processing a MEDS Alert to the alert itself for simplified navigation to the alert from the Task.

2.1 MEDS Alert Task Guided Navigation

2.1.1 Overview

This section outlines the modifications necessary to support display of a hyperlink for MEDS Alert Tasks.

2.1.2 Task Search/Task Detail Mockups

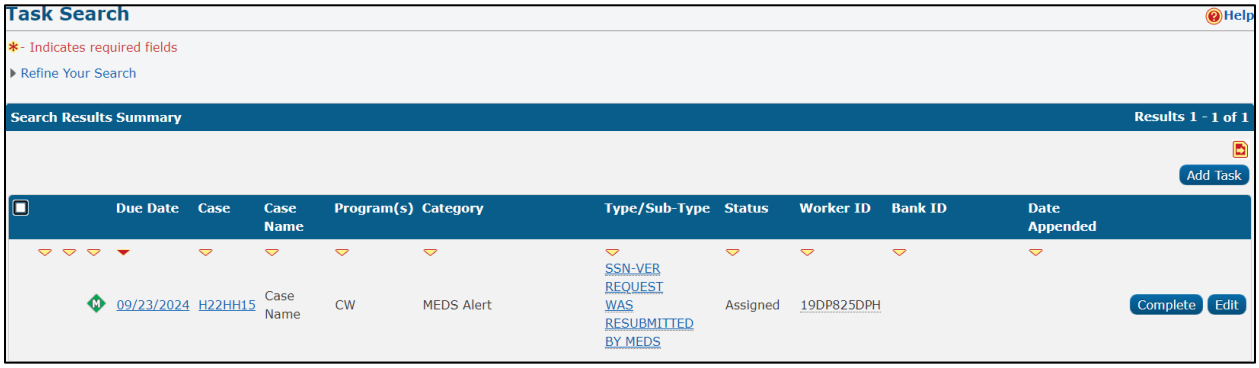

Figure 2.3.2-1 – Task Search Page

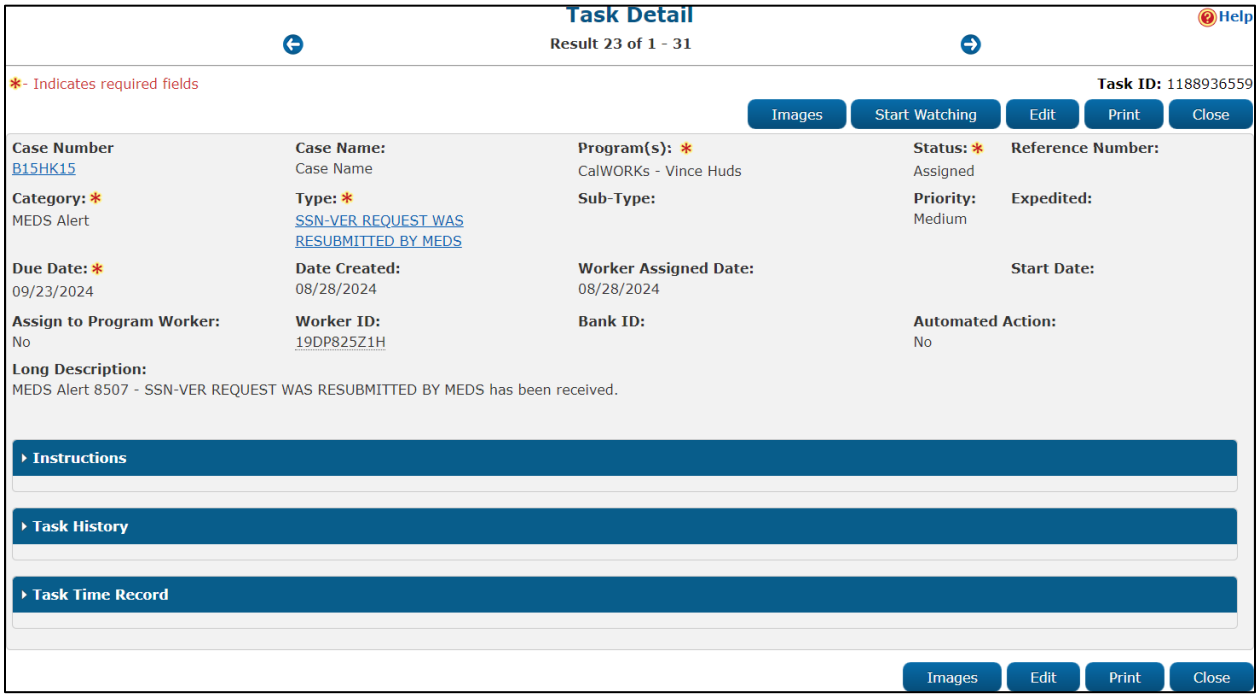

Figure 2.3.2-2 – Task Detail Page

2.1.3 Description of Change

1. **Technical:** Modify the processing logic of MEDS Alert Tasks to store the unique identifier of the MEDS Alert record and associate this data point to the new resulting Task. This data point is behind the scenes and will facilitate navigation directly to the MEDS Alert from the Task.
2. Modify the My Tasks, Task Search and Task Detail pages to display a hyperlink if:
    a. The Task is in an Assigned or In-Process Status
    b. The Task is associated to a MEDS Alert (determined via the existence of the data point described in Recommendation #1).
    c. The user's security profile includes the "MedsAlertSearchView" Security Right, which is associated to the "Meds Alert Search View" Security Group.

    The hyperlink will be available in the following field value for each of the mentioned pages:
    d. My Tasks: Type/Sub-Type
    e. Task Search: Type/Sub-Type
    f. Task Detail: Type

    Clicking the Task Type hyperlink will navigate the main CalSAWS window to the MEDS Alert Detail page in View Mode for the specific MEDS Alert that is associated to the Task.

2.1.4 Page Validations

N/A

2.1.5 Page Location

- **Global:** N/A
- **Local:** N/A
- **Task:** N/A
  Page is accessible through Utility bar's Tasks Option.

2.1.6 Security Updates

N/A

2.1.7 Page Mapping

N/A

2.1.8 Accessibility

None.

2.1.9 Page Usage/Data Volume Impacts

N/A

2.2 Automated Regression Test

2.2.1 Overview

Create automated regression test scripts to verify that a hyperlink is present on the My Tasks, Task Search, and Task Detail pages for a task associated to a MEDS Alert.

2.2.2 Description of Change

1. Create regression scripts to verify that the Type or Type/Sub-Type field contains a hyperlink on each of the following pages for a task associated to a MEDS Alert:
    a. My Tasks
    b. Task Search
    c. Task Detail
2. Create regression scripts to verify that clicking the hyperlink mentioned in the previous recommendation navigates the user to the MEDS Alert Detail page for the appropriate MEDS Alert in view mode in the main CalSAWS window.
3. **Technical:** Modify the automated regression test orchestrator to only include these regression test scripts for test environments that supports the targeted functionality.
   Technical Note: These scenarios are dependent upon the MEDS Alert Detail page being reachable in the targeted test environment. If for example, the Archive Phase 2 - MEDS Alert service is not available in a test environment, these scripts should be excluded from test execution in that environment.

3 SUPPORTING DOCUMENTS

N/A

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.19.2.1	The LRS shall include alerts and reminders for pending and ongoing work.	Update the My Tasks page and Get Next processing to allow Workers to select the Submit Month of the Tasks returned by the Get Next functionality.

5 OUTREACH

N/A

6 APPENDIX

N/A

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-276532

Add Submit Month to GetNext Functionality

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Vallari Bathala
	Reviewed By	Justin Dobbs, Sarah Rich, Dymas Penna, Carlos Albances

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
9/13/2024	1.0	Initial Revision	Vallari Bathala

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1 OVERVIEW

This design describes the details for adding an additional attribute to the My Tasks page which will allow for prioritization of Tasks from Get Next based on a specific Submit Month.

1.1 Current Design

Get Next processing determines which Task Banks a worker is associated to, filters the Tasks within these Banks to the Tasks that the worker's Position is configured to receive, and applies an order criterion (highest priority, oldest due date, oldest created date) to retrieve a single Task to be assigned to the Worker.

Prior to cut off in any given month, Workers are currently unable to prioritize Tasks for SAR 7s or REs that are due in the month. Adding functionality to select the Submit Month will allow Workers to address time sensitive Tasks first.

1.2 Requests

1. Provide functionality that allows Workers to select the Submit Month for SAR 7 and RE Tasks.

1.3 Overview of Recommendations

1. Update the My Tasks page to include an additional field that allows Workers to select the Submit Month of the Tasks returned by the Get Next functionality.
2. Modify Get Next processing to evaluate for Submit Month.

1.4 Assumptions

1. Submit Month is an optional feature that may be used by counties, if necessary, it is not a requirement for Get Next processing. Similarly, there are no adverse impacts to Get Next processing currently in place.

2 RECOMMENDATIONS

2.1 Task Pop-Up: My Tasks Page

2.1.1 Overview

This section describes modifications to the My Tasks page to include a Get Next Submit Month field.

2.1.2 My Tasks Mockup

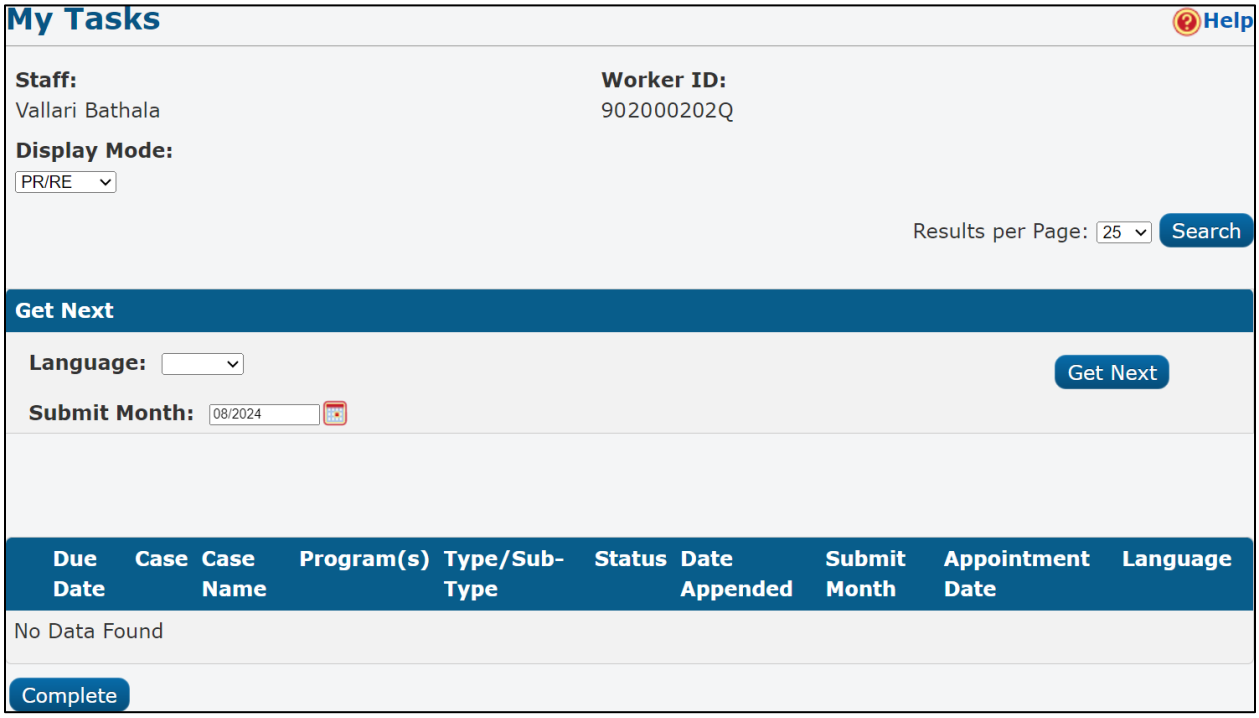

Figure 2.1.1 – My Tasks

2.1.3 Description of Changes

1. Add a new field in the 'Get Next' panel when Display Mode = PR/RE.
    a. Submit Month –This field will display as a calendar field formatted as MM/YYYY.

    Note: Any month can be entered in the field. The selected value is not limited to Current Month or Prior Month.

2.1.4 Page Location

- **Global:** N/A
- **Local:** N/A

- **Task:** N/A
  Page is accessible through Utility bar's Tasks Option.

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Add page mapping for the Submit Month field in My Tasks.

2.1.7 Accessibility

None.

2.1.8 Page Usage/Data Volume Impacts

N/A

2.2 Get Next Processing

2.2.1 Overview

Currently, when a worker clicks the Get Next button, processing will determine all Task Banks that the worker is associated to, then consolidate all Tasks within these Task Banks that the worker's Position is configured to work (via Task Category) and order the results by highest priority, oldest due date, and oldest created date. The first Task in the results will be assigned to the worker.

This section describes modifications to Get Next processing to evaluate and process Submit Month when necessary.

2.2.2 Description of Changes

Modify Get Next processing to evaluate and process the Submit Month attribute.
If the Get Next button is clicked and a Submit Month value is entered, the processing which retrieves the PR/RE Tasks from the Task Banks associated to the Worker will filter the results to those Tasks associated to a PR/RE with a Submit Month that matches the value entered in the Submit Month field. The resulting Tasks will then be ordered by highest priority, oldest due date and oldest created date. The first Task in the results will be assigned to the worker.

3 SUPPORTING DOCUMENTS

N/A

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.19.2.1	The LRS shall include alerts and reminders for pending and ongoing work.	Update the My Tasks page and Get Next processing to allow Workers to select the Submit Month of the Tasks returned by the Get Next functionality.

5 OUTREACH

N/A

6 APPENDIX

N/A

CalSAWS

California Statewide Automated Welfare System

CA-276716

Add Export Button to Employment Services Workload Inventory

CalSAWS	DOCUMENT APPROVAL HISTORY		
	Prepared By	Erika Kusnadi-Cerezo	
	Reviewed By		
DATE	**VERSION**	**REVISION DESCRIPTION**	**AUTHOR**
10/22/2024	1.0	Initial	Kusnadi.E
10/31/2024	1.1	Updates based on input from Committee: • Added a new assumption to Section 1.4 • Added a note to Section 2.1.3 that the Export icon will display on top and bottom of the Search Result Summary Section just like the Eligibility Workload Inventory page. • Updated Section 2.2.2 mockup to match the updates being done for the report. • Updated Section 2.2.3 to include more description on the value to be display on the report (this is based on how the information is currently being pulled on the Employment Services Workload Inventory page).	

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CA-276716 – Add Export Button to Employment Services Workload Inventory

1 OVERVIEW

The Employment Services Workload Inventory page currently does not have the functionality to allow user to export the search result to an excel report. This SCR will add the export functionality to the Employment Services Workload Inventory page.

1.1 Current Design

Currently, the Employment Services Workload Inventory page does not have the functionality to allow users to export the search result to an excel report.

1.2 Requests

Add the export functionality to the Employment Services Workload Inventory page.

1.3 Overview of Recommendations

1. Add the export functionality to the Employment Services Workload Inventory page.
2. Generate an excel report for the Employment Services Workload Inventory Search Result Summary.

1.4 Assumptions

1. All existing functionalities will remain unchanged unless its part of the SCR.
2. There are no changes to how the Employment Services Workload Inventory page currently work, this SCR is to add the functionality to allow users to export the data to an Excel report (Data found on the Search Result Summary of the Employment Services Workload Inventory page is what is being exported to Excel). CA-284306 is the SCR for changes related to the Employment Services Workload Inventory.

2 RECOMMENDATIONS

2.1 Employment Services Workload Inventory

2.1.1 Overview

The Employment Services Workload Inventory page allows user to access an inventory of programs and activities assigned to an office position. This SCR will add the export functionality to the Employment Services Workload Inventory page to allow users to export the Search Result to an Excel report.

2.1.2 Employment Services Workload Inventory Mockup

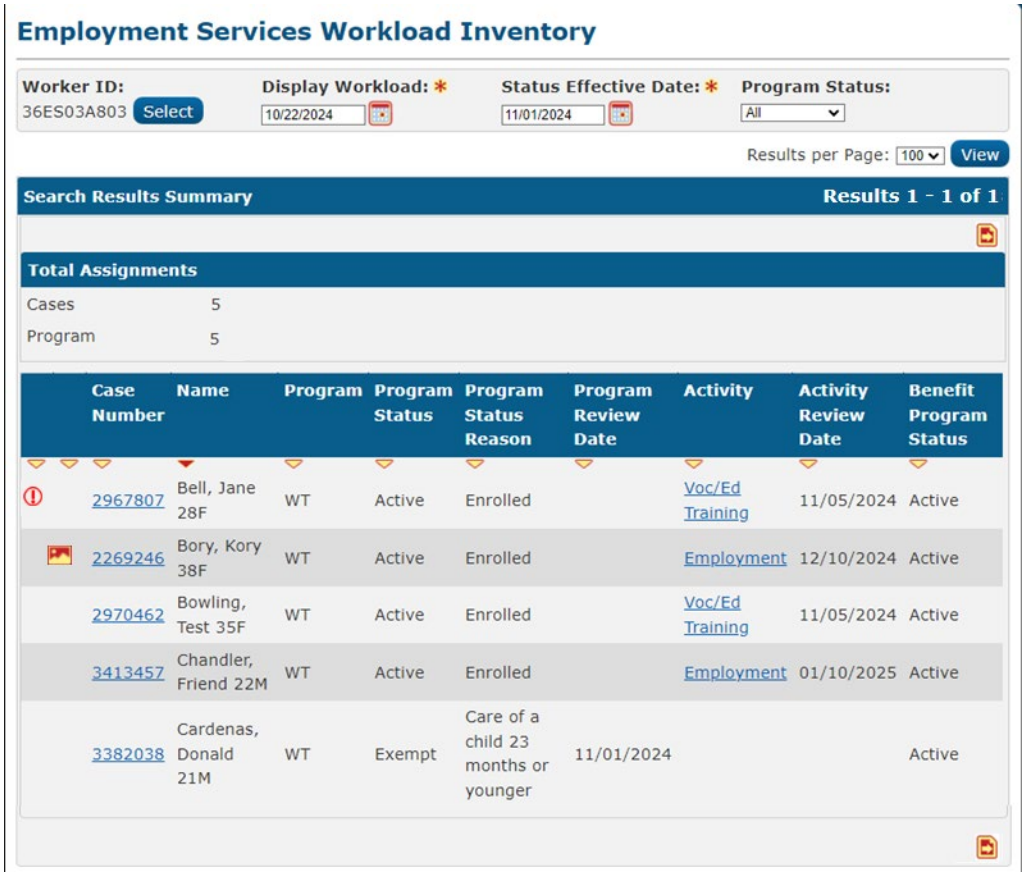

Figure 2.1.1 – Employment Services Workload Inventory

2.1.3 Description of Changes

1. Add the Export icon to the Employment Services Workload Inventory page.
    a. Export icon will only display when there is result being returned on the Search Result Summary section.
    b. Clicking on the Export Icon will invoke the CalSAWS export processing that will export the Employment Services Workload Inventory export report to Excel.

    Note: Export icon will display at the top and at the bottom of the Search Result Summary section (this will match the Eligibility Workload Inventory page).

2.1.4 Page Location

- **Global: Empl. Services**
- **Local: Workload Inventory**
- **Task: Workload Inventory**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

N/A

2.1.7 Accessibility

Accessibility was assessed and no changes are needed.

2.1.8 Page Usage/Data Volume Impacts

N/A

2.2 Employment Services Workload Inventory Export Report

2.2.1 Overview

The Employment Services Workload Inventory Export Report is a new functionality that is being added and will be available from the Employment Services Workload Inventory page. The report provides a listing of the employee workload information such as Case Number, Name of the Primary Applicant, Program, Program Status, Program Status Reason, Program Review Date, Activity, Activity Review Date and Benefit Program Status. This SCR will generate the Export Report in Excel.

2.2.2 Employment Services Workload Inventory Export Report Mockup

General Information
Report: Employment Services Workload Inventory Export
County: San Bernardino
Run Date: 10/05/2024 10:38 AM
Worker ID: 36ES03A803
Display Workload: 10/22/2024
Status Effective Date: 11/01/2024
Program Status: All
Total Assigned Cases: 25
Total Assigned Programs: 28

Figure 2.1.1 – General Information Tab

Newly Assigned Individual	New Case Image	Case Number	Name	Program	Program Status	Program Status Reason	Program Review Date	Activity	Activity Review Date	Benefit Program Status
Yes	No	2967807	Bell, Jane	WT	Active	Enrolled		Voc/Ed Training	11/05/2024	Active
No	Yes	2269246	Bory, Kory	WT	Active	Enrolled		Employment	12/10/2024	Active
No	No	2970462	Bowling, Test	WT	Active	Enrolled		Voc/Ed Training	11/05/2024	Active
No	No	3413457	Chandler, Friend	WT	Active	Enrolled		Employment	01/10/2025	Active
No	No	3382038	Cardenas, Donald	WT	Exempt	Care of a child 23 months or younger	11/01/2024			Active
No	No	2229792	Crib, Brook	WT	Active	Enrolled		Employment	12/10/2024	Active

Figure 2.2.1 – Exported Data Tab

2.2.3 Description of Changes

1. Generate an export report in excel for the Employment Services Workload Inventory that will have the following:
    1. General Information Sheet
       This sheet will contain general information including the parameters that were used to generate the Report. This sheet will include a single table with a single column titled "General Information" that will include the following rows:
        i. Report Name formatted as "Report: Employment Services Workload Inventory Export"
        ii. The county name formatted as "County: <County Name>". For example: "County: San Bernardino".
            1. This is the County that the user is logged into.
        iii. The date and time the report was generated formatted as "Run Date: <mm/dd/yyyy hh:mm AM/PM>". For example: "Run Date: 08/05/2021 10:38 AM".
        iv. The Worker ID formatted as "Worker ID: <Worker ID >". For Example: "Worker ID: 90LS00CF00".
            1. The worker number that is selected on the Employment Services Workload Inventory page when the report is generated.
               Note: It will only pull the program/case that the Worker is assigned as the Primary and not as Secondary.
        v. The Display Workload formatted as "Display Workload: MM/DD/YYYY. For Example: "Display Workload: 10/22/2024".
            1. This will be the date (in MM/DD/YYYY format) that is entered on the Display Workload field on the Employment Services Workload Inventory page.

vi. The Status Effective Date formatted as "Status Effective Date: MM/DD/YYYY. For Example: "Status Effective Date: 11/01/2024".
    1. This will be the date (in MM/DD/YYYY format) that is entered on the Status Effective Date field on the Employment Services Workload Inventory page.
vii. The Program Status formatted as "Program Status: <The Program Status >". For example: "Program Status: All".
    1. The Program Status that is selected on the Employment Services Workload Inventory page. Possible options are:
        a. All – the report displays all the programs regardless of the Program Status.
        b. Active – the report displays all the programs that is in Active Status.
        c. Deferred – the report displays all the programs that is in Deferred Status.
        d. Deregistered – the report displays all the programs that is in Deregistered Status.
        e. Discontinued – the report displays all the programs that is in Discontinued Status.
        f. Exempt – the report displays all the programs that is in Exempt Status.
        g. Good Cause – the report displays all the programs that is in Good Cause Status.
        h. Non-Comp – the report displays all the programs that is in Non-Comp Status.
        i. Pending – the report displays all the programs that is in Pending Status.
        j. Sanction – the report displays all the programs that is in Sanction Status.
viii. The Total Assigned Cases formatted as "Total Assigned Cases: <Total amount of case assigned to the Worker>". For example: "Total Assigned Cases: 1501".
    1. The number of Cases assigned as displayed in the Total Assignments section of the Employment Services Workload Inventory page.
ix. The Total Assigned Programs formatted as "Total Assigned Programs: <Total amount of programs assigned to the Worker>". For example, "Total Assigned Programs: 3164".
    1. The number of Programs assigned as displayed in the Total Assignments section of the Employment Services Workload Inventory page.

