

24-Month Roadmap's Change Requests - Updates (Final)

(as of 01/09/2017)

RE-LEASE	CR NUMBER	TITLE	REQUESTOR	BRIEF DESCRIPTION	Advocate Comments	STATUS UPDATES for 1/13/2017 AB 1296 MEETING
R17.2 - (Planned Deployment Date 2/13/2017)						
R16.7 R17.2	52600 (formerly 8415)	County of Responsibility / Electronic Inter-County Transfer (eICT)	DHCS	The purpose of this change request is for CalHEERS to have the ability to recognize a new county address, to de-link the County of Responsibility (FIPS County Code) from the previous county case, to accept the county of responsibility on initial case linkage via SAWS e-HIT unless case is already linked to another county, the ability to link to the new case and a new county case number, the ability to maintain historical values in a case, to remove validation from the EDR regarding residence address, to change the County of residence via the ICT process, and to archive the SAWS case number linkage if the consumer remains in the same County of Responsibility when moving in and out of MAGI-MC Eligibility. This is needed in order for a consumer residing in one county to have their case managed in another county.		CR is scheduled for implementation in R17.2.
R17.2	57638	Income Data Quality & Usability Enhancement (formerly known as Mega Income)	DHCS	Based on feedback from the Transitions Workgroup and from the Income Summit, the following are were identified for correction and improvement: 1) Fluctuating Income; 2) Self-Employment Income; 3) Lump Sum Income; and 4)) Countable Income. The purpose of this CR is to implement the changes for these income areas into CalHEERS and improve both the consumer experience and the Business Rules Engine income determinations.		CR is scheduled for implementation in R17.2.

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R17.2	10021	Business Validation to SAWS to Prevent Data Overlay	DHCS	Currently, only the CalHEERS Case person number is used to match a person via the CalHEERS/SAWS eHIT Interface. If and when personal demographic data for the primary contact is updated under the same CalHEERS Case number or the same CalHEERS person number is associated to multiple members, CalHEERS will overlay the person demographic data at the primary contact level with the latest received demographic information. To prevent this from happening in the future, additional business validations and a change flag need to be added to the CalHEERS/SAWS eHIT interface to reject EDRs containing a person demographics mismatch while also allowing the SAWS to make intentional corrections to person demographic data.		CR is scheduled for implementation in R17.2.
R17.2	10675	MEDS: Change HX18 and HX20 to Generate at an Individual Level	DHCS	Currently, the HX18/HX20 transactions are created at a case level and not at an individual level. In the event that one individual on the case has no CIN, the entire case transaction is held until a CIN is returned. This is causing a large backlog to occur in the event the case is considered APTC/CSR only, as MAGI or mixed MAGI cases are eHIT to the SAWS Systems, and CIN information is updated when the SAWS System returns updated case information.		CR is scheduled for implementation in R17.2.

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R16.4- R16.7 2017 Q4 R17.2	30049	MAGI Income Passed to SAWS	DHCS	When determining MAGI Medi-Cal financial eligibility, the CalHEERS uses MAGI household income, which is the sum of the MAGI of the individuals present in the household who's MAGI is counted when determining MAGI household income. For example, in regard to MAGI of children and other tax dependents, the MAGI of children and other tax dependents is counted in the calculation of MAGI household income, only when such child or other tax dependent is expected to be required to file a tax return for the benefit tax year. An individual's MAGI is determined by collecting various income amounts entered on the application or renewal form and determining which income sources count towards the determination of an individual's MAGI and which income amounts do not count towards the determination of an individual's MAGI. For each MAGI Medi-Cal applicant and beneficiary, the SAWS must receive the MAGI household income (sum of the individual household member's MAGI) as well as individual income amounts/sources used to calculate an individual's MAGI income.		CR is scheduled for implementation in R17.2.
R17.2	72004	Business Rules Exposure for SAWS (BREFS) - Phase A	DHCS & CovCA	This change request is intended to enhance the accuracy and remove barriers for County Eligibility Workers (CEWs) in researching, troubleshooting, and resolving MAGI eligibility determination discrepancies. This change will make the following details available to SAWS: 1) income determination details; 2) income deduction details; and 3) tax household size/detail.		CR is scheduled for implementation in R17.2.

