Alternative Format Selection Technical Guidance for
Medi-Cal Dental Managed Care Plans

The Department of Health Care Services' (DHCS) policy regarding the provision of member information in alternative formats is set forth in All Plan Letter (APL) 22-011, Alternative Format Selection (AFS) for Members with Visual Impairments. As required by this APL, Dental Managed Care (DMC) plans must provide appropriate auxiliary aids and services to individuals with visual impairments or other disabilities requiring the provision of written materials in alternative formats. DMC plans must accommodate the communication needs of all qualified individuals with disabilities, including Authorized Representatives, and be prepared to facilitate alternative format requests for Braille, audio format, large print (no less than 20 point Arial font), and accessible electronic format, such as a data CD.

This Technical Guidance contains the data elements, file path, and frequency of the DHCS AFS data that will be sent by the Medi-Cal Dental Services Division (MDSD). MDSD, via Fiscal Intermediary contractor Gainwell Technologies LLC (Gainwell). Gainwell will send the weekly AFS to the DMC plans. DMC plans must utilize the weekly DHCS AFS file data to update their records and provide member documents in the requested alternative formats.

AFS Technical Guidance for DMC Plans to receive the DHCS Alternative Format Data

1. Gainwell will put the weekly AFS file in the following folder:
   /DHCS=MDSD/OUTGOING_ALTFormatFile Folder

   File name format: AFS_Extract_YYYY-MM-DD_ HCPGroupXX.csv

   and copy the file into the Gainwell Moveit Server at:
   Home/DHCS/AFSPLANS/

2. You can open the extract CSV file in Microsoft Excel (if it is less than 1 million rows), or import it to database applications such as Microsoft Access.

3. The language fields originate from MEDS, similar to the 834 and the Weekly Plan File from Maximus.

4. Password standards for Encrypted Audio and Data CD:
   - The password will always be nine characters long with letters in lower case
     - First, use the first 4 letters of beneficiary's first name (if the name is less than four characters, enter number signs (#) after the last letter)
     - Second, use a number sign (#)
     - Last, use 2 digits for the corresponding month and the last 2 digits of the year of the beneficiary's birthday.
   - Examples:

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- o The beneficiary's name is John Doe and his birthday is January 5, 1965. The password is john#0165.
- o The beneficiary's name is Joe Smith and his birthday is November 10, 2001. The password is joe##1101.
- o The beneficiary's name is Ny Smith and her birthday is July 27, 1940. The password is ny###0740.

Table 1 shows the data elements in the extract file. Fields #12-14 are for internal statistic usage only, and may not be of interest to you. Table 2 shows the SFTP folders and corresponding DMC plans.

Table 1 Data Elements in the Extract File

	Field Name (Field Length)	Accepts Null Value	Description
1	FirstName (20)	No	First name of the Medi-Cal beneficiary
2	MiddleInitial (1)	Yes	Middle name of the beneficiary
3	LastName (25)	No	Last name of the beneficiary
4	CIN (9)	No	Medi-Cal beneficiary's CIN
5	DateOfBirth (10)	No	Beneficiary's Date of Birth
6	FormatID (1)	Yes	Beneficiary's selected alternative format ID. If a member selected 6 in the online application, they were directed to contact help line: 1-833-284-0400.
7	FormatDesc (40)	Yes	Description of Beneficiary's selected alternative format

FormatID	FormatDesc
1	Large Print
2	Audio CD
3	Data CD
4	Braille
5	No Alternative Format Needed
6	I need a format not listed here
7	County Support (This value is received from CDSS for IHSS beneficiaries)
8	Encrypted Audio CD
9	Encrypted Data CD

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	Field Name (Field Length)	Accepts Null Value	Description
8	SpokenLangCode (1)	Yes	Beneficiary's preferred spoken language code. Please see Table 3 for listed values.
9	SpokenLangDesc (40)	Yes	Beneficiary's preferred spoken language description
10	WrittenLangCode (1)	Yes	Beneficiary's preferred written language code Please see Table 4 for listed values.
11	WrittenLangDesc (40)	Yes	Beneficiary's preferred written language description
12	IsUpdatedOnBehalf (1)	Yes	Values are 0 and 1. 0 means member entered his/her information; 1 means DHCS/County entered it on behalf of the beneficiary. DMC plans are to choose the DHCS option.
13	TransStatus (1)	Yes	Values are 1 and 2. 1 means member passed the validation screen and moved to AF option selection screen; 2 means member submitted his/her AF option.
14	VisitedDate (19)	Yes	The Date and Time member passed the validation screen and moved to AF option selection screen.
15	UpdatedBy (75)	Yes	Acceptable values are beneficiary's name firstname_lastname, DHCS, County. This column represents the person who input the beneficiary's selection into the online screens. Beneficiary's 'firstname_lastname' means member entered it. 'DHCS' means DHCS program staff or partner staff entered it on behalf of beneficiary. DMC plans are to choose the DHCS option. 'County' means County staff entered it on behalf of beneficiary.
16	UpdatedDate (19)	Yes	Date the entry was updated.
17	CreatedBy (75)	No	Name of the source the AFS database received the data from.

	Field Name (Field Length)	Accepts Null Value	Description
18	CreatedDate (19)	No	Date this record is first created in AFS database.
19	HealthPlanCode (3)	No	HCP Plan code.

Table 2 Plans and SFTP Folders

File #	Organization or Plan	Associated plan codes	SFTP Folder
1	Access Dental 421, 409	409, 421	/DHCS-MDSD/OUTGOING_ALTFormatFile/ AFS_Extract_YYYY-MM-DD_ HCPGroup63.csv
2	Health Net 427, 405	405, 427	/DHCS-MDSD/OUTGOING_ALTFormatFile/ AFS_Extract_YYYY-MM-DD_ HCPGroup64.csv
3	Liberty Dental 425, 416	416, 425	/DHCS-MDSD/OUTGOING_ALTFormatFile/ AFS_Extract_YYYY-MM-DD_ HCPGroup65.csv

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Table 3 Spoken Language Codes

VALUES:

0	American Sign Language (ASL)
1	Spanish
2	Cantonese
3	Japanese
4	Korean
5	Tagalog
6	Other Non-English
7	English
8	No valid data reported. MEDS generated
9	Not a valid value. Reserved for IHSS.
A	Other Sign Language
B	Mandarin
C	Other Chinese Language
D	Cambodian
E	Armenian
F	Ilocano
G	Mien
H	Hmong
I	Lao
J	Turkish
K	Hebrew
L	French
M	Polish
N	Russian
O	Default to 0 (Zero)
P	Portuguese
Q	Italian
R	Arabic
S	Samoan
T	Thai
U	Farsi
V	Vietnamese
W	Hindi
X	Punjabi
Y	Ukrainian

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Table 4 Written Language Codes

VALUES:

1	Spanish
2	Cantonese
3	Japanese
4	Korean
5	Tagalog
6	Other Non-English
7	English
8	MEDS generated value indicating no valid data reported
9	Not a valid value. Reserved for IHSS.
B	Mandarin
C	Other Chinese Language
D	Cambodian
E	Armenian
F	Ilocano
G	Mien
H	Hmong
I	Lao
J	Turkish
K	Hebrew
L	French
M	Polish
N	Russian
P	Portuguese
Q	Italian
R	Arabic
S	Samoan
T	Thai
U	Farsi
V	Vietnamese
W	Hindi
X	Punjabi