2. Exported Data Sheet
   This sheet provides a listing of employee workload information such as the Case Number, Name of the Primary Applicant, Program, Program Status, Program Status Reason, Program Review Date, Activity, Activity Review Date and Benefit Program Status Export report will be sorted by Case Number in Ascending order.

Column Name	Description
Newly Assigned Individual	This column will display as Yes or No. Yes, means there's a Case that is newly assigned to a worker (on the Employment Services Workload Inventory page the icon is display). No, means there's no new worker assigned to the Case or the icon has been cleared from the page (on the Employment Services Workload Inventory page the icon does not display).
Newly Case Image	This column will display as Yes or No. Yes, means there is a new image for the Case (on the Employment Services Workload Inventory page the icon is display) No, means there is no new image for the Case or the icon has been cleared from the page (on the Employment Services Workload Inventory page the icon does not display)
Case Number	This column will display the Case Number for the program that is assigned to the Worker ID on the search parameter. **Note: For the Employment Services Workload Inventory page, it will only return the following programs: CFET, Cal-Learn, Welfare to Work, GROW, REP, GA/GR Employment Services.**
Name	This column will display the Name of the Primary Applicant for the program (this is the program information on the program column) formatted as "Last Name", "First Name" .
Program	This column will display the program code that the Worker is assigned to. **Note: For the Employment Services Workload Inventory page, it will only return the following programs: CFET (FT), Cal-Learn (CL), Welfare to Work (WT), GROW (GW), REP (RE), GA/GR Employment Services (GE).**
Status	This column will display the status of the program (Active, Deferred, Deregistered, Discontinued, Exempt, Good Cause, Non-Comp, Pending or Sanction).
Program Status Reason	This column will display the Program Status Reason associated to the Program.
Program Review Date	This column will display the RE due date for the program. **Note: For programs that RE due date does not apply, it will display as "blank" on the report.**

Column Name	Description
Activity	This column will display the Activity Type that the primary applicant is associated to. **Note: Activity Type that is displayed will be based on the following:** • **Activity is associated to one of the following programs: CFET, Cal-Learn, Welfare to Work, GROW, REP, GA/GR Employment Services.** • **Activity will need to be in Active status.** • **Only the latest Active Status Activity will be display.**
Activity Review Date	This column will display the Review Date for the associated Activity.
Benefit Program Status	This column will display the Program status as follow: • For Welfare to Work it will display CalWORKs or RCA program status for all the 57 counties, for LA County specifically Welfare to Work will display CalWORKs program status. • For REP it will display the CalWORKs, RCA or GR (for LA County RCA/GR) program status. • For GROW it will display the General Assistance/General Relief program status. • For CFET it will display the CalFresh program status. • For GA/GR Employment Services it will display the GA/GR Automated Solution program status. • For Cal-Learn it will display the CalWORKs program status.

2.2.4 Page Location

- **Global: Empl. Services**
- **Local: Workload Inventory**
- **Task: Workload Inventory**

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

N/A

2.2.7 Accessibility

N/A

2.2.8 Page Usage/Data Volume Impacts

N/A

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1.0	Report	Employment Services Workload Inventory Export Report - Mockup	Employment Services Workload Inventory Export Report.xlsx

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-277258

Identify Provider eligible for CCPU deduction

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Erika Kusnadi-Cerezo
	Reviewed By	Michael Wu, Chitra Barsagade, William Baretsky

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/02/2024	1.0	Initial	Kusnadi.E
10/22/2024	1.1	Updates were made based on feedback from the Committee: • Added to Assumption #3 the additional changes that we will be adding as part of CA-277257. • Updated the Service Type that CCPU will apply to the following: 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home', and 'Trustline Required Outside Home'	Kusnadi.E

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1 OVERVIEW

Currently in CalSAWS, users are not able to identify Child Care Providers who are part of the Child Care Provider United (CCPU). This SCR will add a new section to the Service Detail page that will allow users to indicate whether the Child Care Provider is part of the Child Care Provider United (CCPU) or not.

1.1 Current Design

Currently in CalSAWS, users are not able to track Child Care Providers that are part of the Child Care Provider United.

1.2 Requests

Update CalSAWS with the ability to track Child Care Providers that are part of the Child Care Provider United.

1.3 Overview of Recommendations

1. Add a new section 'Child Care Providers United (CCPU) Information' to the Service Detail page.

1.4 Assumptions

1. All existing functionalities will remain unchanged unless called out as part of this SCR.
2. Counties will need to update the information on the newly created 'Child Care Providers United (CCPU) Information' section based on the information that they download from CalHR.
3. CA-277257 will be the SCR that will implement the tracking of the amount that has been deducted from a provider include adding the Begin and End Date of when the provider is part of the CCPU and an indicator on the Child Care Payment Calculation Detail page
4. CA-260576 will be the SCR that will automate the amount that will need to be deducted from a provider.

2 RECOMMENDATIONS

2.1 Service Detail page

2.1.1 Overview

The Service Detail page allows users to add, edit or view the details of a specific service offered by a Provider. This SCR will add a new section to the Service Detail page when the Service Type is 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home', and 'Trustline Required Outside Home' to allow users to indicate whether that Child Care Provider is part of the Child Care Providers United (CCPU) or not.

2.1.2 Service Detail Mockup

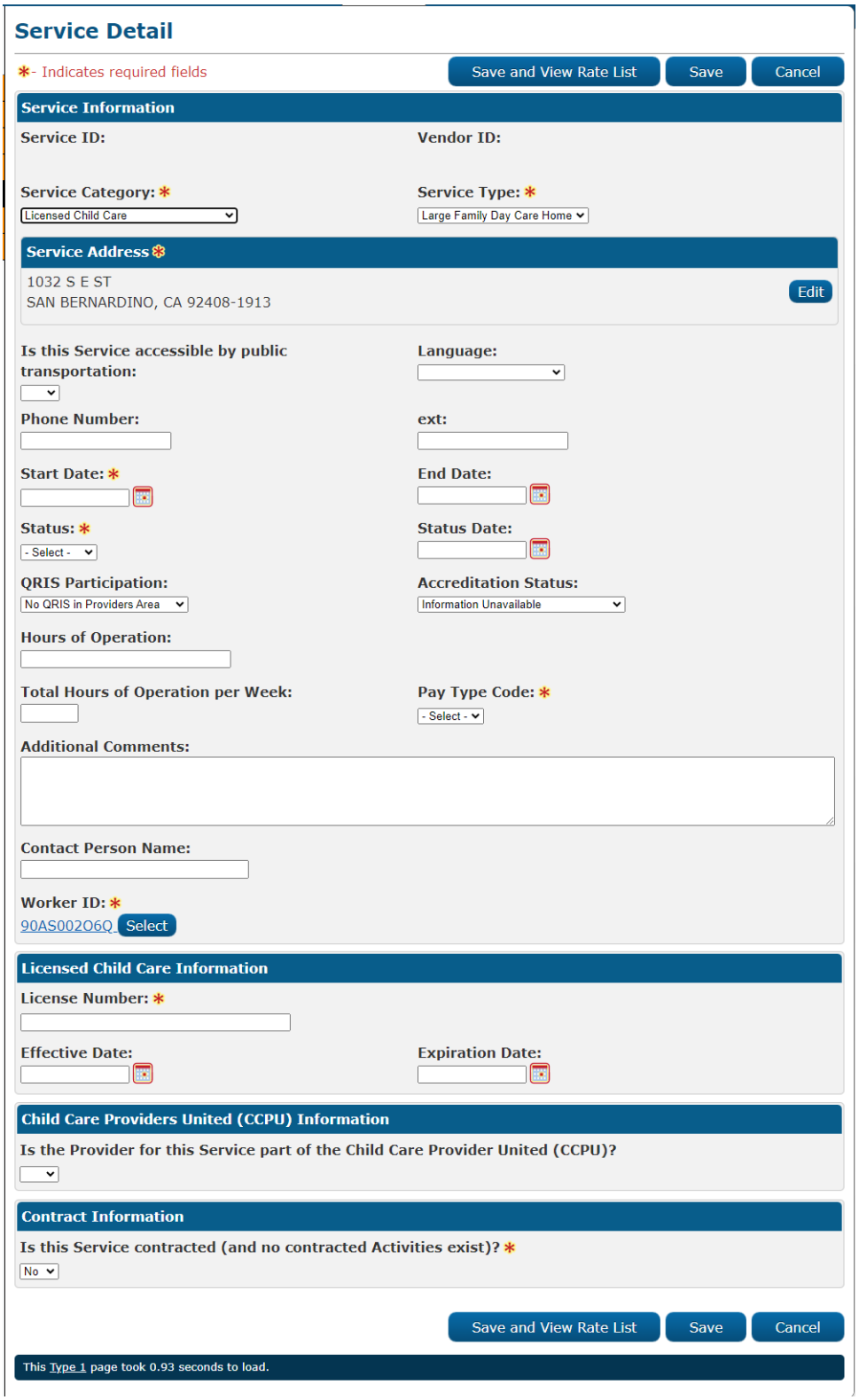

Figure 2.1.1a – Service Detail page (Create mode – Licensed Child Care Service)

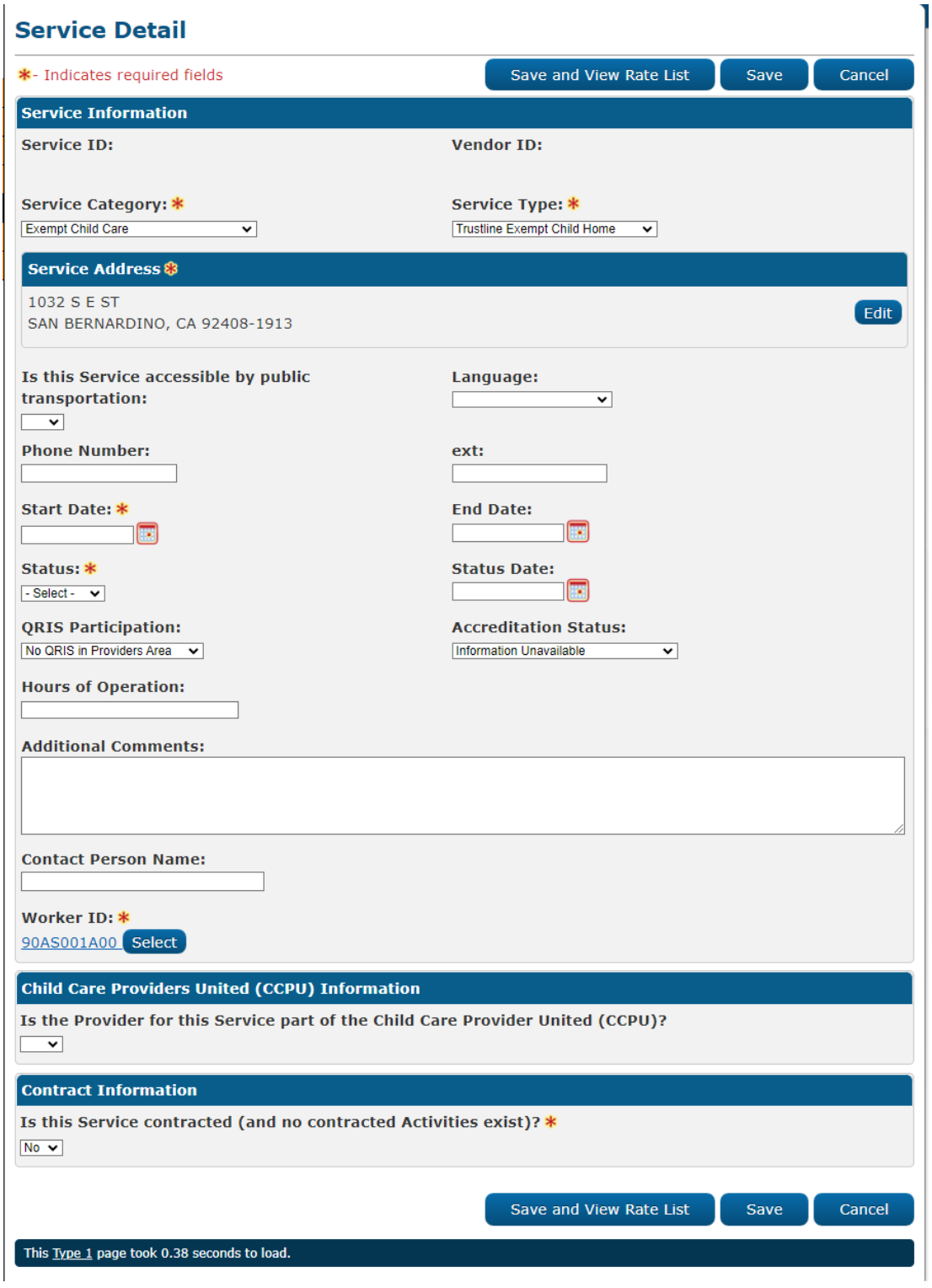

Figure 2.1.1b – Service Detail page (Create mode – Trustline Exempt)

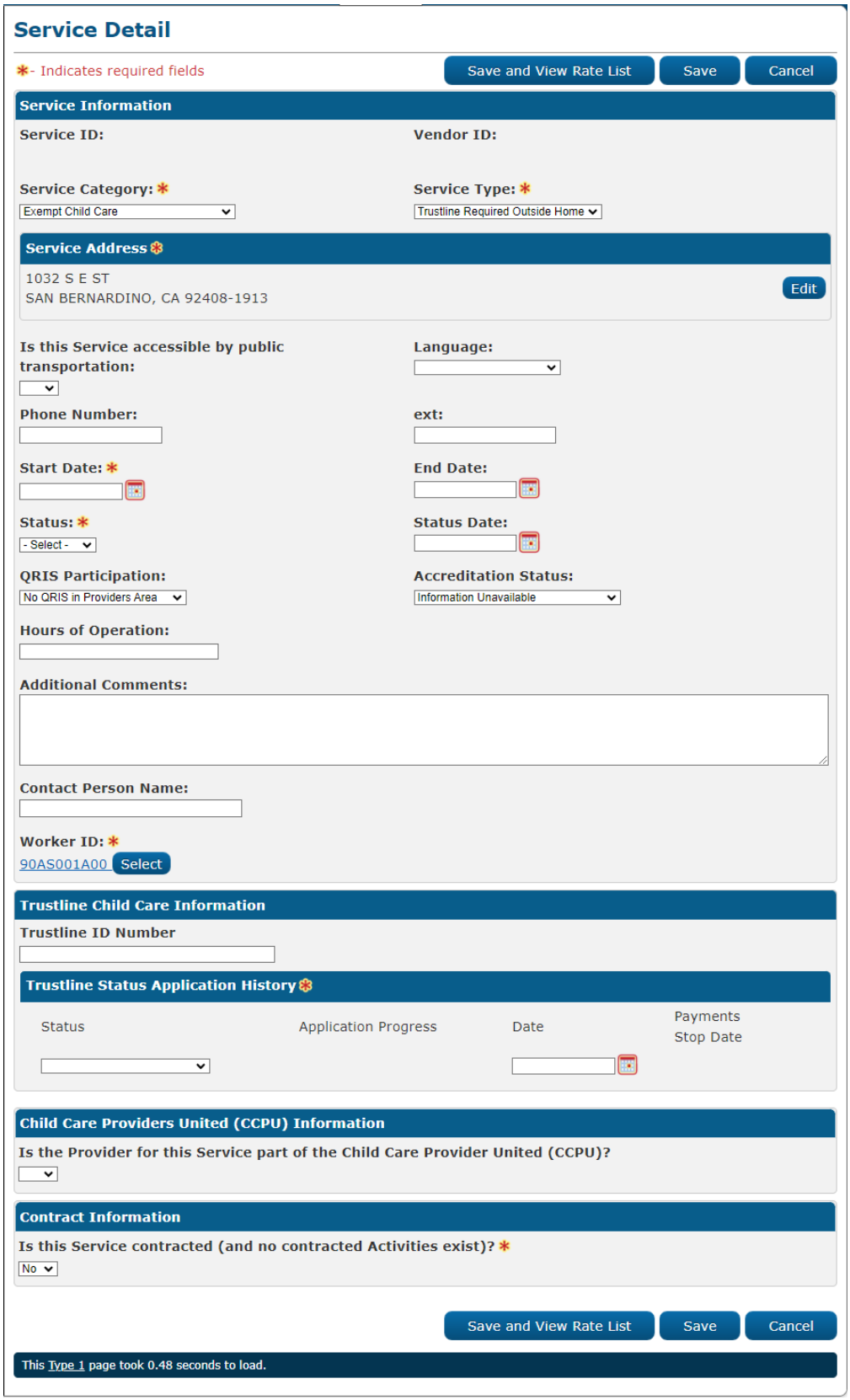

Figure 2.1.1c – Service Detail page (Create mode – Trustline Required)

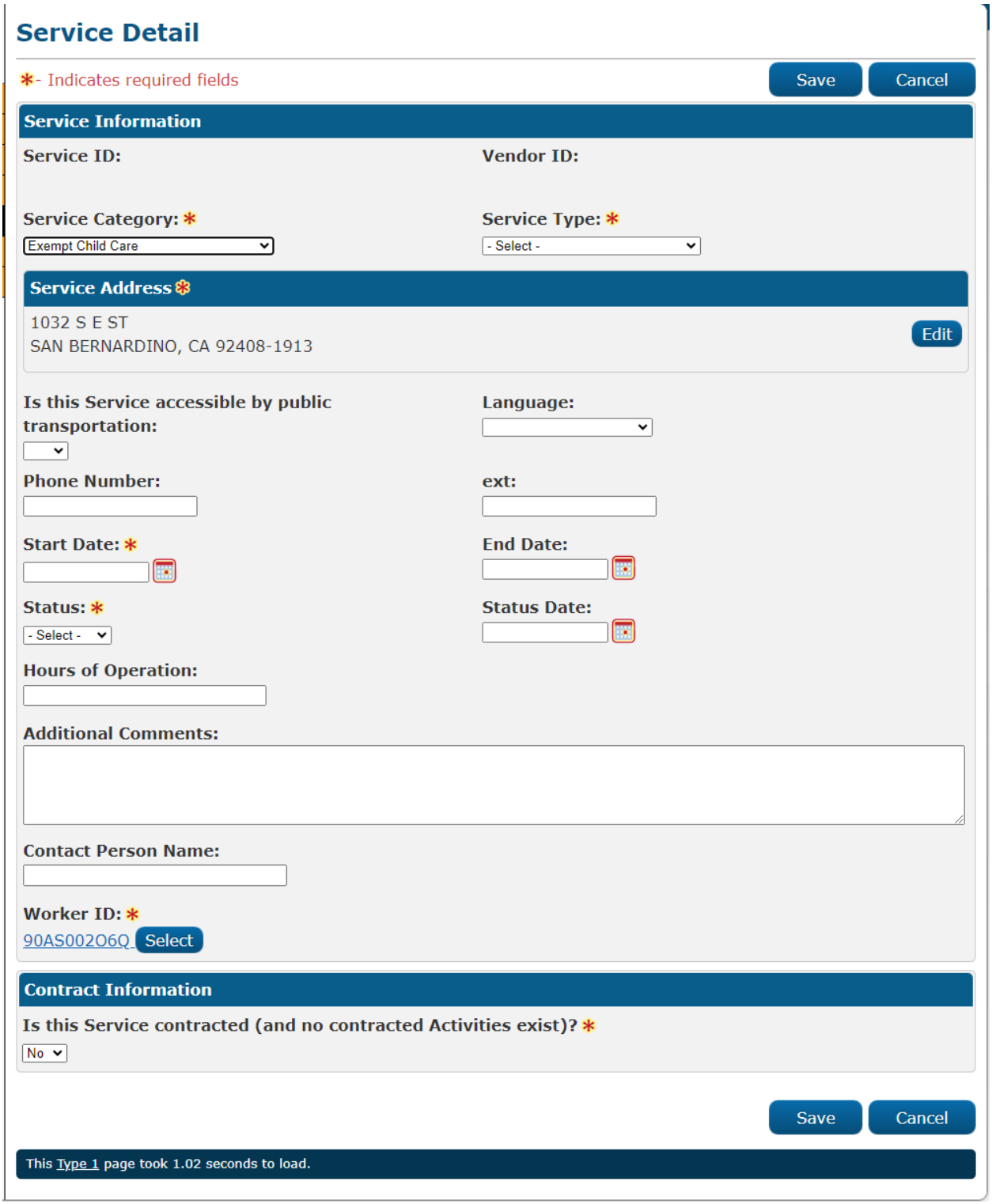

Figure 2.1.1d – Service Detail page (Create mode – Prior from selecting Service Type for Exempt Child Care Service Category)

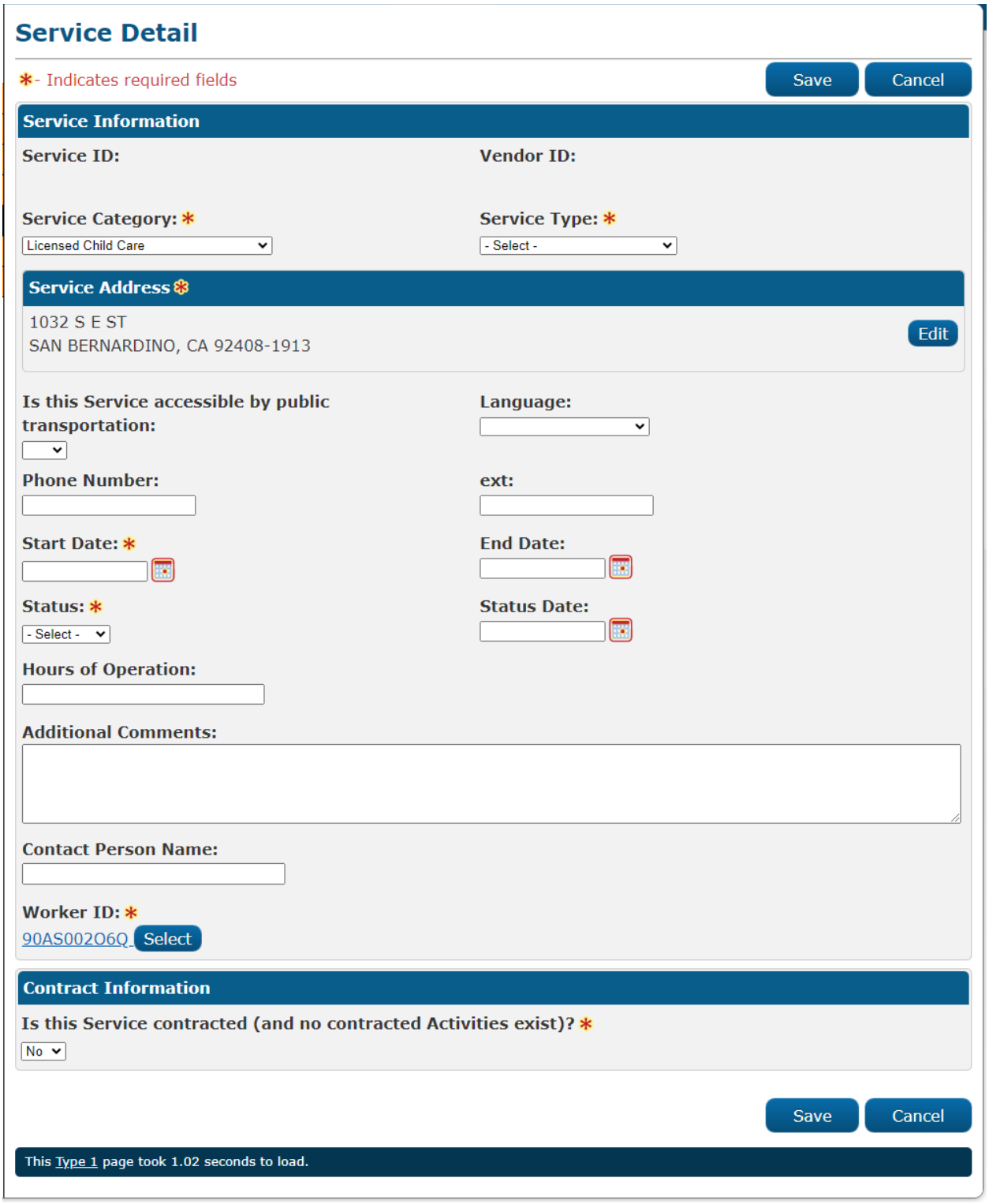

Figure 2.1.1e – Service Detail page (Create mode – Prior from selecting Service Type for License Child Care Service Category)

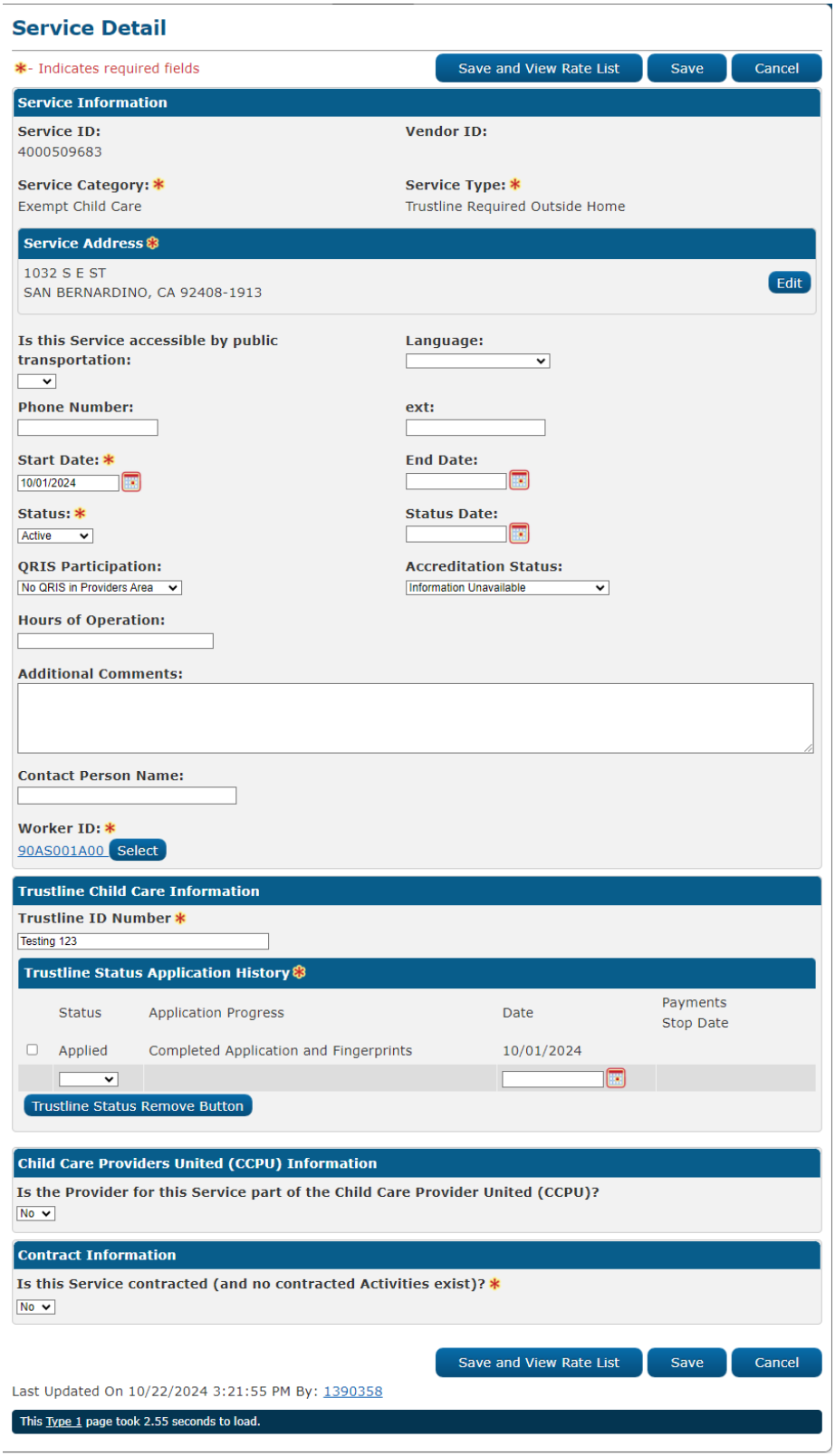

Figure 2.1.2 – Service Detail page (Edit mode)

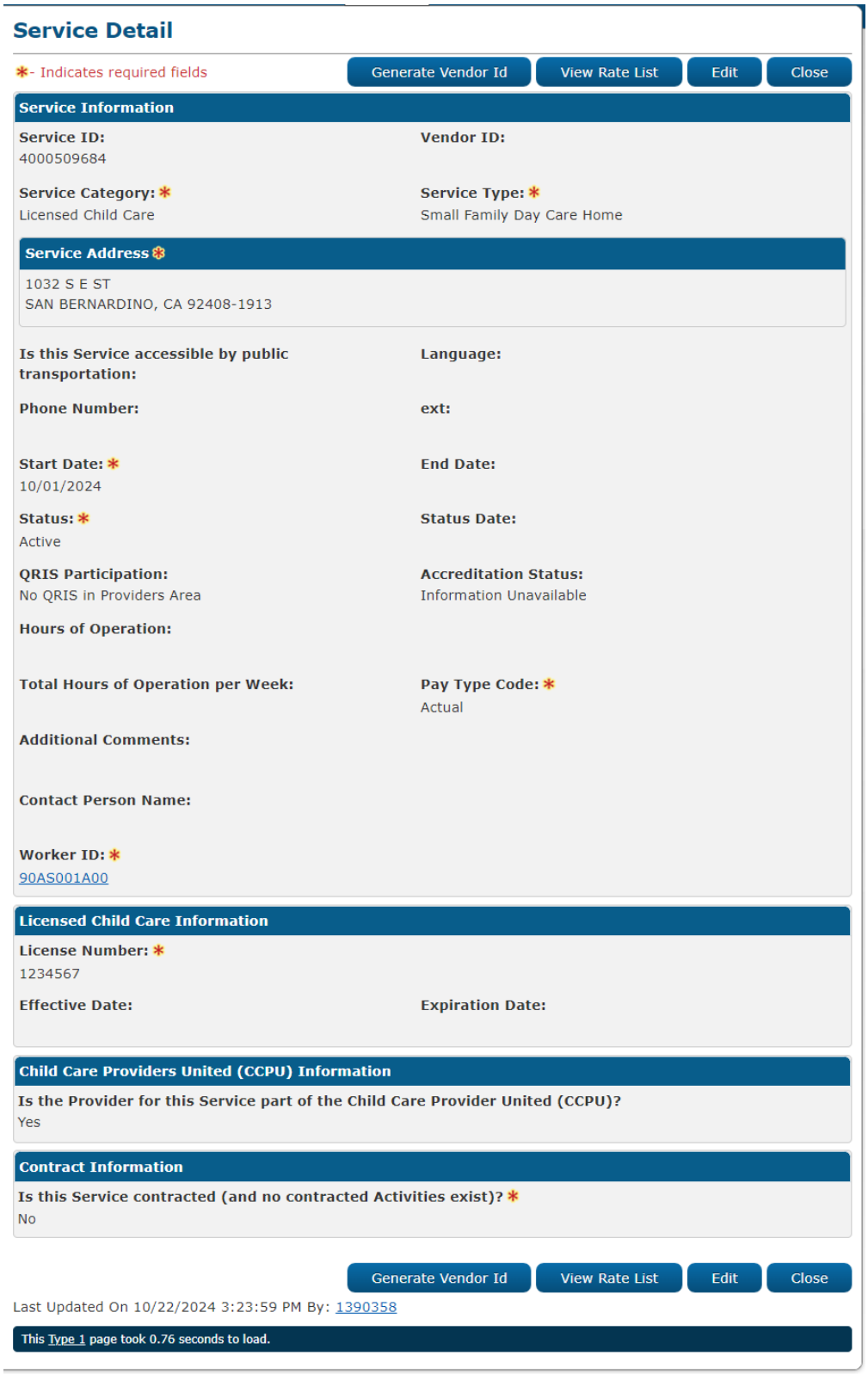

Figure 2.1.3 – Service Detail page (View mode)

2.1.3 Description of Changes

1. Add a new section title 'Child Care Providers United (CCPU) Information' on the Service Detail page.
    a. New section will only display when the Service Type is 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home', and 'Trustline Required Outside Home'.
        i. When the Service Detail page is in Create mode, the section will display after the user select an option from the 'Service Type' field.
    b. The new section will have the following elements:
        i. An editable drop-down field title 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' and have the following options:
            1. Blank
            2. 'No'
            3. 'Yes'
        ii. The selected value on the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' drop-down field will be as follow:
            1. Value displayed will be Blank when the Provider does not have any Service Type equal to 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home', or 'Trustline Required Outside Home'.
            2. When a user is accessing the Service Detail page in Create mode and there's already a record for a Service Type of 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home', and 'Trustline Required Outside Home' the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' drop-down field will already display the information value that was selected on the existing record.

    Example 1: A user is creating a brand-new Service for a Service Type of 'Large Family Date Care Home' and there is no Services existing with the Service Type of 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home', or 'Trustline Required Outside Home'. When the 'Child Care Providers United (CCPU) Information' section is displayed the value on the 'Is

the Provider for this Service part of the Child Care Provider United (CCPU)?' drop-down field will be Blank.

Example 2: A user is creating a brand-new Service for a Service Type of 'Large Family Day Care' and there is already a Service existing with the Service Type of 'Trustline Exempt Outside Home' and the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' field is 'No', when the 'Child Care Providers United (CCPU) Information' section is displayed the value on the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' will be 'No'.

2. Information that is saved on the new section 'Child Care Providers United (CCPU) Information' will apply for all Service Type equal to 'Large Family Day Care Home', 'Small Family Day Care Home', 'Trustline Exempt Child Home', 'Trustline Exempt Outside Home', 'Trustline Required Child Home' and 'Trustline Required Outside Home' for that Provider.

   Example 1: A Provider have a Service Type of 'Large Family Day Care Home' (Service 1) with 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' of 'No'. When the user create and save a new Service with the Service Type of 'Trustline Exempt Outside Home' and selected the value of 'Yes' on the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' field, the License Child Care Provider with the Service Type of Large Family Day Care Home' (Service 1) will now reflect 'Yes' on the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?'.
   Example 2: A Provider have a Service Type of 'Large Family Day Care Home' (Service 1) and Service Type of 'Trustline Exempt Outside Home' (Service 2). User is editing the record for Service 2 and updated the value on the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' field from 'No' to 'Yes'. The 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' field on Service 1 will now display as 'Yes' when the user is accessing that record.

3. For existing/historical record, the new 'Child Care Providers United (CCPU) Information' section will have the value of Blank.

2.1.4 Page Location

- **Global: Resource Databank**
- **Local: Resources**
- **Task: Resource Search**

2.1.5 Security Updates

N/A

2.1.6 Page Mapping

Update Page Mapping to include the new section that are being added to the Service Detail page.

2.1.7 Accessibility

Accessibility was assessed and no updates are needed

2.1.8 Page Usage/Data Volume Impacts

N/A

2.2 Automated Regression Test

2.2.1 Overview

Create new automated regression test scripts to verify the availability, selectable values, and default selection of the 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' dropdown on the Service Detail page for one or more applicable service type values.

2.2.2 Description of Changes

1. Create a regression script to navigate to the Service Detail page in create mode for a Provider with no existing services of an applicable type, select an applicable Service Type, and verify the following:
    a. The 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' dropdown displays.
    b. The dropdown is initially populated with a blank value.
    c. The following values are available for selection from this dropdown:
        i. Blank
        ii. 'No'
        iii. 'Yes'
2. Create a regression script to navigate to the Service Detail page in create mode for a Provider with one existing service of an applicable type, select an applicable Service Type, and verify the following:
    a. The 'Is the Provider for this Service part of the Child Care Provider United (CCPU)?' dropdown displays.
    b. The dropdown is initially populated with the same value as the existing service record.
    c. The following values are available for selection from this dropdown:
        i. Blank
        ii. 'No'
        iii. 'Yes'

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.10.4.39	The LRS shall support the entry of new Vendor information into the LRS by multiple criteria, including name, address, services offered, and areas served.	This SCR will add a new field to the Service Detail page to allow counties to track Providers that are part of the CCPU.

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-278393

Add CW 2200 in Threshold Languages

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Meghana R Chander
	Reviewed By	Nagesha S

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
11/08/2024	1.0	Initial Draft	Meghana R Chander

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1 OVERVIEW

The purpose of this change is to add additional threshold languages to CW 2200 form.

1.1 Current Design

Currently CW 2200 (5/23) – "Request For Verification" form exists in English, Spanish, Armenian, Chinese and Vietnamese.

1.2 Requests

Add the following threshold languages to CW 2200 (5/23).

Languages Include: Arabic, Cambodian, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Tagalog, Thai and Ukrainian.

1.3 Overview of Recommendations

Add the following threshold languages to CW 2200 (5/23).

Languages Include: Arabic, Cambodian, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Tagalog, Thai and Ukrainian.

1.4 Assumptions

1. Print options for threshold forms will remain the same as the print options for the English form.
2. There are no changes to the generation logic of these forms. All triggers for the new threshold forms will be the same as the existing English form.
3. All fields (blank or prepopulated) will be editable.
4. Supporting Documents section references attachments found on Jira.

2 RECOMMENDATIONS

2.1 Add CW2200 (5/23) in threshold languages to CalSAWS

2.1.1 Overview

This effort will add additional threshold languages to the CW2200 (5/23) in CalSAWS.

State Form: CW 2200 (5/23)
Programs: GROW, CalWORKs, RCA, CalFresh, Medi-Cal, CAPI, General Assistance/General Relief, Cal-Learn, Welfare to Work, REP
Forms Category: Forms

Template Repository Visibility: All Counties
Form Title (Document List Page Displayed Name): Request For Verification
Template Description: This form is a request for the Verification of outstanding documents to be brought in.
Existing Languages: English, Spanish, Armenian, Chinese and Vietnamese.
Threshold Languages: Arabic, Cambodian, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Tagalog, Thai and Ukrainian

2.1.2 Form Verbiage

Create CW 2200 XDP
New XDPs will be created for CW 2200 (5/23) in threshold languages.

Threshold Languages: Arabic, Cambodian, Farsi, Hindi, Hmong, Japanese, Korean, Lao, Mien, Punjabi, Russian, Tagalog, Thai and Ukrainian.

Add BRM header to the back of the coversheet.
The first page will be a coversheet with the standard header, second page will be BRM page, third page onwards will be the actual CW 2200 form.

Form Header: CalSAWS Standard Header (HEADER_1_EN)
Include NA Back 9: No
Imaging Form Name: Request For Verification
Imaging Document Type: Verification Requests
Form Mockups/Examples: See supporting document #1

2.1.3 Form Variable Population

Field Mappings: Use the same field mappings as the English Form for population logic.

Note: PROOF_OF is a dropdown field. The threshold language forms must have the values of the dropdown populated with the values translated from English drop down values.

2.1.4 Form Generation Conditions

CW 2200 (5/23) form can either be generated through batch or Template repository or online page (Eligibility → Customer Information → Verification list page).

Update batch job (PB00R1921) to generate the CW 2200 (5/23) in all available threshold languages.
Technical Note: Update CT942_134

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

Form Print Options and Mailing Requirements

The following are the print and mailing requirements for CW 2200 (5/23)

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

Mailing Options:

Mailing Options	Option for CW 2200
Mail-To (Recipient)	Applicant selected on the document parameters page when generated through Template Repository and Primary applicant when generated through Batch.
Mailed From (Return)	Worker's Office Address
Mail-back-to Address	County BRM address which generated the form
Outgoing Envelope Type	Standard
Return Envelope Type	BRM
Special Paper Stock	N/A

Form Control:

Tracking Barcode	BRM Barcode	Imaging Barcode
N	Y	Y

Additional Options:

Requirement	Option for CW 2200 Form
Post to Self-Service Portal	Y

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Forms	CW 2200 (5/23)	CW_2200_Arabic.pdf CW_2200_Cambodian.pdf CW_2200_Farsi.pdf CW_2200_Hindi.pdf CW_2200_Hmong.pdf CW_2200_Japanese.pdf CW_2200_Korean.pdf CW_2200_Lao.pdf CW_2200_Mien.pdf CW_2200_Punjabi.pdf CW_2200_Russian.pdf CW_2200_Tagalog.pdf CW_2200_Thai.pdf CW_2200_Ukrainian.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.3 CAR-1239	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;	CW 2200 (5/23) is being added in additional threshold languages to CalSAWS.

	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.	

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-278502

Update IPV verbiage in the template repository version of CF 377.4 SAR

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Ramon Villarreal-Leal
	Reviewed By	

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
9/17/2024	1.0	Draft Design	Ramon Villarreal-Leal

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5.1 Appendix 9

1 OVERVIEW

This effort is to update the State version of CF 377.4 SAR (6/13) to include the latest IPV verbiage until the State provides a new State version.

Note: We are currently waiting on the State to provide the latest version of the form CF 377.4 SAR (9/23)

1.1 Current Design

IPV verbiage in the template repository version of CF 377.4 SAR does not match the current verbiage.

1.2 Requests

1. Update IPV verbiage of template repository version of CF 377.4 SAR to match the current verbiage.

1.3 Overview of Recommendations

1. Update IPV verbiage in the template repository version of CF 377.4 SAR

Commented [RV1]: Changed this recommendation at the request of Raj after meeting with him and Sujit on 10/17/24

1.4 Assumptions

1. All existing functionality of these forms are not being updated unless specified by the recommendations section of this design.
2. The template for the form currently exists in column formatting. This will not be changed. Please see supporting document #1.
3. The version number of the form will remain (06/13) as only the IPV Verbiage from that version will be updated.
4. CDSS is in the process of updating the CF 377.4 SAR form and CalSAWS will update to the latest State version once provided by the State.
5. CalSAWS is not able to implement the CF 377.4 SAR (9/23) version as it has verbiage specifically for CFAP expansion which now has been extended to 2027. CDSS will be updating the CF 377.4 to remove the CFAP verbiage and CalSAWS will be making those updates when the new form is posted.
6. SCR CA-265360 will update the CF 377.4 SAR to the latest State version.

2 RECOMMENDATIONS

2.1 Updates to the CF 377.4 SAR CalFresh Notice of Change for Semi-Annual Reporting Households (06/13) form

2.1.1 Overview

This effort is to update form verbiage of CF 377.4 SAR to the newest State version

State Form: CF 377.4 SAR (6/13)

Current Programs: CalFresh

Current Attached Forms: NA Back 9

Current Forms Category: NOA

Current Template Repository Visibility: All Counties

Existing Languages: Arabic, Armenian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog

2.1.2 Form Verbiage

Update CF 377.4 SAR Form XDP

Updated Languages: Arabic, Armenian, Chinese, English, Farsi, Hmong, Korean, Lao, Russian, Spanish, Tagalog

Form Mockups/Examples: See Supporting Documents #1

Existing Text	Updated Text	Location in Document
You have already been told about an overissuance of CalFresh and you are getting less CalFresh benefits because the County has been reducing your monthly allotment by 10% or $10 (whichever is more) to pay back the CalFresh benefits that you got and should not have. It has been decided in court or by a state hearing or because you signed a Disqualification Consent Agreement or an	You have already been told about an overissuance of CalFresh and you are getting less CalFresh benefits because the County has been reducing your monthly allotment by 10% or $10 (whichever is more) to pay back the CalFresh benefits that you should not have received. This overissuance is now an Intentional Program Violation (IPV), based on a decision of court or a state hearing, or because you signed a Disqualification Consent	Underneath "**CHANGE IN BENEFITS**" on the 1st page.

Commented [RV2]: We were in two line format and now we are letter format

Commented [RV3R2]: All on one page now make that change

Commented [RV4R2]: We are reverting back with two column format for now

Commented [RV5]: Clarify with Bas where to add the "Rules" via email

Commented [RV6]: We are only changing ipv verbiage, document would be updated by state at later date once form is updated - assumptions - we are not changing the template in column format instead of letter format, no changes to revision date, we will make all necessary updates once we get new version from the state - we do not know what new version we would have from the state - see SCR CA-249808

Commented [RV7R6]: This was confirmed by Raj and Tiffany!

Commented [RV8]: In progress

Administrative Disqualification Hearing Waiver that this overissuance is an Intentional Program Violation (IPV). Now your monthly allotment is being changed because the County can begin reducing your allotment by 20% or $10 (whichever is more). If there are any other changes to your monthly CalFresh allotment, this form will tell you.	Agreement or an Administrative Disqualification Hearing Waiver. Your monthly allotment is now being changed because the County can begin reducing your allotment by 20% or $20 (whichever is more). If there are any other changes to your monthly CalFresh allotment, this form will tell you.	

2.1.3 Form Variable Population Logic

The only variable population logic occurs on the first page in the CalSAWS Standard header.

2.1.4 Form Generation Conditions

There is no batch or online trigger generation. The form is available in the template repository.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	Forms	CF 377.4 SAR form mockup	CF 377.4SAR_EN.pdf

4 REQUIREMENTS

4.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
CAR-1242	The LRS shall produce notices, NOAs, forms, letters, stuffers, and flyers, either generated by the LRS or initiated by COUNTY-specified Users, that may be sent to an applicant, participant, caregiver, sponsor, authorized representative, Vendor, landlord, and/or any other public or private individual or agency.	Updated the IPV form verbiage to the old State version's verbiage for CF 377.4 SAR (6/13) until we are provided the new version from the State.

5 APPENDIX

5.1 Appendix

1. **Form Print/Mailing Options for CF 377.4 SAR**

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

Mailing Options:
Mail-To (Recipient): Customer name selected from dropdown in the document parameters page
Mailed From (Return): Sending Office
Mail-back-to Address: None
Outgoing Envelope Type: Standard mail
Return Envelope Type: None

Additional Options:
Special Paper Stock: No
Enclosures: None
Electronic Signature: No
    Electronic Signature (IVR/Text): No
    Check to Sign: No
Post to Self Service Portal (SSP): Yes

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-279707

Update CalSAWS Text Messaging Functionality to Allow Opt-In by Program - Phase 2

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Andrea Rodriguez, Shining Liu, Eric Haymes, Phong Xiong
	Reviewed By	Rupalatha Putta, Matthew Lower, William Baretsky, Edgars Reinholds, Priya Sridharan

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
08/23/2024	1.0	Initial Draft	Andrea Rodriguez, Shining Liu, Eric Haymes, Phong Xiong
10/30/2024	1.1	Updates made to Section 1.3, 2.1, Section 2.2, and Section 2.4	Andrea Rodriguez
11/15/2024	1.2	Updates made to Section 2.8	Shining Liu

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1 OVERVIEW

The Federal Communications Commission (FCC) declaratory ruling provided guidance to federal and state governmental agencies and their partners on the applicability of the Telephone Consumer Protection Act (TCPA) of 1991 when making automated calls or text messages. The ruling states that the TCPA does not apply to calls/texts that are initiated by DHCS for purposes of Medi-Cal.

As per current text messaging consent functionality in the system, it cannot be differentiated based on program. In other words, once a client has opted to receive text for one program, they are opted in to receiving texts from other programs in which they participate, even if they have not expressly provided consent.

This SCR will make updates related to appointment text messaging and texting consent functionality in CalSAWS, to support program-based text messaging. The second phase includes updates to the Contact Detail, Appointment Scheduling batch jobs, Text Notification Agreement Form, Real Time Listeners jobs, and Texting Opt-In Consent framework with some of the text campaign jobs as described in this SCR.

1.1 Current Design

Text messages are sent to primary applicants who are opted-in to text messaging and have a text messaging status of 'Verified.'

1.2 Requests

The CalSAWS system currently attributes a customer's opt-in action to be for all text messages that the customer could receive from the system. There is no differentiation for a customer based on the program that the text message is generated for. For the system to support program level opting in for text messaging, new functionality will need to be added, and some existing core functionality must be enhanced.

There is functionality that triggers a text message to be sent to a customer that will need to be enhanced to capture the program. An example of this is the Appointment functionality in CalSAWS, which has appointment reminders sent to the customer via text message. To ensure the appointment is for a program that the customer has opted-in to receive text messages for pages, APIs, Web Services and more will need to be updated.

1.3 Overview of Recommendations

1. The texting messaging consent opt-in by program functionality will be implemented in phases. The switch logic added as part of phase 1 SCR CA-279688 will remain turned off till 25.03 go-live date i.e., the changes implemented as part of this SCR are turned off in production and the current

functionality works as-is until the phase 3 SCR CA-260623 is released into production.

2. Update Contact Detail page to add programs to be selected.

3. Update Transaction History page to track changes made to Contact Detail page.

4. Update what happens when a customer sends text messages to CalSAWS, that would trigger the customer to be opted-in or opted-out of receiving text notifications.

5. Update SSI Advocacy Mandatory Appointments Batch (PB19C903), Second SSI Appointments Batch (PB19C904), GCM Appointments Batch (PB19C905), and SSIAP NSA Appointments Batch (PB19C906) to schedule appointments with customer appointment program information.

6. Update Form Received and Form Incomplete text notifications campaigns to check if the form's program is a program the customer opted-in to received text notification for.

7. Update Text Notification Agreement form (CSF 170) to support program opt in as part of this SCR and the functionality will be turned off until phase 3 SCR CA-260623 is released into the production.

8. Update Customer Contact History Page.

9. Update the real time text messages to add program to the customer contact history page if there was a program declaration used to send the text message.

10. Update how records are added to the customer contact history page (both text campaign sweep and real time batch jobs).

11. Regression scripts update for Contact Detail and Opt-in programs page.

1.4 Assumptions

1. All other functionalities remain unchanged unless specifically called out by this design document.

2. A person can only have one phone number opted-in to text messages.

3. A person cannot opt-in to text messages with a phone number that has already been opted-in to text messages by a different person in the system.

4. Unless otherwise stated for an individual recommendation, all functionality updates described in this design will not be available or trigger until all phases of the overall effort have been delivered. Until all phases are delivered, customer and workers will continue to experience CalSAWS as if the updates do not exist.

5. Text message functionality associated with domestic violence cases is expected to be updated in SCR CA-260623.

6. A text message is sent in Spanish if the participant's written language preference is 'Spanish'. Otherwise, the text message is sent in English.

7. When the batch text campaign framework identifies duplicate (word-for-word) messages to send to the same customer on the same day, the framework only sends one instance of the text message. It then only creates one record on the Customer Contact History page. That functionality will not be changed by this SCR, even if the duplicate messages are identified to be for different programs.

8. Form related text notification campaigns can be triggered only by specific forms. These triggers are preexisting definitions and are not being changed in this SCR.

9. Any updates to journal entry descriptions in this SCR will only impact future created journals. Historical preexisting journal entries will not be modified.

10. The process for the CSF 170 will continue to be a manual process once the form has been received by the worker to update the opt-in values for text messaging.

11. The text notification E-Signature campaigns will not be updated. It does not create records on the Customer Contact History page for successfully sent messages. The campaign can create Customer Contact History records when there is a failure to send the text notification. However, even in the scenario of a delivery failure, the Customer Contact History page's program field will be left empty for this campaign.

2 RECOMMENDATIONS

This SCR will make updates related to appointment text messaging and texting consent functionality in CalSAWS, to support program-based text messaging. This SCR includes updates to the Contact Detail Page, Appointment Scheduling batch jobs, Text Notification Agreement Form (CSF 170), Real-Time Text Listenerwebservice, and Texting Opt-In Consent framework with some of the text campaign jobs as described in this SCR.

2.1 Contact Detail

2.1.1 Overview

This SCR will update the process to opt-in a customer into text messages via the Contact Detail page. The page will allow the worker to indicate which program text messages the customer can receive.

2.1.2 Contact Detail Mockup

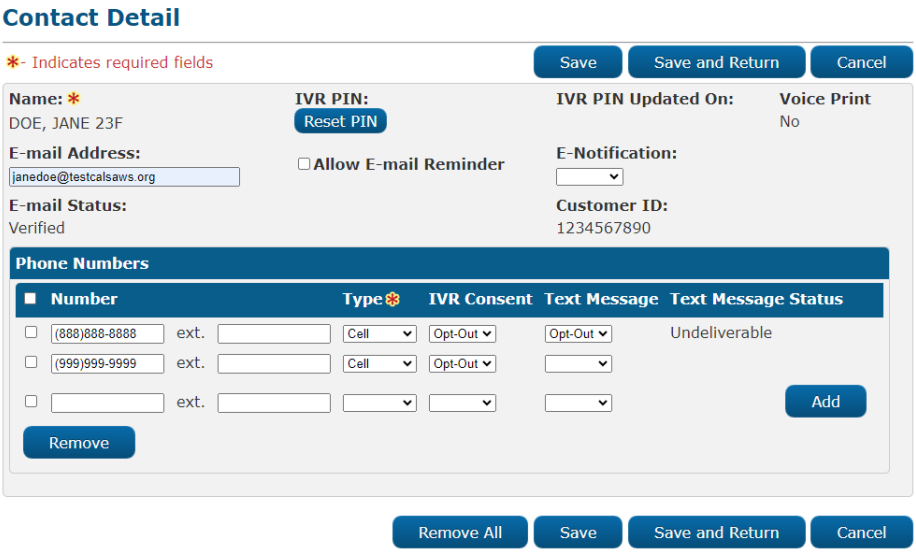

Figure 2.1.1 – Contact Detail Mock-up – No number with Opt-In selected (Edit Mode)

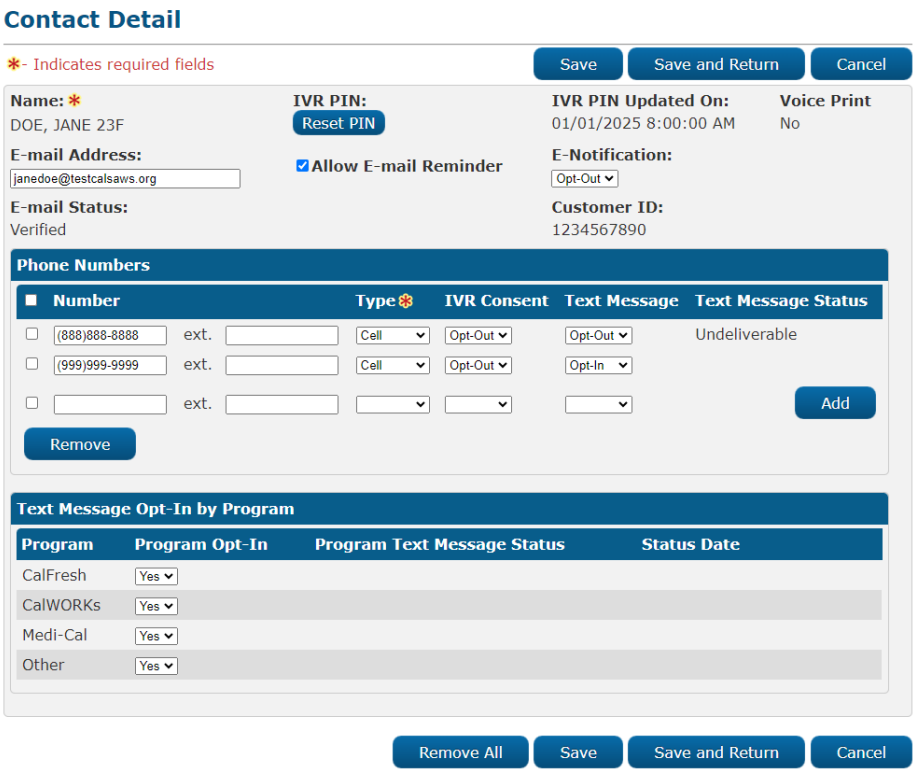

Figure 2.1.2 – Contact Detail Mock-up – New number with Opt-In selected (Edit Mode)

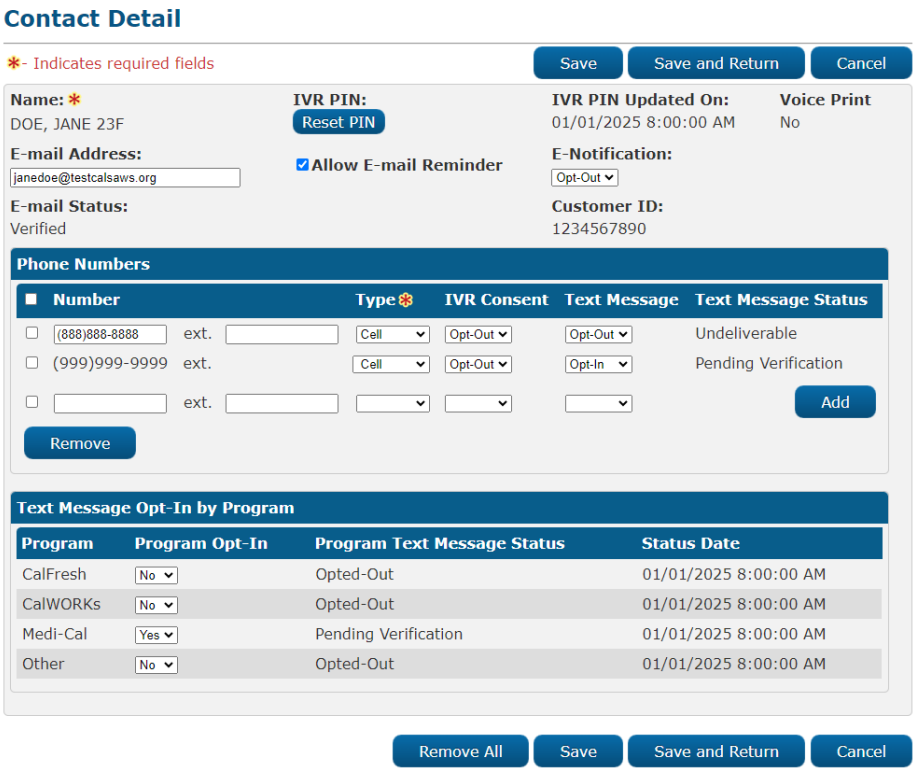

Figure 2.1.3 – Contact Detail Mock-up – One program Pending Verification after saving (Edit Mode)

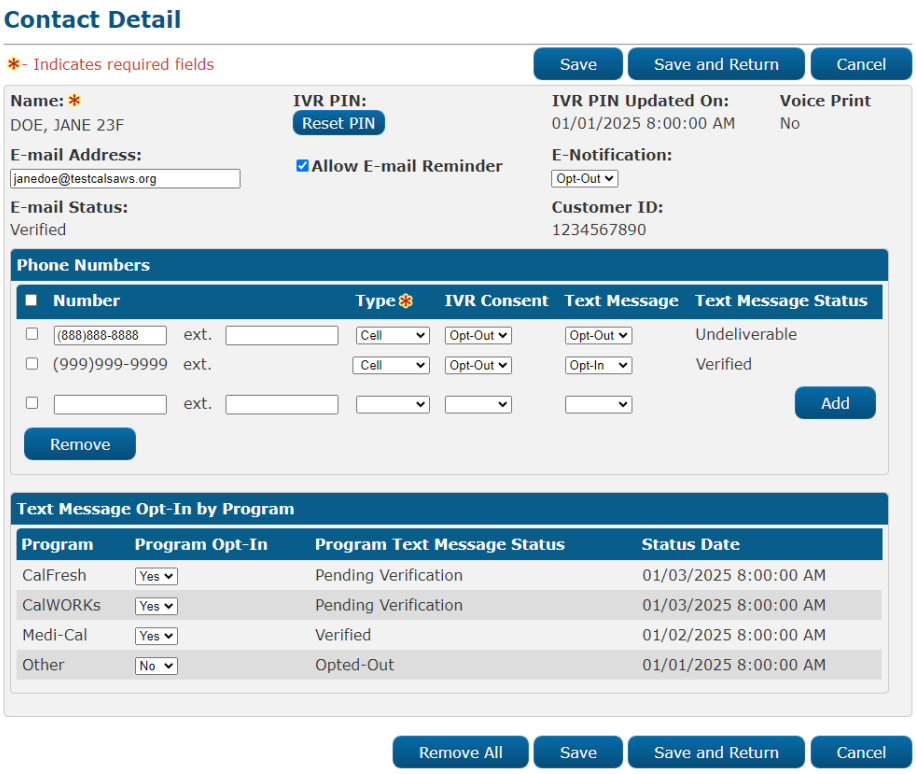

Figure 2.1.4 – Contact Detail Mock-up – One Program Verified and Two Additional Programs Pending Verification (Edit Mode)

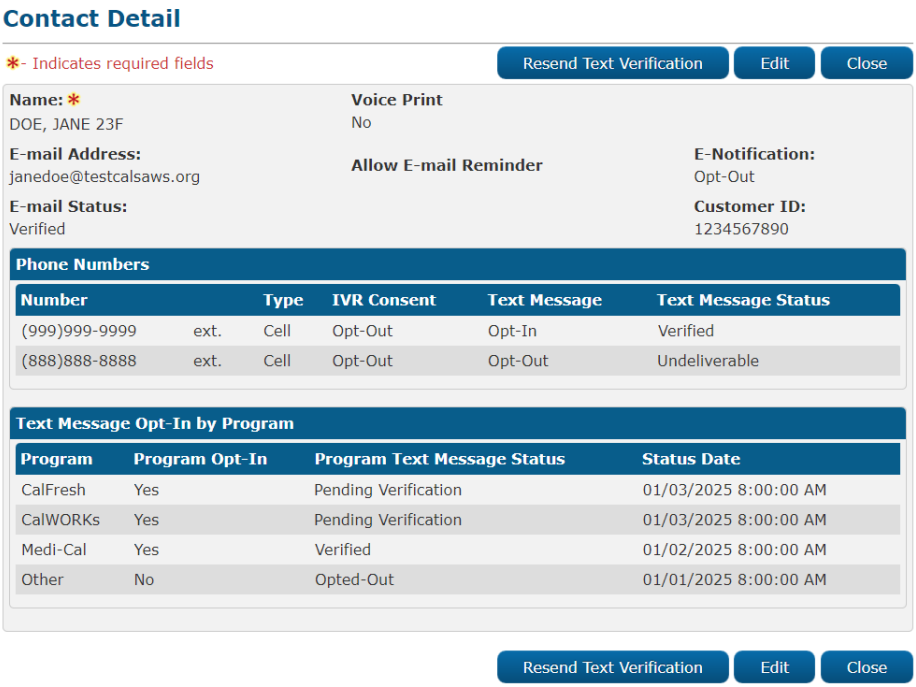

Figure 2.1.5 – Contact Detail Mock-up – One Program Verified and Two Additional Programs Pending Verification (View Mode)

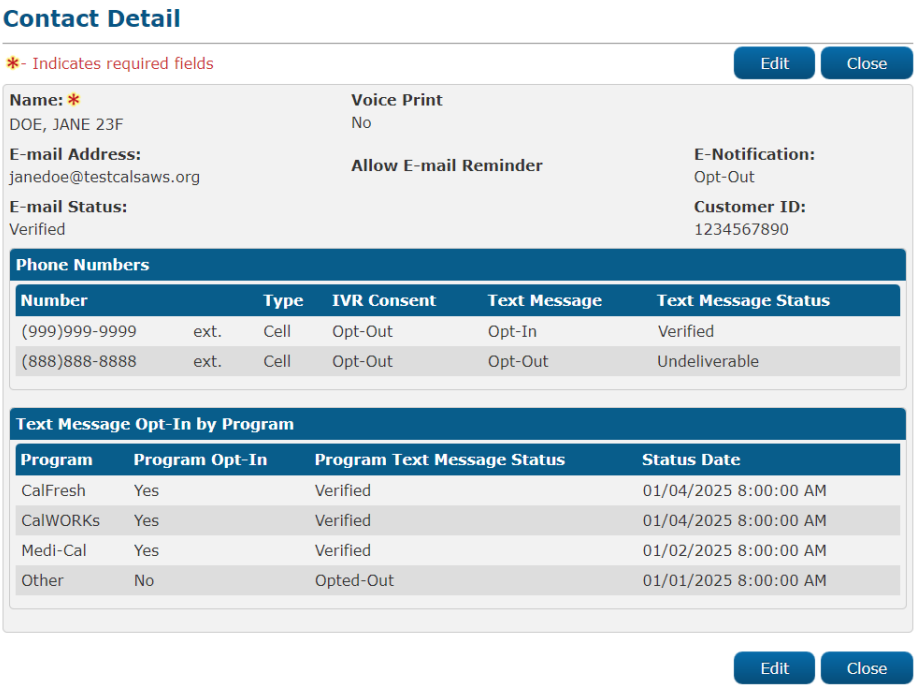

Figure 2.1.6 – Contact Detail Mock-up – Three Programs Verified (View Mode)

2.1.3 Description of Changes

1. Update the phone number sections on the Contact Detail page.
    a. Add a new section to the Contact Detail page to display text-message "Opt-In" by program information.
        i. The section will be titled "Text Message Opt-In by Program"
        ii. The section will display dynamically only when "Opt-In" is selected on the Text Message drop-down for a phone number.
        iii. The section will display a table with the following columns:
            1. Program
                a. This field will display the following list of Programs for texting opt-in:
                    i. CalFresh
                    ii. CalWORKs
                    iii. Medi-Cal
                    iv. Other
            2. Program Opt-In
                a. This field will display a "Yes" or "No" drop-down for each Program.
                b. By default, the Program Opt-In value for each program will be "Yes".

3. Program Text Message Status
    a. This field will display the Program Text Message Status for the associated Program:
        i. No text will be present if the verification process hasn't been initiated yet for that program.
        ii. Pending Verification – Verification text has been sent and is awaiting customer response for that program.
        iii. Verified – Customer has verified the phone number for that program.
        iv. Opted-Out – Customer has been opted-out of receiving text messages for that program.
        v. No Response - Customer didn't respond to program verification text message after 3 days.
        vi. Undeliverable – A text could not be delivered to customer's phone number.
4. Status Date
    a. This field will display the date and time that the Program Text Message Status was last updated in the following format: "MM/DD/YYYY HH:MM XM"
    b. The field will be blank when there is no Program Text Message Status available.

b. Add a hard validation on upon saving that will display when no programs have a Program Opt-In value of 'Yes' and the Text Message value is "Opt-In" for a phone number.
    i. The validation will display the following message "Program Opt-In – At least one program must have a Program Opt-In value of 'Yes' when there is a phone number that has been opted-in for text messaging."
c. Update the functionality to opt-in a person into text messages via the Text Message drop-down of the Phone Number section.
    i. When the worker selects "Opt-In" for a phone number on a Contact Detail record:
        1. The "Text Message Opt-In by Program" section will display.
        2. The "Program Opt-In" field value for each program will default to 'Yes'.
        3. When the Program Opt-In value is changed to 'Yes' and the Program Text Message Status is not 'Verified' or 'Pending Verification' for a Program, clicking the 'Save' or 'Save and Return' button will

initiate a single verification text message to be sent to the phone number indicated for opt-in.

a. If the verification text is successfully sent, the program text message status will update to 'Pending Verification' for the programs that have a Program Opt-In value of 'Yes'. The existing phone number text message status will also update to 'Pending Verification' if the phone number is currently not in 'Verified' status.

   Note: Multiple text messages will not be sent to the customer per program unless the worker updates the Program Opt-In value to 'Yes' on each program on separate transactions.

b. When the customer responds agreeing to the CalSAWS verification text, the system will update the program text message status to 'Verified' for all programs currently in 'Pending Verification' status. The existing phone number status will also update to 'Verified'. Additional detail can be found in Section 2.10.

   Note: The customer does not need to respond more than once.

c. When the customer responds by not agreeing to the CalSAWS verification text, the customer will be completely Opted-Out of text messaging for that phone number and all programs, and the "Text Message Opt-In by Program" section will no longer display. Additional detail can be found in Section 2.9.

4. When the Program Opt-In value is updated to 'No' for a program, the program text message status will be 'Opted Out' for the program upon clicking the 'Save' or 'Save and Return' buttons.
5. Modifying the Program Opt-In value from 'No' to 'Yes' on a program will remove the Program Text Message Status of 'Opted Out' for that program and initiate the text message verification process upon saving for the program.

ii. When the worker selects "Opt-Out" on a phone number when clicking the 'Save' or 'Save and Return'.
    1. The "Text Message Status" and "Program Text Message Status" information for the phone number will be set to "Opted Out".
    2. The "Program Opt-In" value will be set to "No" for all programs associated with that phone number.
    3. The "Text Message Opt-in by Program" information will no longer display.

d. Update the Number field functionality on the Phone Numbers Section.
    i. When the Text Message Status of the phone number is 'Verified' or 'Pending Verification', the Number field will be read-only for that specific phone number (including the phone number extension).
e. Update the functionality when a phone number is removed from the person on the Phone Numbers section.
    i. If the phone number was Opted-In at the time of removal, the "Text Message Opt-In by Program" section will no longer display after it has been removed.
    Note: If a new phone number is selected to be Opted-In for text messaging, the phone number verification process will be re-initiated for the new number and the current selected programs upon saving.
f. Update the functionality of the existing Text Message Status field of the Phone Numbers section.
    i. This field will display the Text Message Status for the phone number overall:
        1. No text will be present if the verification process hasn't been initiated yet for that program.
        2. Pending Verification – An initial verification text has been sent and is awaiting customer response.
        3. Verified – Customer has verified the phone number for at least one program prior.
        4. Opted-Out – Customer has been opted-out of receiving text messages.
        5. Automatically Opted-Out – Customer could not opt-in number through Self-Service Portal because that number was already opted-in to text messages for another customer in the system.
        6. Undeliverable – When a text could not be delivered to customer's phone number, the Text Message field will be set to 'Opt-out' and the Text Message Status field will be set to 'Undeliverable'.

g. Update journal generation functionality of the Contact Detail page pertaining to text message opt-in/opt-out status functionality.
    i. Generate a journal only when
        1. The Text Message field is updated to 'Opt-In' on the Phone Numbers section for a phone number.
        2. The Text Message field is updated from 'Opt-In' to 'Opt-Out' on the Phone Numbers section for a phone number.
    ii. The journal should contain
        1. Journal Category: All
        2. Journal Type: Narrative
        3. Method of Contact: Blank
        4. Initiated By: User
        5. Short Description: Customer <First Name> <Last Name> Text Notification Changed.
        6. Long Description:
        Contact Detail Text Notification was updated to: <NewValue>. (ex: Opt-In or Opt-Out)
        Phone Number updated to: <Phone Number>.
        Current Text Message Status: <Text Message Status>. (ex: Pending Verification)
        Name: Customer <First Name> <Last Name>
    iii. The person level journal should only be created on certain cases where the person is Active and/or in the Home, as outlined in the table below.

Scenario #	Person status on any program (as of the system date)	Household status (as of the system date)	Create Journal (Y/N)
1	Active	In Home	Y
2	Active	There is no In Home status	Y
3	Pending	In Home	N
4	Pending	There is no In Home status	N
5	Is not (active or pending)	In Home	Y

h. Update the "Resend Text Verification" button functionality.
    i. The button will display on the Contact Detail page in view mode only when at least one program on the "Text Message Opt-In by Program" section has a Status of

'Pending Verification' or 'No Response' and Program Opt-In value of 'Yes'.

ii. Clicking the button will attempt to send a verification text to the customer and update the verification status to 'Pending Verification' of all the programs with a Status of 'Pending Verification' or 'No Response' and Opt-In value of 'Yes' and update the Status Date.
Note: If the resent text message is undeliverable, the customer will be opted-out of text messages and have a text message status of 'Undeliverable' for that phone number.

iii. The button will be protected by the existing ContactDetailEdit right. The worker will not be able to see this button without this right.
Note: This is an existing security right that will remain unchanged with this SCR.

i. Update the Customer Contact History record that is generated each time a verification text message is sent to the customer to include the programs that are indicated for that specific verification text message.

Example: The worker selects 'Yes' for CalFresh and the customer receives a verification message. The generated Customer Contact History record will display CalFresh as the associated program. The worker later selects 'Yes' for CalWORKs and Medi-Cal and the customer receives a verification message. The generated Customer Contact History record will display CalWORKs and Medi-Cal as the associated programs.

Note: This Customer Contact History record is specific to the verification text messages generated from the Contact Detail page.

2.1.4 Page Location

- **Global:** Case Info
- **Local:** Case Summary
- **Task:** Contact

2.1.5 Security Updates

Note: 'ContactDetailEdit' is an existing security right. 'Contact Summary Edit' and 'Non-Financial Edit' are existing security groups.

1. Security Rights

Security Right	Right Description	Right to Group Mapping
ContactDetailEdit	Edit case person contact information.	Contact Summary Edit, Non-Financial Edit

2. Security Groups

Security Group	Group Description	Group to Role Mapping
Contact Summary Edit	Edit case person contact information.	System Administrator
Non-Financial Edit	Edit detailed information to nonfinancial eligibility factors.	Eligibility Staff, Eligibility Supervisor, Regional Call Center Staff, Regional Call Center Supervisor, System Administrator

2.1.6 Page Mapping

Update page mapping to reflect the changes being made to the Contact Detail page.

2.1.7 Accessibility

This page has been assessed for Accessibility requirements and meets the Accessibility standards.

2.1.8 Page Usage/Data Volume Impacts

N/A

2.2 Transaction History Detail

2.2.1 Overview

The Transaction History Detail page allows user to view and track the history of changes on the Contact Detail page. This SCR will update the Transaction History Detail page to capture changes being made on the new "Text Message Opt-In by Program" section on the Contact Detail record.

2.2.2 Transaction History Detail Mockup

Figure 2.2.1 – Transaction History Detail Mockup

2.2.3 Description of Changes

1. Update the Transaction History Detail page to track changes being made on the "Text Message Opt-In by Program" section of the associated Contact Detail record.
    a. The changes will be tracked in separate subsections titled "Text Message Opt-In by Program Detail: [Program Name]".
    b. The page will track changes being made to the following fields for each program:
        i. Program Opt-In
        ii. Program Text Message Status

2.2.4 Page Location

- **Global:** Case Info
- **Local:** Case Summary
- **Task:** Contact

2.2.5 Security Updates

N/A

2.2.6 Page Mapping

N/A

2.2.7 Accessibility

This page has been assessed for Accessibility requirements and meets the Accessibility standards.

2.2.8 Page Usage/Data Volume Impacts

N/A

2.3 Customer Contact History

2.3.1 Overview

The Customer Contact History page allows the worker to view instances of communication with a customer. This SCR will update the page to display the program information for text messages sent to a customer.

2.3.2 Customer Contact History Mockup

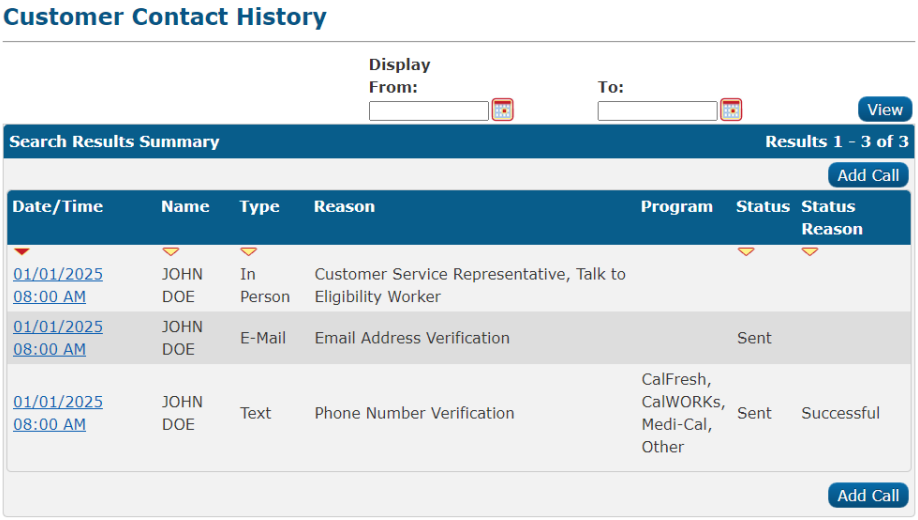

Figure 2.3.1 – Customer Contact History

2.3.3 Description of Changes

1. Update the Customer Contact History page to indicate program information for text messages sent to a customer.
    a. Create a new column in the Search Results Summary table.
        i. The column will be titled "Program."
        ii. The column will not be sortable.
        iii. The value in the field will display all the programs associated with the sent text message in alphabetical order and separated by commas.
            1. For existing 'Text' type customer contact records that did not have program associated prior, the value in the field will be blank.
            2. Only customer contact records that are of type 'Text' may have a program value. All other customer contact types will not display program information.

2.3.4 Page Location

- **Global:** Case Info
- **Local:** Case Summary
- **Task:** Customer Contact History

2.3.5 Security Updates

N/A

2.3.6 Page Mapping

Update page mapping to reflect the changes being made to the Customer Contact History page.

2.3.7 Accessibility

This page has been assessed for Accessibility requirements and meets the Accessibility standards.

2.3.8 Page Usage/Data Volume Impacts

N/A

2.4 Real Time Text Campaigns – Form Received and Form Incomplete

2.4.1 Overview

The Customer Reporting List page allows the worker to process the forms generated and send text messages. This SCR will update Form Received and Form Incomplete text notifications campaigns to check if the form's program is a program the customer opted-in to received text notification for.

2.4.2 Description of Changes

1. Update the trigger for Form Received and Form Incomplete text messages to ensure that the customer is Opted-In to text messages on a phone number and 'Verified' for at least one of the associated programs on the packet.
2. Update the generated Customer Contact History record when a form text message is sent to include the associated program information that the customer is opted-in to.

2.4.3 Page Location

- **Global:** Eligibility
- **Local:** Reporting

2.4.4 Security Updates

N/A

2.4.5 Page Mapping

N/A

2.4.6 Accessibility

This page has been assessed for Accessibility requirements and meets the Accessibility standards.

2.4.7 Page Usage/Data Volume Impacts

N/A

2.5 Batch – Appointment Scheduling Batch Jobs

2.5.1 Overview

SSI Advocacy Mandatory Appointments Batch (PB19C903), Second SSI Appointments Batch (PB19C904), GCM Appointments Batch (PB19C905), and SSIAP NSA Appointments Batch (PB19C906) create appointments and must consider program-specific appointments moving forward.

2.5.2 Description of Change

1. When scheduling appointments, program details should be included in the appointments.

    a. For PB19C903, the batch job will create appointments with program type 'GA/GR'.

    b. For PB19C904, the batch job will create appointments with program type 'GA/GR'.

    c. For PB19C905, the batch job will create appointments with program type 'GAGR ES/GROW'.

    d. For PB19C906, the batch job will create appointments with program type 'GA/GR'.

2. The batch jobs check for existing appointments before attempting to schedule an appointment. Update the process that determines if a new appointment should be created.

    Note: Other criteria defining an existing appointment is not changing as part of this SCR. See current functionality for clarification on the criteria for an existing appointment.

    a. PB19C903, PB19C904, and PB19C906 will not attempt to create an appointment if there is an existing appointment with program type 'GA/GR'.

    b. PB19C905 will not attempt to create an appointment if there is an existing appointment with program type 'GAGR ES/GROW'.

    c. **Note**: Appointments that are created prior to Phase 3 deployment will be considered an appointment for all programs. The batch jobs will not attempt to schedule an additional appointment if an appointment for all programs exists.

2.5.3 Execution Frequency

No change

2.5.4 Key Scheduling Dependencies

No change

2.5.5 Counties Impacted

Los Angeles

2.5.6 Category

No change

2.5.7 Data Volume/Performance

N/A

2.5.8 Failure Procedure/Operational Instructions

Batch Support Operations staff will evaluate transmission errors and failures and determine the appropriate resolution (i.e., manually retrieving the file from the directory and contacting the external partner if there is an account or password issue, etc.)

2.6 Batch – Text Campaigns – Appointments and Forms

2.6.1 Overview

There are multiple text message campaigns that send a text to customers. Customers receive the text messages only when specific scenarios occur to trigger the message.

Four of the existing campaigns are:

- **Appointment Reminder**
  - Remind the customer they have an upcoming scheduled appointment
- **Missed Appointment**
  - Inform the customer that they have missed their scheduled appointment
- **Form Processed with Details**
  - Informs the customer that a specific form has been marked as completed. Additional benefit details are available related to the completed form and the details will be included in the text message.
- **Form Processed**
  - Informs the customer that a specific form has been marked as completed. No additional benefit details are available to share with the customer currently.

The text campaigns listed above will be updated to capture the program type(s) (ex: CalFresh, CalWORKs, etc.) associated to each individual message to be sent to a customer. The captured program type information will be used to verify the customer opted-in to receive text notifications about the program. And when creating records on the Customer Contact History page, the program type(s) will be listed on the page for the sent text notification.

2.6.2 Description of Change

1. For all described updates in this section, they will be applied to only **all** the below listed text notification campaigns:

Campaign Name	Campaign Description	Batch Job Number (Reference Only)

Appointment Reminder	Remind the customer they have an upcoming scheduled appointment	PO00V101
Missed Appointment	Informs customer they missed a scheduled appointment	PO00V103
Form Processed	Informs the customer a form was processed, with no benefit information details available.	PO00V121
Form Processed with Details	Informs the customer a form was processed, with benefit information details available.	PO00V123

Note: The above listed batch job numbers are subject to change over time. They are only listed here for reference

2. Update the text notification campaigns to identify what program type(s) an individual text notification is associated to.

   Notes:
   - Both appointments and forms can potentially be associated to more than one program
   - Appointments created before go-live will have no programs associated to them. These will be treated as "all programs" appointments.

   a. Each individual appointment's program type(s) will be identified as the programs a worker or batch set to be associated to the appointment.

      Note: The ability to associate program type(s) for an appointment was designed and implemented as part of

phase 1 of this effort.

b. Each individual form's program(s) will be identified by the form's customer report program type(s) associated to that individual form.

Note: All the campaigns' current supported form types are variations of different customer reports. All customer reports have one or more program types directly associated to the form and each associated program has its own individual separately tracked status.

2.6.3 Execution Frequency

NA – The execution frequency is not being changed.

2.6.4 Key Scheduling Dependencies

NA – The scheduling dependencies are not being changed.

2.6.5 Counties Impacted

All

2.6.6 Category

NA – The category is not being changed.

2.6.7 Data Volume/Performance

NA – No significant data volume changes are expected.

2.6.8 Failure Procedure/Operational Instructions

NA – The failure procedures are not being changed.

2.7 Batch – Undeliverable Real-Time Text Notifications

2.7.1 Overview

The real-time text notifications are sometimes undeliverable for a customer's specific phone number. This can include but is not limited to the customer may have marked CalSAWS notifications as spam or blocked the CalSAWS phone number. The preexisting exact definition of an "undeliverable" text notification will not be changed by this recommendation.

CalSAWS will attempt to resend undeliverable real-time text notification up to three times. If the notification fails all three times, the customer's individual phone number will be opted-out of receiving further text notifications from CalSAWS.

The undeliverable notification opt-out process will be updated to change the customer's program-level opt-in status too. The customer's program-level statuses will be changed to be opted-out, but only if the customer has no other phone number still opted-in to receive text notifications.

2.7.2 Description of Change

1. Update the opt-out process triggered by undeliverable real-time text notifications. Along with all existing process, additionally do the following
    a. Update the values on the Contact Detail page. In the Text Message Opt-In by Program section, for **all** program types, update following fields as described below:

Field Name	New Value
Program Opt-In	No
Program Text Message Status	Undeliverable
Status Date	**The current date, when the status change took place*

2.7.3 Partner Integration Testing

N/A – No partners exist

2.7.4 Execution Frequency

N/A– No changes

2.7.5 Key Scheduling Dependencies

N/A – No changes

2.7.6 Counties Impacted

All counties

2.7.7 Category

N/A – No changes

2.7.8 Data Volume/Performance

N/A – No changes

2.7.9 Interface Partner

N/A – No partners exist

2.7.10 Failure Procedure/Operational Instructions

N/A – No changes

2.8 Batch – Batch and Real-Time Texting Notifications

2.8.1 Overview

There are both batch and real-time text notification campaigns. Individual text campaigns identify their respective target customer populations and provide their respective (batch or real-time) systems the information to send the text notification to the intended customer. After the text notification is sent to the customer, both batch and real-time campaigns create a record on the Customer Contact History page, for each text notification.

Both the batch and real time texting notification processes will be updated to receive program type (ex: CalWORKs, CalFresh, etc.) information from the individual text campaigns. Any updates to the individual campaigns to provide the program type will not be included as part of this specific recommendation.

Additionally, both the batch and real time texting notification processes will be updated to provide the campaigns' program information to the Customer Contact History page when creating records for the sent text notifications. Any updates to the Customer Contact page on how to display the program information will not be included as part of this specific recommendation.

2.8.2 Description of Change

1. Update both the batch and real time texting notification processes to receive program information for all campaign's message.

   Note: The individual text campaigns will identify the customer's program; campaigns are not updated as part of this recommendation. The process that is being update here is limited to the text notification service that receives the program information from the campaigns and shares the program information other necessary processes.

2. Update both the batch and real time texting notification process to use the campaign's provided program information to determine if the customer opted into receive text messages for that program type.

   a. An individual text notification may be associated to more than one program type. The customer only needs to have opted-in to at least one of the associated program types for the text

notification to be sent.

b. The below table describes what text notification opt-in program type aligns with which the campaign's identified program type(s).

Text Opt-in Program Type	Campaign Program Type
CalFresh	CalFresh
CalWORKs	CalWORKs
Medi-Cal	Medi-Cal
Other	**Any program type not listed prior in this column.*

Notes:

- The customer's current text notification program-level opt-in status is found on the customer's Contact Detail page. Please refer to the online page changes to the Contact Detail page for more details about the Opt-in statuses.

- For text notification campaigns that have no concept of programs type(s), they will be treated as "all programs". If a customer is opted-in to receive any text notifications, they will then receive an "all programs" text notification.

- If a text notification campaign is associated to a CalWORKs/CalFresh combined concept (ex: a Redetermination Packet), it will be treated as both CalWORKs and CalFresh. If customer has opted-in to receive notifications from at least one of these programs, they will receive the text notification.

- Counties are responsible for determining how workers should classify what the appointment program type(s) should be for certain sub-programs (ex: a Transitional CalFresh appointment may be marked simply as a CalFresh program appointment). Each county's choice of categorization may differ.

c. A customer is considered opted-in to receive text notifications for a program based on the Contact Detail page's Text Message Opt-In by Program subsection. The below table describes what the field values need to be, to be considered opted-in for that program.

Field Name	New Value
Program Opt-In	Yes
Program Text Message Status	Verified

Note: This program-level opt-in validation is in addition to other existing opt-in requirements.

d. See the below table for what action to perform, based on if the customer's program opt-in status.

Scenario	Triggered Action
The customer did opt-in to receive a text message for the program type, on the Contact Detail page. **Note**: An individual text message can be associated to multiple different program types. If the customer is opted into *at least one* of those programs, they fall under this scenario.	1) The text campaign will be sent. 2) Proceed to perform any already existing post-text actions that are required for all text campaigns. (Ex: Adding a record to the Customer Contact History page for the sent text.)
The customer did not opt-in to receive texts for the program type. **Note**: An individual text message can be associated to multiple different program types. If the customer is opted into none of those programs, they fall under this	1) The text message will not be sent to the customer. 2) Do not perform any further actions. Treat these instances the same as if the text campaign never identified the customer to send a text to.

scenario.	

3. Update both the batch and real-time text notification process' creation of a record on the Customer Contact History page. Provide the Customer Contact History page with the program type(s) the text message was sent for. Please view the below table for more details about providing the program type(s) to the Customer Contact History page.

Scenario	Triggered Action
1) A single sent text message is associated to only one program type.	1) Provide the Customer Contact History page with the program type to display on the page.
1) A single sent text message is associated to multiple different programs. **Note**: Please see the Assumption section about existing functionality for when multiple duplicate text messages are sent to the same customer on the same day.	1) Provide the Customer Contact History page with a list of each program associated to the sent text message. • The page will not be provided any duplicates of individual program types. • The page will only be provided with program types that customer opted into receive text messages from.

   a. For text notifications regarding appointments with specific program type(s), see the below table for details on how the program type(s) will appear on the Customer Contact History page.

Appointment Program Types	**Customer Contact History Program(s)**
CalFresh	CalFresh
CalWORKs	CalWORKs
GAGR ES/GROW	If case is not in Los Angeles: GA/GR Employment Services If case is in Los Angeles: GROW

GA/GR	General Assistance/General Relief
Medi-Cal	Medi-Cal
WTW/REP	Welfare to Work, REP
Other	Other

2.8.3 Partner Integration Testing

N/A – No partners exist for the batch or real-time texting framework

2.8.4 Execution Frequency

N/A – The execute frequences are not being updated by this design.

2.8.5 Key Scheduling Dependencies

N/A – The dependencies are not being updated by this design

2.8.6 Counties Impacted

All

2.8.7 Category

N/A – The category is not being changed by this design.

2.8.8 Data Volume/Performance

N/A – The volume and performance are not being updated by this design

2.8.9 Interface Partner

N/A – No partners exist for the batch or real-time texting framework

2.8.10 Failure Procedure/Operational Instructions

N/A – No existing instructions are changed by this SCR.

2.9 Batch – Text Notification Status Change – Opt-Out

2.9.1 Overview

A participant may respond to a message sent to them by CalSAWS or sending their first message to opt out of receiving text notifications.

The participant can send a response to a text notification verification, the participant can trigger either completing the verification or to deny the verification. This process will be updated to also opt-out the participant on the program level, if the participant denies the verification.

The participant can also send a response to CalSAWS that opts-out from receiving all further text notifications. This process will be updated to also opt-out the participant on the program level, for all programs.

2.9.2 Description of Change

1. Update the process that occurs when the participant responds to a text notification with any supported keyword that would be interpreted to mean the customer does not want to receive text notifications.

   Note: This change includes both if the participant's response is to an opt-in verification or any text notification campaign.

   a. Add a process to opt-out the program-level text notification. The participant will be opted-out of **all** programs.

   b. When opting-out the participant's program-level, on the Contact Detail page, update all the following fields to the values described in the below table.

Field	New Value
Program Opt-In	No
Program Text Message Status	Opted-Out
Status Date	**The current date, when the status change took place*

Notes:

- The changing of the program-level field values is in addition to all existing triggered processes. It does not replace the existing processes

- The same keywords are used to both trigger a denial an opt-in verification and to trigger a mass opt-out of all text notification. CalSAWS is not able to distinguish if the customer is responding to a verification text for a sub-set of programs or responding prevent all further text notification. This is a text notification technology limitation that cannot be overcome by CalSAWS.

- Opt-out keywords and supported language equivalents are preexisting and not being updated by this SCR.

2.9.3 Partner Integration Testing

N/A

2.9.4 Execution Frequency

N/A

2.9.5 Key Scheduling Dependencies

N/A

2.9.6 Counties Impacted

All counties

2.9.7 Category

N/A

2.9.8 Data Volume/Performance

N/A

2.9.9 Interface Partner

N/A

2.9.10 Failure Procedure/Operational Instructions

N/A

2.10 Batch – Text Notification Status Change – Opt-In

2.10.1 Overview

A customer may respond to a message sent to them by CalSAWS or sending their first message to opt-in to receive text notification.

The participant can respond to a text notification verification. The participant's response can be to either accept or deny the verification. This process will be updated to also opt-in the participant on the program level, if the participant completes their notification verification.

The participant can also send a response to CalSAWS that will opt them in to start receiving text notifications. This process will be updated to opt-in the participant on the program level, for all programs.

2.10.2 Description of Change

1. Update the process for when a participant is opted-in to receive text notifications, due their response to a verification text sent to them by CalSAWS.

    a. Add a process that will opt-in any program-level with a status of

Program Text Message Status
Pending Verification

    b. When opting-in the participant's program-level (see prior bullet), update all the following fields to the values described in the below table.

Field	New Value
Program Opt-In	Yes
Program Text Message Status	Verified
Status Date	**The current date, when the status change took place*

Notes:

- The changing of the program-level fields is in addition to all existing triggered processes. It does not replace the existing processes.

- If other program-level statuses are already opted-out or opted-in (not pending verification), those status will not be changed.

- Opt-in keywords and supported language equivalents are preexisting and not being updated by this SCR.

2. Update the process for when a participant sends a message to CalSAWS, with a supported keyword that would cause the customer to be opted-in to receive text notification.

    a. Add a process to update <u>all</u> program-level text notification status to "Verified"

Field	New Value
Program Opt-In	Yes
Program Text Message Status	Verified
Status Date	**The current date, when the status change took place*

Notes:

- The changing of the program-level status is in addition to all existing triggered processes. It does not replace the existing processes

- Opt-In keywords and supported language equivalents are preexisting and not being updated by this SCR.

2.10.3 Partner Integration Testing

N/A

2.10.4 Execution Frequency

N/A

2.10.5 Key Scheduling Dependencies

N/A

2.10.6 Counties Impacted

All counties

2.10.7 Category

N/A

2.10.8 Data Volume/Performance

N/A

2.10.9 Interface Partner

N/A

2.10.10 Failure Procedure/Operational Instructions

N/A

2.11 Batch – Test Only – E-Signature Text Notification

2.11.1 Overview

A customer can give a one-time opt-in to receive a text notification to provide an electronic signature for a form. Due to the customer's one-time opt-in, E-signature does not perform any validations if the customer has opted-in to other text notification campaigns.

When an E-signature message is sent to a customer, it is not recorded in CalSAWS. The Customer Contact History page does have a record of the E-signature message sent to the customer and no case journal is created.

The design of E-signature text campaign messages is not being changed by this SCR because it does not currently check the customer's general opt-in status. However, the same real-time text notification process is being updated that also manages E-signature process. E-signature campaign will be tested to verify there is not any unintentional impact by the other real-time text notification process changes.

2.11.2 Description of Change

1. Test the E-Signature text notification campaign. Validate the campaign still functions as per its current design.

2.11.3 Partner Integration Testing

N/A

2.11.4 Execution Frequency

N/A

2.11.5 Key Scheduling Dependencies

N/A

2.11.6 Counties Impacted

All counties

2.11.7 Category

N/A

2.11.8 Data Volume/Performance

N/A

2.11.9 Interface Partner

N/A

2.11.10 Failure Procedure/Operational Instructions

N/A

2.12 Updates to Barcoded Document Routing Detail Recommendation

2.12.1 Overview

When a barcode is entered on the Barcoded Document Routing Detail page and the corresponding document is marked 'Received', send a 'Form Received' text to the primary applicant.

2.12.2 Description of Change

1. Send a 'Form Received' text message when any of the following packets are marked "Received" from the Barcoded Document Routing Detail page:
    - **a.** CW RE Packet,
    - **b.** CW/CF RE Packet,
    - **c.** CF RE Packet,
    - **d.** MAGI RE Packet,
    - **e.** Non-MAGI RE Packet,
    - **f.** Mixed Household RE Packet, and
    - **g.** SAR 7

2.12.3 Partner Integration Testing

N/A

2.12.4 Execution Frequency

Real-time.

2.12.5 Key Scheduling Dependencies

N/A

2.12.6 Counties Impacted

All counties

2.12.7 Category

N/A

2.12.8 Data Volume/Performance

N/A

2.13 Updates to CSF 170 - Text Notification Agreement Form Recommendation

2.13.1 Overview

The CSF 170 is the agreement to receive text notifications from CalSAWS to the customer.

State Form: N/A – Non-State Form

Current Programs: All Programs

Current Attached Form(s): None

Current Forms Category: Forms

Current Template Repository Visibility: All Counties

Existing Languages: English and Spanish

2.13.2 Form Verbiage

There are no changes to this section.

2.13.3 Form Variable Population

There are no changes to this section.

2.13.4 Form Generation Conditions

1. **<u>Updates to Form Generation</u>**

   Create a new batch job that generates the CSF 170 for the following conditions:

   - Program – Any program
   - Program Status – Active
   - A CSF 170 was not previously sent for the case from the application date.
   - The customer has not yet opted into text notification.

   Batch Schedule: Daily

   Estimated Count ~ 14,000 cases

   Notes:

   a. *This batch is turned off until the SCR CA-260623 is ready to go into production.*

2. **<u>Update Form Print/Mailing Options</u>**

   The Print and Mailing Options will be updated as follows:

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

Mailing Options:

Mail-To (Recipient): Mail to the primary applicant when generated via batch. Mail to the customer's name selected from the document parameters dropdown when generated via Template Repository.

Mailed From (Return): Sending Office

Mail-back-to Address: County BRM address

Outgoing Envelope Type: Standard Envelope

Return Envelope Type: Pre-paid envelope

Additional Options:

Special Paper Stock: No

Enclosures: No

Electronic Signature:

- Electronic Signature (IVR/Text): Yes
- Check to Sign: Yes

Post to Self Service Portal: Yes

2.14 Automated Regression Test

2.14.1 Overview

Create new automated regression test scripts to verify that Text Message Opt-In By Program details can be saved and updated on the Contact Detail page, and these changes can be viewed on the Transaction History Detail page.

2.14.2 Description of Change

1. Create regression scripts to perform the following verifications:
    a. Navigate to the Contact Detail page in edit mode for a person with no existing phone number information. Add a new phone number with Text Message set to "Opt-In", and the Program Opt-In value set to "Yes" for at least one program. Verify that the page can be saved, and that the new values display on the page in view mode. Navigate to the Transaction History page and verify that all selected values display in the transaction list.
    b. Navigate to the Contact Detail page in edit mode for a person with an existing phone number with Text Message set to "Opt-In". Update the Program Opt-In values in the Text Message Opt-In by Program section and save the page. Verify that the updated values display on the page in view mode. Navigate to the Transaction History page and verify that all changes are reflected in the transaction list.
    c. Navigate to the Contact Detail page in edit mode for a person with no existing phone number information. Add a new phone number with Text Message set to "Opt-In", set the Program Opt-In value to "No" for all programs, and attempt to save the page. Verify that an appropriate validation message displays.
    d. Navigate to the Contact Detail page in edit mode for a person with an existing phone number with Text Message set to "Opt-In" and at least one Program Opt-In value set to "Yes". Update the Program Opt-In value to "No" for all programs and attempt to save the page. Verify that an appropriate validation message displays.
2. Create regression scripts to verify that a Page Mapping entry exists for each applicable field on the following pages:
    a. Contact Detail
    b. Customer Contact History

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.18.3.20	The LRS shall support multiple means of communicating appointments, appointment reminders, and critical dates and/or information that may affect a participant's eligibility, using the following means: a. E-mail; b. Text messaging; d. Automated phone reminder; e. USPS mail	This SCR is part of a series of SCRs that update the process by which a participant opts-in to receive text messages.

CalSAWS

California Statewide Automated Welfare System

CA-281935

Update Suspend Logic for CW Overpayment Threshold Policy

CalSAWS	DOCUMENT APPROVAL HISTORY		
	Prepared By	Romel Acosta	
	Reviewed By		
DATE	**VERSION**	**REVISION DESCRIPTION**	**AUTHOR**
10/3/2024	1.0	Initial Draft	Romel Acosta
10/24/2024	1.1	Add note to recommendation 1. Add 2nd recommendation for a DCR to Active previously suspended Recovery Accounts. Update List to comprise of all Recovery Accounts Activated by the DCR.	Romel Acosta

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CA-281935 – Update Suspend Logic for CW Overpayment Threshold Policy

1 OVERVIEW

1.1 Current Design

The Uncollectible Recovery Account Batch Job currently Suspends CalWORKs/RCA Recovery Accounts that have a current balance under $250 and other various criteria. One specific criterion is that there does not exist an Active Recovery Account Responsible Party who is also an Active or Ineligible Program Person under the Recovery Account's same program type for any case in CalSAWS.

1.2 Requests

As per ACL 19-102, overpayment threshold policy applies only to closed cases and therefore, effective July 1, 2019, the system shall not demand collection of any non-fraudulent overpayments totaling less than $250 from the responsible individual(s) if they are no longer aided in the system under the CalWORKs or RCA program. With that said, the Uncollectible Recovery Account Batch must be updated to consider CW/RCA program status rather than CW/RCA Program Person status when determining the suspension of CW/RCA Recovery Accounts with a current balance under $250. Furthermore, the batch must not Suspend CW/RCA Recovery Accounts with a current balance under $250 if the related case has an active CW or RCA program.

1.3 Overview of Recommendations

1. Update the Uncollectible Recovery Account Batch to consider CW/RCA program status rather than CW/RCA Program Person status when determining the suspension of CW/RCA Recovery Accounts with a current balance under $250. Furthermore, the batch must not Suspend CW/RCA Recovery Accounts with a current balance under $250 if the related case has an active CW or RCA program.

   Note: This update will replace the Active/Ineligible Program Person check for all Active Recovery Account Responsible Parties. This update will also remove the Responsible Party Adjust Indicator check.
2. Run a DCR to update all Recovery Accounts suspended by the Uncollectible Recovery Account Batch to Active status with status reason Active. The DCR will only update Recovery Accounts with an Active CW or RCA program at the time of its suspension. It will also update Recovery Accounts that will not be re-Suspended by the Uncollectible Recovery Account Batch.

1.4 Assumptions

1. Of the $250 CW/RCA Recovery Account Suspension criteria in the Uncollectible Recovery Account Batch, only the Program Person criterion will be updated as per the above Requests and Recommendations. All other criteria will remain unchanged.
2. Only the CW/RCA Suspension logic will be updated in the Uncollectible Recovery Account Batch job. All other logic will remain unchanged.
3. The DCR will not update Recovery Accounts that would be re-Suspended by the Uncollectible Recovery Account Batch so to avoid generating duplicate NOAs.

2 RECOMMENDATIONS

2.1 Uncollectible Recovery Account Batch

2.1.1 Overview

In terms of CW/RCA Recovery Account Suspension, the Uncollectible Recovery Account Batch job searches on a nightly basis for any CW/RCA Recovery Accounts that do not have an Active/Ineligible Program Person for all Active Recovery Account Responsible Parties. All CW/RCA Recovery Accounts that pass this criterion are suspended by the job.

Changes will be made to replace this criterion with an Active program check. Essentially, if the CW/RCA Recovery Account's related case has an active CW or RCA program then the Recovery Account cannot be suspended.

2.1.2 Description of Change

1. Update the Uncollectible Recovery Account Batch job to not suspend CW/RCA Recovery Accounts if their related case has an active CW or RCA program.
    a. This update will replace the Active/Ineligible Program Person check for all Active Recovery Account Responsible Parties.

2.1.3 Execution Frequency

No changes.

2.1.4 Key Scheduling Dependencies

No changes.

2.1.5 Counties Impacted

All counties.

2.1.6 Category

No changes.

2.1.7 Data Volume/Performance

As of 10/24/2024, 730 records will be suspended by the job.

2.1.8 Failure Procedure/Operational Instructions

No changes.

2.2 Reactivate Suspended Recovery Accounts Data Change

2.2.1 Overview

There exists past Recovery Accounts updated to Suspended status by the Uncollectible Recovery Account Batch due to the old Active/Ineligible Program Person logic being replaced by this SCR. These Recovery Accounts must be updated to Active status if their cases' associated CW/RCA programs were Active at the time the suspension occurred and if they will not be re-Suspended by the Uncollectible Recovery Account Batch.

2.2.2 Description of Change

1. Create a DCR that updates all Suspended Recovery Accounts to Active status with Active status reason that fall under the below criteria:
    a. Was suspended with status reason Policy Threshold by the Uncollectible Recovery Account Batch with status reason Policy Threshold
    b. Had an Active CW or RCA program at the time of suspension
    c. Will not be Suspended again by the Uncollectible Recovery Account Batch if Activated by this DCR

2.2.3 Estimated Number of Records Impacted/Performance

1998 Recovery Accounts will be updated.

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.11.2.12	The LRS shall discontinue collection of overpayments/overissuances once all outstanding overpayments/overissuances have been collected, there is an overpayment/overissuance claim status change to terminated, voided, or uncollectable, or the collection of the overpayment/overissuance has been deemed satisfied.	CW/RCA Recovery Accounts will only be Suspended by the Uncollectible Recovery Account Batch if their related program is not in Active status.

4 OUTREACH

4.1 Lists

List Name: CA-281935 Activated Recovery Account List
List Criteria: Include all CW/RCA Recovery Accounts that will be Activated by this SCR's DCR.
Standard Columns:

- County
- Case Number
- Program
- Recovery Account ID
- Recovery Account Current Balance
- Recovery Account Investigation Code
- Recovery Account Status
- Recovery Account Status Reason
- Recovery Account Cause
- Recovery Account Discovery Date
- Active CW Case Program Indicator
- Active RCA Case Program Indicator

Frequency: One-time

The list will be posted to the following location: CalSAWS Web Portal>System Changes>SCR and SIR Lists>2025>CA-281935

CalSAWS

California Statewide Automated Welfare System

CA-282588-ACIN I-XX-24 2025
CAPI COLA - Batch EDBC

CalSAWS	DOCUMENT APPROVAL HISTORY			
	Prepared By	Tom Lazio		
	Reviewed By			
DATE	**VERSION**	**REVISION DESCRIPTION**	**AUTHOR**	
10/28/2024	1.0	Initial Draft	T. Lazio	

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5.1 Batch Operations: 8

1 OVERVIEW

Per ACIN I-XX-24, the new payment standards for the Cash Assistance Program for Immigrants (CAPI) program will be implemented effective January 1, 2025. This SCR will provide details for the one-time batch run that will apply the new payment standards ISM presumed maximum values to the CAPI program for the benefit month of January 2025.

1.1 Current Design

Currently CalSAWS uses the 2024 CAPI payment standards that are effective from January 1, 2024, based on SCRs CA-243003 (2024 CAPI CTCR) and CA- 243004 (CAPI COLA Batch Run).

1.2 Requests

CA-257176 will update CalSAWS with the 2025 CAPI COLA Payment Standards and ISM Presumed Maximum Values (PMV) effective 01/01/2025. Once that SCR is implemented, run batch EDBC on active CAPI programs to calculate new benefit amounts effective 1/1/2025. Then run batch EDBC on CalFresh programs that have a participant in common with a CAPI program.

1.3 Overview of Recommendations

1. Run Batch EDBC for CAPI programs to apply the new payment standard and PMV values along with CF/NB programs that have a CAPI participant in common.
2. Generate statistical report for EDBC counts by County.
3. Generate exception and informational listings for Counties to review.

1.4 Assumptions

1. CAPI COLA Change NOA is generated for Active CAPI programs when Batch EDBC is run with a run reason of CAPI COLA and there is a change in the monthly benefit amount issued.
2. The existing CalFresh Change NOA will generate when the CAPI COLA changes impact the CalFresh benefit.
3. If the CalFresh and/or CAPI benefit amount change(s) based on the CAPI COLA and another change (e.g., income increase/decrease), send only the change NOA related to the non-COLA change, per existing logic.
4. For cases with both CAPI and CalFresh programs, both the CalFresh change NOA, and the CAPI Notice of Change will be sent if the new CAPI payment standards cause the benefits to change for both programs.
5. Counties can check 'yellow banner' programs daily with the latest Qlik dashboard report 'Converted Case Review Dashboard'.

2 RECOMMENDATIONS

2.1 Run Batch EDBC for CAPI and CF/NB

2.1.1 Overview

CAPI/CF/NB Batch EDBC will run for the benefit months of 01/2025 and 02/2025 for CAPI and 02/2025 benefit month for CF/NB.

2.1.2 Description of Changes

1. Run batch EDBC for active CAPI programs for the benefit months of 01/2025 and 02/2025. **Note:** This step must complete before the CalFresh cases (see recommendation 2 below) because spouses who are both on CAPI will be on separate cases for CAPI benefits but may be in the same CF household and the CF should only run after both CAPI cases have processed.
    a. Batch EDBC will run with the run reason CT744_CP (CAPI COLA).
    b. Batch EDBC records will have a run type code of 'Single Program'.
    c. Batch EDBC will not run EDBC for CAPI programs if the benefit month is past the latest RE due date.
    d. Batch EDBC will not be triggered on any CAPI programs that already have an Accepted & Saved for the January 2025 and/or February 2025 benefit months since CA-257176 went into production.
    e. All CAPI programs run by batch will be automatically authorized. There is no Pending Authorization logic in batch, so no cases will be queued for supervisor authorization.
    f. Batch EDBC will not run EDBC for 'Yellow Banner' programs where the high-dated EDBC has a source of 'Conversion'.
    g. Batch EDBC will insert the below Journal entry for CAPI programs:

       Short Description: "Batch EDBC ran for [month year]."
       Long Description: "Batch EDBC Ran for [month year]. Batch EDBC processed for the program for following reasons: CAPI COLA "
2. Run batch EDBC for active CF and NB programs having an active CalFresh participant in common with active CAPI program for the month of 02/2025. **Note: CF cases can be in a different county from the CAPI case such as CAPI programs administered by Sacramento and San Mateo counties where the CF case is in the residing county of the CAPI individual.**
    a. Batch EDBC will run with the run reason CT744_CP (CAPI COLA) for CF program only.

b. Batch EDBC records will have a run type code of 'Partial Program' for both CF and NB.
c. Batch EDBC will not run on the active CF program cases that have a SAR7 Due Month of 01/2025, and the report status is 'Generated', 'Sent', 'Received', or 'Incomplete'.
d. Batch EDBC will not run CF Program if the benefit month is past the latest RE due date.
e. Batch EDBC will not run EDBC for 'Yellow Banner' programs where the high-dated EDBC has a source of 'Conversion'.
f. Batch EDBC will insert the below Journal entry for CF and NB programs where there is a common CAPI program participant:

   Short Description: "Batch EDBC ran for [month year]."
   Long Description: "Batch EDBC Ran for [month year]. Batch EDBC processed for the program for following reasons: CAPI COLA "

2.1.3 Programs Impacted

CAPI
CF
NB

2.1.4 Performance Impacts

N/A

3 REQUIREMENTS

3.1 Project Requirements

REQ #	REQUIREMENT TEXT	How Requirement Met
2.16.1.2	The CalSAWS 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 CAPI payment standards will be updated in the system. These new COLA values will be used to determine the eligibility benefits.
2.16.4.1	The CalSAWS shall include the ability to process a mass update that includes eligibility and benefits with an effective date of any prior month, the current month, or future month(s).	The Batch EDBC process will be run and determine eligibility using the new CAPI payment standards.

4 OUTREACH

4.1 COLA Stats by County Report

Generate a statistical report called 'COLA Stats by County Report' that summarizes the EDBC count for each program included in the COLA by County and contains the following fields:

- <program> EDBC Counts
- <program> EDBC Processed
- <program> EDBC Skipped (Exception)
- <program> EDBC Read Only
- <program> EDBC Stack Trace
- <program> Success %
- **Total Case Count Processed**
- **Total EDBC Count**
- **Total EDBC Processed**
- **Total EDBC Skipped (Exception)**
- **Total EDBC Read Only**
- **Total EDBC Stack Trace**
- **Overall Success Rate %**
- **Total NOAs Generated**

NOTE: The columns in **bold** will include all programs in the COLA. The counts above will be separated by each County (see example below). Also, CF and NB counts will be consolidated under one set of <program> counts designated as 'CF'.

The report will be posted to the following location: CalSAWS Web Portal>System Changes>SCR and SIR Lists>2025>CA-282588

4.2 Lists

Generate lists to aid the counties after batch EDBC completes. All lists will have the standard list columns to display on the listings.

Standard Columns:

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

Informational List: Below are the case listing details for informational purposes only and can be reviewed if required.

1. **List Name:** Impacted Case List
List Criteria: List of all impacted active CAPI and CF cases will be generated before the Batch EDBC run.
Additional Column(s): 'CAPI Case Number', 'CAPI Case County', 'CalFresh Case Number', CalFresh Case County'
NOTE: The CF cases will be where the person from the CAPI CASE is active on CF, if one exists. The 'CalFresh Case Number' column may contain the same or a different case number than the 'CAPI Case Number' column, or it may be blank.

2. **List Name:** CF cases with CAPI OPA records
List Criteria: List of active CF cases processed by Batch EDBC with an active CF participant who has high dated Other Program Assistance (OPA) record with type of assistance is 'CAPI'
Additional Column(s): Person Name (Last Name, First Name), OPA Begin Date

3. **List Name:** CAPI cases with high dated ISM Income Records
List Criteria: List of all active CAPI cases processed by Batch EDBC with active participants with high dated income records with income types 'Other Unearned All' or 'In-Kind Support and Maintenance (ISM)'.
Additional Column(s): 'Person Name (Last Name, First Name)', 'Income Category', 'Income Type', 'Income Frequency', 'Income Begin Date'
NOTE: In-Kind Support and Maintenance (ISM) income amounts are calculated by EDBC and will not have an Income Reported Amount on Income Amount Detail page.

4. **List Name:** Cases excluded from COLA
List Criteria: List of all cases that were excluded from the COLA driving queries based on the case exclusion criteria detailed in Section 2.1.2 (specifically 2.1.2.1.c, 2.1.2.1.d, 2.1.2.2.c, 2.1.2.2.d). **NOTE:** The 'yellow banner' population included in Section 2.1.2.1.f and 2.1.2.2.e will not be part of this listing.
Additional Column(s): 'Program Type', 'Reason for Exclusion Description'

Exception List: Below are the case listing details for case exceptions to be reviewed by Counties for any further action.

1. **List Name:** Cases with Program Closed by Batch
List Criteria: List of CP/CF/NB programs discontinued by batch EDBC.
Additional Column(s): "Program Type", "Program Closure Reason"

2. **List Name:** Cases with Person Closed by Batch
List Criteria: List of CP/CF/NB programs where batch EDBC closed a person.
Additional Column(s): "Program Type", "Person Closure Reason"

3. **List Name:** Cases Skipped by Batch
List Criteria: List of CP/CF/NB programs skipped in the batch EDBC run with skip reasons.
Additional Column(s): "Program Type", "EDBC Month", "Skip Reason"

The lists will be posted to the following location: CalSAWS Web Portal>System Changes>SCR and SIR Lists>2025>CA-282588

5 APPENDIX

5.1 Batch Operations:

a) Run the new COLA batch sweep jobs for CAPI programs (population from Section 2.1.2 recommendation 1 of SCR CA-282588) to insert records into SYS_TRANSACT_COLA for targeted programs for the 01/2025 and 02/2025 benefit months.
b) Run COLA Batch EDBC framework for the population in step a) above.
c) Run the new COLA batch sweep jobs for CF/NB programs (population from Section 2.1.2 recommendation 2 of SCR CA-282588) to insert records into SYS_TRANSACT_COLA for targeted programs for the 02/2025 benefit month.
d) Run COLA Batch EDBC framework for the population in step c) above.

Estimated CAPI COLA Cases: 16,800
Estimated CF Cases: 3,908

NOTE: Batch EDBC will run for all counties (see county list below). Those counties with no cases will be skipped.

Code	County
01	Alameda
02	Alpine
03	Amador
04	Butte
05	Calaveras
06	Colusa
07	Contra Costa
08	Del Norte
09	El Dorado
10	Fresno
11	Glenn
12	Humboldt
13	Imperial
14	Inyo
15	Kern
16	Kings
17	Lake
18	Lassen
19	Los Angeles
20	Madera
21	Marin
22	Mariposa
23	Mendocino
24	Merced

Code	County
25	Modoc
26	Mono
27	Monterey
28	Napa
29	Nevada
30	Orange
31	Placer
32	Plumas
33	Riverside
34	Sacramento
35	San Benito
36	San Bernardino
37	San Diego
38	San Francisco
39	San Joaquin
40	San Luis Obispo
41	San Mateo
42	Santa Barbara
43	Santa Clara
44	Santa Cruz
45	Shasta
46	Sierra
47	Siskiyou
48	Solano
49	Sonoma
50	Stanislaus
51	Sutter
52	Tehama
53	Trinity
54	Tulare
55	Tuolumne
56	Ventura
57	Yolo
58	Yuba

CalSAWS

California Statewide Automated Welfare System

Design Document

CA-283047

Update the MC 239 TMC-1

CalSAWS	DOCUMENT APPROVAL HISTORY	
	Prepared By	Nagesha S
	Reviewed By	Nithin Bairlingal Halesh

DATE	DOCUMENT VERSION	REVISION DESCRIPTION	AUTHOR
10/12/2024	1.0	Initial Draft	Nagesha S

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1 OVERVIEW

The purpose of this SCR is to update the date filed population logic on when the status report will be sent to the customer when TMC Approval notice (MC 239 TMC-1) generated through EDBC and to add the names of the individuals on the MC 239 TMC-1 and MC 239 TMC-2 when the notices are manually generated from Template Repository.

1.1 Current Design

1. The system automated TMC Approval notice (MC 239 TMC-1) has incorrect date on when the status report will be sent to the customer. The date that generates on the as the date the report will be sent is the 5th month, and it should state the 3rd month.
2. There is no place to add the names of the individuals on the MC 239 TMC-1 and MC 239 TMC-2 when the notices are manually generated from Template Repository.

1.2 Requests

1. Update the field that states the date the report will be sent out to the 3rd month on the MC 239 TMC-1 when the notice is system generated in EDBC.
2. Add a line of who the Notice is for on the MC 239 TMC-1 and MC 239 TMC-2 when the notices are manually generated from Template Repository.

1.3 Overview of Recommendations

1. Update the field that states the date the report will be sent out to the 3rd month on the MC 239 TMC-1 when the notice is system generated in EDBC.
2. Add a line of who the Notice is for on the MC 239 TMC-1 and MC 239 TMC-2 when the notices are manually generated from Template Repository.

1.4 Assumptions

1. No variables will be populated on the new MC 239 TMC-1 and MC 239 TMC -2 (aside from the standard header and footer information).
2. All fields (blank or prepopulated) will be editable when the notices are generated manually from Template Repository.
3. The triggering conditions of the NOA Fragments for Threshold Generation remain the same and are not being updated.
4. Supporting Documents section references attachments found on Jira.

2 RECOMMENDATIONS

2.1 Update the status report sent date in MC 239 TMC-1 when generated through EDBC.

2.1.1 Overview

This effort will update the field that states the date the report will be sent out to the 3rd month on the MC 239 TMC-1 when the notice is system generated in EDBC.

Reason Fragment Name and ID:
MC_AP_TMC_FULL_1ST_6_MONTH_M166
(Fragment ID: 6575)
State Form/NOA: MC 239 TMC-1
Current NOA Template: MC_NOA_TEMPLATE (Fragment ID: 3028)
Current Program(s): Medi-Cal
Current Action Type: Approval
Current Fragment Level: Person
Currently Repeatable: Yes
Include NA Back 9: Yes
Current Forms/NOAs Generated with this NOA: N/A
Existing Languages: English, Spanish, Armenian, Cambodian, Arabic, Chinese, Farsi, Korean, Hmong, Lao, Russian, Tagalog and Vietnamese.

2.1.2 Form/NOA Verbiage

NOA Mockups/Examples: Supporting Documents #1

2.1.3 Form/NOA Variable Population

1.) <u>Variable Population</u>

Variable Name	Population	Formatting*
< TMCDistributionDate>	Populate the date the report will be sent out to the 3rd month on the MC 239 TMC-1 when the notice is system generated in EDBC.	Arial Font Size 10

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

Variables Requiring Translations: None

2.) Fragment Regulation

There is no change to fragment regulation.

3.) NOA Title / Footer Reference

There are no changes to the NOA Title / Footer reference.

2.1.4 Form/NOA Generation Conditions

No updates required for this section.

2.2 Update the MC 239 TMC-1 (05/07) notice in Template Repository.

2.2.1 Overview

This effort will update the MC 239 TMC-1 (05/07) in English and Spanish in CalSAWS Template Repository.

State Form: MC 239 TMC-1 (05/07)

Programs: Medi-Cal

Attached Forms: N/A

Template Description: TRANSITIONAL MEDI-CAL (TMC) APPROVAL FOR FULL OR RESTRICTED BENEFITS

Forms Category: NOA

Template Repository Visibility: All Counties

Languages: English and Spanish

2.2.2 Form Verbiage

Update MC 239 TMC-1 XDP

Existing MC239_TMC1 xdps will be updated to add a line of who the Notice is for on the MC 239 TMC-1 (05/07) when the notice is manually generated from Template Repository in English and Spanish languages.

Form Header: CalSAWS Standard Header (HEADER_1_EN)

Form Title (Document List Page Displayed Name): TMC Approval Full Or Restricted Benefits

Form Number: MC 239 TMC-1

Include NA Back 9: Yes

Imaging Form Name: TMC Approval Full Or Restricted Benefits

Imaging Document Type: Medi-Cal (MC)

Imaging Case/Person: Case

Form Mockups/Examples: See supporting document #2

2.2.3 Form/NOA Variable Population

N/A

2.2.4 Form Generation Conditions

There will be no updates to the Form Generation, Form Control and Print/Mailing options.

2.3 Update the MC 239 TMC-2 (05/07) notice in Template Repository

2.3.1 Overview

This effort will update the MC 239 TMC-2 (05/07) in English and Spanish in CalSAWS Template Repository.

State Form: MC 239 TMC-2 (05/07)

Programs: Medi-Cal

Attached Forms: N/A

Template Description: Transitional Medi-Cal (TMC) Denial or Discontinuance of Benefits

Forms Category: NOA

Template Repository Visibility: All Counties

Languages: English and Spanish

2.3.2 Form Verbiage

Update MC 239 TMC-2 XDP

Existing MC239_TMC2 xdps will be updated to add a line of who the Notice is for on the MC 239 TMC-2 (05/07) when the notice is manually generated from Template Repository in English and Spanish languages.

Form Header: CalSAWS Standard Header (HEADER_1_EN)

Form Title (Document List Page Displayed Name): TMC Denial or Discontinuance of Benefits

Form Number: MC 239 TMC-2

Include NA Back 9: Yes
Imaging Form Name: TMC Denial or Discontinuance of Benefits
Imaging Document Type: Medi-Cal (MC)
Imaging Case/Person: Case
Form Mockups/Examples: See supporting document #3

2.3.3 Form/NOA Variable Population

N/A

2.3.4 Form Generation Conditions

There will be no updates to the Form Generation, Form Control and Print/Mailing options.

3 SUPPORTING DOCUMENTS

Number	Functional Area	Description	Attachment
1	NOA - EDBC	MC 239 TMC-1 (3/03)	MC 239 TMC-1_Full Benefits_English.pdf MC 239 TMC-1_Restricted_English.pdf
2	NOA- Template Repository	MC 239 TMC-1 (05/07)	MC239_TMC1_EN.pdf MC239_TMC1_SP.pdf
3	NOA- Template Repository	MC 239 TMC-2 (05/07)	MC239_TMC2_EN.pdf MC239_TMC2_SP.pdf

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:	Status report sent date field being updated to states the

CAR-1239	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.	report will be sent out to the 3rd month on the MC 239 TMC-1 when the notice is system generated in EDBC. MC 239 TMC-1 and MC 239 TMC-2 are being updated to add a line of who the Notice is for when they are generated manually from Template Repository.

LRS - LEADER Replacement System (LRS)

SCR 41568

DCFS/DPSS Non Medical Overlapping Scenarios

DOCUMENT APPROVAL HISTORY	
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1 OVERVIEW

This SCR provides the new process of seamless automated transition of child from a DPSS (CalWORKS/CalFRESH) case to DCFS (Foster Care/Kin GAP/AAP/ARC). Currently the DCFS sends a tape of all the children placed in DCFS based on which the DPSS worker manually runs EDBC for the kids receiving aid in DPSS.

2 DCFS DPSS OVERLAP SCENARIOS REQUIRMENTS

Please find the requirement details in the below excel sheet.

FINAL_Scenarios
Base EDBC Requirer

3 DCFS DPSS OVERLAP SCENARIOS DESIGN DETAILS

3.1 SCENARIO 1 - REMOVAL OF CHILD FROM A OPEN CalWORKS/CalFRESH Case

3.11 Batch Job 1 – Monthly Job running two days before cut-off

A Monthly Batch job will run two calendar days before cut off and perform the following

1. Read all DCFS (FC/ARC and KinGAP) cases that have an Active or Pending child placed in the DCFS case from beginning of month till batch run date (two days before cut off) in the current month
2. Identify the kids that are Active in a CalWORKS/CalFRESH case
3. Process the first identified case. It will read the date of first placement from the child placement table in DCFS after they have been placed in the facility (Placed first time/coming back after a break in aid to a DCFS case)
4. Check if the Child is placed in one of the below placement type for Foster Care/ARC(Payee is a resource) and KinGAP(Payee is a Resource)
   FosterCare/ARC – CareTaker(PLACEMENT/Payee) is always a resource.

Placement Types
Supervised Independent Living
Hospital
Multidimensional
Foster Family Agency (Intensive Programs)
Foster Family Agency (Nontreatment)
Foster Family Agency (Treatment)
Group Home

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Foster Family Agency
Community Treatment Facility
Transitional Housing Placement+FC (THP+FC)
Foster Family Home
Foster Family Home-Shelter Care
Specialized Foster Family Home
Tribal Specific Home
Out of State Group Home
Out of State Institutions
Out of State Residential Treatment Facilities
Out of State Basic
Probation Department
Transitional Housing Placement Program (THPP)
County Shelter/Receiving Home (Non EA/AFDC)

If the child is not in one of the above mentioned placement check if they are in one the below placements. If they are in below placement (FC or KinGAP) additionally check if the caretaker/payee in the CalWORKS case has the parental control (check box in the relationship data collection page) of the child in DPSS case and has a relationship of parent to the child in the DPSS case

Placement Types
Small Family Home
Legal Guardian
Nonrelative Extended Family Member Home
Relative Home
Adoptive Homes
Court Specified Home
Guardian Home

KinGAP - If CareTaker is Person, then match the DCFS CareTaker(Payee/LEGAL GUARDIAN TYPE) CIN Number with the DPSS CareTaker(PAYEE on the DPSS Case) CIN Number and are different persons.
If they match, that will be skipped in this batch but will be processed in Batch 3.

5. If the condition in above step is met then remove the child from CalWORKS/CalFRESH DPSS case by end dating the household status one day prior to the beginning date of child placement (if the DCFS case is Pending/Active).
6. Add a new record in household status screen with the below details
    - Change Reason – Child in Foster Care/KinGAP
    - Reported Date - Child Placement begin date
    - Living in the Home Status – Permanently Out of Home
    - Begin date - Child Placement begin date

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7. The batch job will insert a Journal entry with the below Descriptions
    a. For CalWORKs/CalFresh cases:
    "Child XX was removed from the home on xx/xx/xxxx (date) by DCFS. Case was re-evaluated for CalWORKs and CalFresh eligibility and the appropriate NOAs were issued to the household."
    b. For CalFresh only cases:
    "Child XX was removed from the home on xx/xx/xxxx (date) by DCFS. Case was reevaluated for CalFresh eligibility and the appropriate/timely NOA was issued to the household."
    c. For CalWORKS only cases:
    "Child XX was removed from the home on xx/xx/xxxx (date) by DCFS. Case was re-evaluated for CalWORKs eligibility and the appropriate NOAs were issued to the household."
8. The batch Job will insert a Batch EDBC trigger to run EDBC for all programs in the case for the next month (month after the current date) and EDBC will take appropriate action as mentioned in the EDBC changes
9. The batch will proceed to the next case and repeat the process in steps 2 to 7.
10. Once EDBC is triggered for all cases existing batch EDBC exception report will be generated.
11. No action on the DPSS case if the condition is step 4 or 5 is not met.
12. Manual and Override cases will be exceptioned and will be available in batch exception report available online as per existing logic.

Note –
Currently there is no way to match the payee of KinGAP/FC and CalWORKS since in KinGAP/FC payee is a resource (with no CIN or SSN data) and in CalWORKS payee is a person (with a CIN and SSN). So certain placement types that are not part of above list where resource is person like guardin home, relative home NFERM etc the batch will not pick them

For the first month of implementation the date range will be from Dec 1st till batch run date.

This will check only if the child is placed in DCFS for first time and not for changes in placement within an active FC case. In other words, if the application/re-application(Active or Pending) date is on or after Dec 1st till batch run date for the firs time. Subsequently, it will be between last successs and batch run date.

Example: If the case is not processed(Due to bad data, batch 1 didin't pick/process, EDBC didn't fail DPSS program due to data) placement type for the case changes after the batch run date, though the program is PENDING, it will **not** be processed in the next run as the application date doesn't fall between batch last run date and current batch date. Worker will review batch EDBC exception income.

In the given period batch will look at the **first** placement in which the child has placed.

3.12 Online Changes

A new change reason will be added to the Change Reason dropdown

- Child in Foster Care/KinGAP

3.13 EDBC Changes –

CalWORKS program –

Batch will trigger EDBC for the next month. EDBC will then check the following

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- The DCFS case is Active/Pending
- Kid is placed in one of the above mentioned facility (step 4 or 5 in 3.11) in the DCFS case
- There is Household status entry of Permanently Out of home for the kid with a change reason of Child in Foster Care/KinGAP/ARC

If all the above conditions are met then EDBC will remove the aided child in the CalWORKS case as of 1st of the next month with a reason Out of the home. If the removed child is the only eligible child in the CalWORKS case then the case will be discontinued. Existing Change/Discontinuance NOA will be generated; 10-day rule will not applied.

CalFresh program –

Batch will trigger EDBC for the next month. EDBC will then check the following

- The DCFS case is Active/Pending
- Kid is placed in one of the above mentioned facility (step 4 or 5 in 3.11) in the DCFS case
- There is Household status entry of Permanently Out of home for the kid with a change reason of Child in Foster Care/KinGAP/ARC

If all the above conditions are met then EDBC will remove the aided child in the CalFRESH following 10 day, as of 1st of the come up month (next month in this scenario) with a reason Out of the home. Existing Change/Discontinuance NOA will be generated, 10-day rule will applied.

Medical Program –

No auto test should be performed for kid placed in DCFS. No New Medical program or program person should be added to existing medical program

GR program –

No impact since MFG child for GR will be ended by 12/31/2016

Example 1 – Only eligible child, **pending** DCFS case, batch EDBC

On 09/15/16, DCFS places the child in a facility.

- Pending DCFS case is created in the LRS system by DCFS interface on 09/17/2016 with child Application/begin date of 09/15/2016.
- Batch picks this case and trigger EDBC from all programs on 09/18/2016 for month 0f 10/2016

CalWORKS program

- If the child is the only eligible child, CalWORKs program will be discontinued effective 10/1/16 with a reason of Out of Home
- No benefits should be generated for 10/2016.
- Existing Discontinuance NOA will be generated, 10-day rule will not applied.
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Medical

- No New Medical program for the DCFS child will be created for the discontinued CalWORKS child if there is none

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- No New Medical program person for the DCFS child will be created for the discontinued CalWORKS child if there is a Medical for other persons

CalFresh Program

- The eligible child in the CalFresh program will be discontinued effective 10/1/16 with a reason of Out of Home
- The benefits will be reduced or discontinued for 10/2016 based on household composition.
- Existing Discontinance/change NOA will be generated, 10-day rule will applied.

Note – if the CalWORKS is discontinued then CalFRESH will convert to TCF as per existing logic (child will be included in the TCF budget)

Example 2 – with other children, **pending** DCFS case, batch EDBC

On 09/15/16, DCFS places the child in a facility.

- Pending DCFS case is created in the LRS system by DCFS interface on 09/17/2016 with child Application/begin date of 09/15/2016.
- Batch picks this case and trigger EDBC for all programs on 09/18/2016

CalWORKS program

- If case has multiple children aided, CalWORKs program will only discontinue the DCFS kid with discontinuance date 10/1/16 with a reason of Out of Home
- The benefits will be reduced for 10/2016.
- Existing Change NOA will be generated, 10-day rule will not applied.
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Medical

- No New Medical program for the DCFS child will be created for the discontinued CalWORKS child if there is none
- No New Medical program person for the DCFS child will be created for the discontinued CalWORKS child if there is a Medical for other persons

CalFresh Program

- The eligible child in the CalFresh program will be discontinued 10/1/16 with a reason of Out of Home
- The benefits will be reduced for 10/2016.
- Existing Discontinuance/change NOA will be generated, 10-day rule will applied.

Note – If the DCFS case is not created in the system by date the batch job runs the child will be picked up in end of month batch job

1% of the child will return back to the original home. This will be a manual action for user (EW) to rescind the child to the original case.

Example 3 – Only eligible child, **Active** DCFS case, batch EDBC

On 09/5/16, DCFS places the child in a facility.

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- Pending DCFS case is created in the LRS system by DCFS interface on 09/7/2016 with child Application/begin date of 09/7/2016.
- The DCFS case becomes Active on 09/7/2016
- Batch picks this case and trigger EDBC for all programs on 09/18/2016
  Note: EW can run EDBC online to remove the child prior to 9/18/2016.

CalWORKS Program

- If the child is the only eligible child, CalWORKs program will be discontinued 10/1/16 with a reason of Out of Home and Gets FC/KinGAP/ARC
- No benefits should be generated for 10/2016.
- Existing Discontinuance NOA will be generated, 10-day rule will not applied.
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Medical

- No New Medical program for the DCFS child will be created for the discontinued CalWORKS child if there is none
- No New Medical program person for the DCFS child will be created for the discontinued CalWORKS child if there is Medical for other persons

CalFresh Program

- The eligible child in the CalFresh program will be discontinued 10/1/16 with a reason of Out of Home
- The benefits will be reduced for 10/2016.
- Existing Discontinance/change NOA will be generated, 10-day rule will applied.

Note – if the CalWORKS is discontinued then CalFRESH will convert to TCF as per existing logic

Example 4 – with other eligible children, **Active** DCFS case, Online EDBC

On 09/5/16, DCFS places the child in a facility .

- Pending DCFS case is created in the LRS system by DCFS interface on 09/7/2016 with child Application/begin date of 09/7/2016.
- The DCFS case becomes Active on 09/7/2016
- ~~Worker~~ EW runs EDBC for all programs on 09/8/2016

CalWORKS Program

- If case has multiple children aided, CalWORKs program will only discontinue the DCFS kid with discontinuance date 10/1/16 with a reason of Out of Home
- The benefits will be reduced for 10/2016.
- Existing Change NOA will be generated, 10-day rule will not applied.
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Medical

- No New Medical program will be created for the discontinued CalWORKS child if there is none
- No New Medical program person will be created for the discontinued CalWORKS child if there is a Medical for other persons

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CalFresh Program

- The eligible child in the CalFresh program will be discontinued 10/1/16 with a reason of Out of Home
- The benefits will be reduced for 10/2016.
- Existing Discontinance/change NOA will be generated, 10-day rule will applied.

3.14 NOA Changes

CalWORKS – existing (Change or Term) NOA – waive for the 10-day rule

CalFRESH - existing (Change or Term) 10-day rule applied

- Out of Home/no elig member -
- Gets FC – Existing
- Gets KinGAP – Existing
- Gets ARC – New NOA

3.15 Batch Job 2 – Monthly Job running on last day of month

A Monthly Batch job will run on the last day of every month and perform the following

1. Read all DCFS (FC/ARC, KinGAP) cases that have an Active or Pending child placed in the DCFS case from a day before cut-off till batch run date of this job (two days before cut off).
2. This job will perform the same process as batch job 1 from step 2 to step 9.
3. The batch will set 10-day timely exception flag set(Timely Exception Check Box as shown in Online) and trigger EDBC. Reason and Run Reason are blank.
4. This job is for **CalWORKS only**.

Note – If monthly batch job runs and if EDBC results in overiissuance then system will exception this case due to reason – EDBC results in an overpayment/overissuance as per existing batch logic

3.16 EDBC Changes –

CalWORKS program –

Same as 3.13 , Except, In this case for CalWORKS the system will run with a 10-day timely exception run reason and discontinue effective first of following month based on the change reason (Child in Foster Care/KinGAP).

Example 1 – Only eligible child, pending DCFS case, batch EDBC

On 09/25/16, DCFS places the child in a facility.

- Pending DCFS case is created in the LRS system by DCFS interface on 09/27/2016 with child Application/begin date of 09/25/2016.
- Batch picks this case and trigger EDBC for CalWORKS on 09/30/2016 for the month 10/2016

CalWORKS program

- If the child is the only eligible child and the caretaker is a non-needy caretaker, CalWORKs program will be discontinued 10/1/16 with a reason of Out of Home

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- If the child is the only eligible child and the caretaker is a needy caretaker, CalWORKs program will only discontinue the DCFS kid with discontinuance date 10/1/16 with a reason of Out of Home
- Benefits issued will be recouped for 10/2016.
- Existing Discontinuance/Change NOA will be generated
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Medical

- No New Medical program will be created for the discontinued CalWORKS child if there is none
- No New Medical program person will be created for the discontinued CalWORKS child if there is a Medical for other persons

Example 2 – with other children, **pending** DCFS case, batch EDBC

On 09/15/16, DCFS places the child in a facility.

- Pending DCFS case is created in the LRS system by DCFS interface on 09/27/2016 with child Application/begin date of 09/25/2016.
- Batch picks this case and trigger EDBC for all programs on 09/30/2016 for 10/2016

CalWORKS program

- If case has multiple children aided, CalWORKs program will only discontinue the DCFS kid with discontinuance date 10/1/16 with a reason of Out of Home
- The benefits will be reduced for 10/2016 and will recouped if it is already issued.
- Existing Change NOA will be generated
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Medical

- No New Medical program for the DCFS child will be created for the discontinued CalWORKS child if there is none
- No New Medical program person for the DCFS child will be created for the discontinued CalWORKS child if there is a Medical for other persons

CalFresh Program – Calfresh will not be trigerred by this batch #2. ~~But the child's income will be use in calculate CalFresh benefits as per existing CalFresh logic/rule.~~ : LRS will trigger changes when the next months batch is triggered.

Note – the matching of the child is purely based on the CIN number match across both the DCFS and DPSS case.

3.2 SCENARIO 2 - DCFS REMOVAL OF CHILD – FC CHILD PLACE IN A PUBLIC AU THE CHILD IS NOT KNOWN TO ANY CALWORKS ACTIVE CASE

No impact

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3.3 SCENARIO 3 - CHILD IS RECEIVING CALWORKS WITH THE NEEDY/NON-NEEDY CARETAKER, CALFRESH AND DCFS IS PLACING THE CHILD TO THE SAME CARETAKER (CAREGIVER).

3.3.1 BATCH Job 3 – Monthly Job running two days before cut-off

A Monthly Batch job will run two days before cut off and perform the following

1. Read all Active DCFS (FC/ARC, KinGAP) cases from day before last month cut-off till two days before current month cut off.
2. Identify the kids that are Active in a CalWORKS/CalFRESH case
3. Process the first identified case.
   Check if the Child is placed in one of the below placement type for FC/ARC. For FC/ARC, payee/caretaker(PLACEMENT TYPE) is always resource. Then check if the caretaker/payee in the CalWORKS case does not has the parental control (check box in the relationship data collection page) of the child in DPSS case and does not have a relationship of parent to the child in the DPSS case.

Placement Types	Out of Home
Small Family Home	N
Legal Guardian	N
Nonrelative Extended Family Member Home	N
Relative Home	N
Adoptive Homes	N
Court Specified Home	N
Guardian Home	N

   For Kin GAP, check if the caretaker is a resource and the placement type is one of the types mentioned in step-4, then check if the caretaker/payee in the CalWORKS case does not has the parental control (check box in the relationship data collection page) of the child in DPSS case and does not have a relationship of parent to the child in the DPSS case.

   KinGAP - If CareTaker is Person, then match the DCFS CareTaker(Payee/LEGAL GUARDIAN TYPE) CIN Number with the DPSS CareTaker(PAYEE on the DPSS Case) CIN Number and are same person.

   If they do not match, that will be skipped in this batch but will be processed in Batch 1.
4. If the criteria in step 4 for FC/Kin GAP is met then The batch job will insert a Journal entry on the DPSS case with the below Description
   "Child XX began to receive (type of aid – Foster Care, ARC, Kin-GAP, etc.) effective (date). Effective Date is the application date.
5. The batch Job will insert a Batch EDBC trigger to run EDBC to run all program on the DPSS case for the next month (month after the current date) and EDBC will take appropriate action as mentioned in the EDBC changes
6. The batch will proceed to the next case and repeat the process in steps 2 to 7.
7. Once EDBC is triggered for all cases existing batch EDBC exception report will be generated

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8. No action on the DPSS case if the placement is not any one of the above and if caretaker is not a parent in DPSS case.
9. **Manual and Override** cases will be **exceptioned** and will be available in batch exception report available online as per existing logic.

3.3.2 EDBC Changes

CalWORKS program –

Batch will trigger EDBC for the next month. EDBC will check the following

- The DCFS case is Active
- If the child is placed in one of the above mentioned placement (3.3.1)

If all the above conditions are met then EDBC will remove the aided child in the CalWORKS as of 1st of the next month with a reason Gets FC/KinGAP following 10 day NOA. If the child removed is the only child and the caretaker is a non-needy caretaker in the CalWORKS case then the case will be discontinued.

We need a new fail reason 'Gets ARC' – To trigger new ARC NOAs M40-171D, M82-832E, and M82-832F.

Note – As per current LRS DCFS design when the child is aided for Foster care retroactively after approving the license, the CalWORKS amount issued to the same caretaker will not be recouped in DCFS case and DPSS case

CalFresh program –

Batch will trigger EDBC for the next month. EDBC will check the following

- The DCFS case is Active
- If the child is placed in one of the above mentioned placement (3.3.1)

If all the above conditions are met then EDBC will use the income from Foster care/Kin GAP/ARC as the new unearned income following 10 day NOA causing the decrease in benefits because of Foster Care/Kin GAP/ARC grant being higher

Medical Program –

No auto test should be performed for kid getting aided in DCFS. No New Medical program or program person should be added to existing medical program

GR program –

No impact since MFG child for GR will be ended by 12/31/2016

Note – if the child is placed in the above mentioned placement system will assume the careaker is same and will always follow 10 day . This is becauses per current DCFS design there is not a way to match the payee in DPSS to a resoursce in DCFS

Examples

Example 1 – Only eligible child needy caretaker, Active DCFS case, batch EDBC

On 09/5/16, DCFS places the child in a facility.

- The DCFS case becomes Active on 09/7/2016
- Batch picks this case and trigger EDBC for all programs on 09/18/2016

CalWORKS Program

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- If the child is the only eligible child, the child will be discontinued 10/1/16 with a reason of Get FC/KinGAP and program will be active if caretaker is a needy caretaker.
- Benefits will be reduced for 10/2016.
- Existing Change NOA of Gets FC/KinGAP NOA will be generated
- Medical Auto test will not be performed for this child since the child is already aided in DCFS cash program

Note:

If the child is receiving ARC payment, M82-832E – Change NOA must be generated.

Case will only discontinue if the caretaker is a non needy caretaker as per existing logic

Medical

- No New Medical program will be created for the discontinued CalWORKS child if there is none
- No New Medical program person will be created for the discontinued CalWORKS child if there is a Medical for other persons

CalFresh Program

- EDBC will use the income from Foster care as the new unearned income following 10 day NOA causing the decrease in benefits from 10/2016
- Existing change NOA will be generated

Example 2 – with other children, **Active** DCFS case, batch EDBC

On 09/15/16, DCFS places the child in a facility.

- Pending DCFS case is created in the LRS system by DCFS interface on 09/27/2016 with child Application/begin date of 09/25/2016.
- Batch picks this case and trigger EDBC for all programs on 09/31/2016

CalWORKS program

- If case has multiple children aided, CalWORKs program will only discontinue the DCFS kid with discontinuance date 10/1/16 with a reason of Get FC/KinGAP
- The benefits will be reduced for 10/2016.
- Existing Change NOA will be generated
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Note: If the child is receiving ARC payment, M82-832E - Change NOA must be generated.

Medical

- No New Medical program for the DCFS child will be created for the discontinued CalWORKS child if there is none
- No New Medical program person for the DCFS child will be created for the discontinued CalWORKS child if there is a Medical for other persons

CalFresh Program

- EDBC will use the income from Foster care as the new unearned income following 10 day NOA causing the decrease in benefits from 11/2016

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- Existing change NOA will be generated

Example 3 – Only eligible child, Active DCFS case, Online EDBC-CW requires a 10-day NOA for Needy/Non-Needy Caretakers

On 09/25/16, DCFS places the child in a facility.

- The DCFS case becomes Active on 09/27/2016
- EW ~~Worker~~ runs EDBC for all programs on 09/28/2016

CalWORKS Program

- If the child is the only eligible child, CalWORKs program will be discontinued 11/1/16 with a reason Get FC/KinGAP following 10 day NOA
- No benefits should be generated for 11/2016.
- Existing Discontinuance Gets FC/ Gets KinGAP NOA will be generated
- Medical Auto test will not be performed for this child since the child will be aided in DCFS cash program

Note: If the child is receiving ARC payment, M82-832F must be generated.

For ARC (logic of not counting OPA of previous calworks amount is dependent for this SCR)

Medical

- No New Medical program will be created for the discontinued CalWORKS child if there is none
- No New Medical program person will be created for the discontinued CalWORKS child if there is a Medical for other persons

CalFresh Program

- EDBC will use the income from Foster care as the new unearned income following 10 day NOA causing the decrease in benefits from 11/2016
- The benefits will be reduced for 11/2016.
- Existing change NOA will be generated

3.3.4 NOA Changes

M40-171D – Partial Approval

M82-832E – Change

M82-832F – Discontinue

Flyer will be included with phase II

3.4 SCENARIO 4 - WHEN THE FC, KINGAP, OR ARC CHILD IS AIDED IN CALFRESH CASES

Apply FC, AAP, ARC, or KinGAP benefits as County Initiated Action with 10-day NOA. - CF policy confirmed a 10-day NOA is required for reduction in CF benefits.

Assumption - Will be done by training the workers - FC, AAP, ARC, or KinGAP benefits is consider as unearned income when calculating the CalFresh Benefits. Per CF policy, AAP is considered unearned income. However, any

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portion of the AAP that is earmarked for an excludable reimbursement (e.g., medical/dental expenses) is not counted in the benefit calculation. This will be determined on a case-by case basis. Training needed: how to update the AAP benefit

3.5 SCENARIO 5 - WHEN THE FC, KINGAP, OR ARC CHILD IS AIDED IN CALFRESH CASES

No Impact

EDBC shall include the FC, ARC or Kin-GAP payment when calculating CalFresh benefits (Current logic).

3.6 SCENARIO 6 - PARENT/CARETAKER RELATIVE AND CHILD (REN) RECEIVING MEDI-CAL

This requirement will be handled as part of SCR System Change Request (SCR) 41825 - mc DPSS/DCFS overlap

2.7 SCENARIO 7 - CHILDREN ONLY RECEIVING MEDI-CAL

This requirement will be handled as part of SCR System Change Request (SCR) 41825 - mc DPSS/DCFS overlap

3.8 SCENARIO 8 - Adopted children are mandatory person to CW and CF cases if they apply for DPSS

AAP payment is exempt as income to CW program but AAP is consider as unearned income to CF program. AAP payment will counted as unearned in TCF when CW is teminated and FS becomes TCF (if it were known to the CF case prior to CW termination). If CW and AAP discontinues at the same time auto test DPSS case for MC

Training - income type "Adoption Assistance Subsidy" instead of "AA Payment (AAP)". The logic identified correctly, Exempt as income for CW and MC, and Count as Unearned income for CF

3.8.1 EDBC changes

If the adopted child active in a AAP case, apply for CAlWORKS the child will be aided in CalWORKS and will not fail for Gets AAP.

AAP Auto test Medical Logic

As per current design we do not do auto test for medical if the child gets discontinued from AAP

CalWORKS Auto test Medical Logic

If the AAP child getting CalWORKS gets discontinued from CalWORKS the child will not be auto tested for Medical in the DPSS case. CalWORKS Auto test Medical logic will be modified to not auto test for medical in the DPSS case if the child (having same CIN in both programs) is receiving cash based AAP.

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3.10 SCENARIO 10 - CW/CF case - Parent/caretaker and a child aided, child removed from home by DCFS

Same as 3.1 scenario. CF will convert to TCF as per existing logic.

3.11 SCENARIO 11 - CW/CF case - SSI/undoc/inelig parent/caretaker and only child is aided. Child removed from home by DCFS

Same as 3.1 scenario. CF will convert to TCF as per existing logic

3.12 SCENARIO 12 - CW/CF case - Parent/caretaker aided only and SSI child. Child removed from home by DCFS

CF case will convert to TCF the 1st of the following month as per existing logic

SSI child place in FC (Aid code 60) - Will get SSI aid code 60.♦

FC case= active, do NOT open MC under DCFS FC case, and MC remains SSI aid code = 60 (do not open a new MC block). Do NOT auto test MC after CW TEs. CF will convert to TCF as per existing logic.

EDBC changes –

This requirement will be handled as part of SCR System Change Request (SCR) 41825 - mc DPSS/DCFS overlap. Need more clarification.

Requirements Dropped/ moved to next phase

The below scenarios will be dropped/handled in phase 2 of this SCR based on be

3.9 Infant supplement - Is not a the current functionality in DCFS. This change has a pending future

3.13, 3.14, 3.15 Out of state/Out of county child/caretaker – future batch and EDBC change to check change in placement address to identify out of state / County

3.16 NMDS – Not enough cases. No functionality needed at this time

3.17 and 2.18 - Aiding the child in CW if they have Zero benefit in foster care or getting ARC – This needs to be handled after DCFS go live based on the production data because of the complexity involved and time constraint. This was last minute addition and was not budgted in. this SCR.

New Requirement – if the DCFS child moves across different placement (different placement to same caretaker and back to different placement) future batch and EDBC change to check change in placement to identify out of caretaker

New Requirement 2- Please provide details for Exception report for Batch Jobs 1, 2, 3 before triggering EDBC. For example: If the child is placement in 3 different placements from the beginning of the month till the batch run date or if they are placed in two different types of placements, exception them and put it on the report.

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3.13 SCENARIO 13 - child gets removed from home by DCFS and placed in home in another state Next phase

Same as 3.1 scenario. CW case will terminate the end of the month for the reason Out of Home with adequate notification. 10-day rule is not required. (The child out of State, Parent(s) still in CA.if CW is discontinue, CF will convert to TCF.

3.14 SCENARIO 14 - child gets removed from home by DCFS and placed in home in another state. Parent/caretaker moves to another state.Next phase

Same as 3.1 scenario. CW case will terminate the end of the month with adequate notification. 10-day rule is not required. CF case will terminate the end of the month for the reason Out of Home with 10-day NOA . CF shall not convert to TCF as per existing logic.

As long as DCFS casew is Active or Pending

3.15 SCENARIO 15 - child removed from home by DCFS. Parent/caretaker moves to another state. Child is still in LA County. Next phase

Same as 2.1 scenario . CW case will terminate the end of the month with adequate notification for the reason Out of Home. 10-day rule is not required. CF case will terminate the end of the month with 10-day NOA. CF shall not convert to TCF.

3.9 SCENARIO 9 - Children receiving Infant Supplement are not eligible for CalWORKs program

As per the current LRS design infant supplement is handled through a special care increment with the the type of Social Worker Authorised. Currently there is no way to identify if the SCI is for the infant since the infant details will not be sent from datamart to LRS. So this requirement needs to be addressed after the DCFS infant Supplement SCR changes (SCR number to be provided) is implemented

3.16 SCENARIO 16 - CalWORKs Extending Benefits to NMDs

Currently DPSS bases on the referral from DCFS to open the CW case for NMD.

Samvel - hardly any cases. Mr. Ernie agreed

No functionality needed at this time

ASSUMPTION: Once DCFS foster care is actve, it is up to 2 Depts to communicate to discontinue the CW

REQUIREMENT: infant of the FC recipient should fail for CW. This requirement needs to be addressed after the DCFS infant Supplement SCR changes (SCR number to be provided) is implemented

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3.17 SCENARIO 17 - CW new application with ARC/FC child in the AU.

Needy caretaker relatives will be eligible for CalWORKs if the only eligible child is the ARC child exclude the NMD child.

LRS shall calculate the CalWORKs grant for the relative caregiver as normal, following CalWORKs rules. The ARC eligible child is included in the Maximum Basic Standard of Care (MBSAC) for determining financial eligibility.

The New Approval NOA M40-171D must be generated after Acept and Saved the EDBC Result.

3.18 SCENARIO 18 - When Forster Care case = Active and FC benefits = Zero

Caretaker apply CW for FC child who has the FC benefits = Zero;

CW should pass if otherwise eligible. (Can be new application or add the child to an active CW case).

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