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R16.7- R17.2	29911	Collect Employer Name and Address and Generate Notice to Employers with Employees eligible to APTC	CovCA & DHCS	Federal and state regulations require Covered California to notify any employer if one of their employees has been determined eligible for APTC and enrolled in a QHP through Covered California and notify the employer of their appeal rights. CalHEERS does not currently produce this notification and the questions about a consumer's employer are voluntary on the application. This change request will require consumers to answer questions about their employer (name and mailing address) when an employee has been determined eligible for APTC prior to that consumer picking or updating a QHP. Additional employer information, EIN, and phone number will also be collected. The CalHEERS System shall also generate a report at implementation of this CR and upon request for consumer who are eligible to APTC, currently employed, and employer information has not been collected. This CR will change the question flow on the "Other Health Care" page of the application to be more dynamic. This CR will also remove the "Note to Employers and Employees" statement on the Household Member page from the Individual portal as this is in reference to SHOP. CR 70049 will be implemented at the same time to generate and mail the notice to the consumer's employer.		CR is scheduled for implementation in R17.2.
R17.2	65685	CEC Delegations	CovCA	The intended outcome is for CalHEERS to persist that consumer to CEC delegation indefinitely unless that delegation is actively removed. Currently, if a consumer has delegated a CEC, that delegation is automatically removed when the consumer enrolls in a plan. This causes confusion for both the CEC and the consumer because both parties have had a working relationship, and that relationship is terminated by the system.		CR is scheduled for implementation in R17.2.
R17.2	65920	Reprint and Re-mail Document to Consumer	CovCA & DHCS	This is business process improvement that will lead to better customer service for consumers. Currently, the process to re-print and re-mail a notice to a consumer is manual and time-consuming. The intended outcome is for an SCR or consumer to quickly and easily re-deliver or reprint a notice that's in a consumer's inbox. The notice will be delivered to the consumer based on the consumer's communication preference (email or mail).		CR is scheduled for implementation in R17.2.
R17.2	65922	Document Upload	CovCA & DHCS	The intended outcome of this CR is to allow internal and external users to upload documents to a case at any time, regardless of eligibility status. This will result in increased efficiency for Service Center staff and better customer service for consumers.		CR is scheduled for implementation in R17.2.
R17.2	4187	Implement NOD01 in twelve threshold languages	CovCA	This CR will implement NOD1 in the remaining 10 of the 12 threshold languages.		CR is scheduled for implementation in R17.2.

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R17.2	32983	CAPTCHA Software (Amend)	CovCA	This CR is implementing additional system security updates that requires the user to validate a fuzzy value prior to entry to reduce user name harvesting.		CR is scheduled for implementation in R17.2.
R17.2	70049	2017 Q1 Notice Changes	CovCA	The purpose of this CR will add functionality to generate notices. The objective is the result of the Long Term Notices Design Approach; any CR in 2017 Q1 bucket that has notice requirement will be moved to this CR.		CR is scheduled for implementation in R17.2.
R17.2	70676	Dropdowns for Citizenship Documents	CovCA	This CR is to update the current dropdown of allowable citizenship documents to align with existing policy. It implements the requirement that certain documents need to have an identity document in order to be a valid proof of citizenship and certain document names have been corrected to more closely align with how consumers will recognize them.		CR is scheduled for implementation in R17.2.
R17.2	70614	Implement Renewal Opt Out Reasons	CovCA	This CR is implementing the ability for Service Center staff to capture the reason a consumer is opting out of coverage during renewals.		CR is scheduled for implementation in R17.2.
R17.2	83066	25% Reasonable Compatibility for Income	CovCA	This CR updates the current reasonable compatibility threshold from 10% to 25% in alignment with the Federal Marketplace, per CMS guidance issued in July 2017.		CR is scheduled for implementation in R17.2.

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R17.3	66345	Agile Notices	CovCA	This CR implements a technical framework to support a more responsive process to implement verbiage changes to notices.		CR is planned for implementation in 17.2.
R17.3	Application Maintenance	Annual FPL (for 2017) in CalHEERS	DHCS	This annual update to the FPL Table in OPA. This priority release/implementation will be with the actual 2017 FPL values in Q1 of 2017. In January 2017, the Federal Health and Human Services Agency will publish the final 2017 Federal Poverty Levels (FPLs) in the Federal Register (FR). 2017 FPLs will be effective on the date published in the FR, and must be implemented by CalHEERS in first quarter in order to minimize the population of beneficiaries that may be incorrectly determined not eligible for Medi-Cal between January 1, 2017, to the date of implementation by CalHEERS.		CR is planned for implementation in March 2017 (priority release).

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R17.6 - Quarter 2 - (Planned Deployment Date 6/2017)						
R17.6	70497	Modify the online single streamline application (SSApp)	DHCS	The purpose of this CR is to modify the online single streamline application (SSApp) to meet regulatory and statutory requirements, be consistent with the paper SSApp, and ensure accurate eligibility determinations. The change request includes multiple changes needed to the online SSApp, including changes based on the Centers for Medicare and Medicaid Services (CMS) requirement, changes based on new legislation, updated messaging for improved consumer experience, and changes initially requested with CR 6933 that were deprioritized.		CR is planned for implementation in R17.6.
2017 Q2	76084	Dynamic App	DHCS/CovCa	The purpose of this CR is to work in conjunction with CR 70497 (Modify the online single streamline application (SSApp)) and Chaotic Moon/Fjord to display to the consumer the minimum set of applicable questions necessary to determine eligibility. Currently, all consumers are asked the same set of questions and have to navigate through the full application. With the implementation of this CR, checkpoints will be performed throughout the application process to determine what questions to display (i.e. applicants vs. non-applicants).		This CR is planned for implementation in Q2 of 2017.
R17.6	70782	Short-Term Negative Action (STNA) Clean Up	DHCS	This change request is intended to clean-up case exceptions that resulted from the Short-Term Negative Action (STNA) process since January 2015. This CR will design an automated solution that will eliminate the need for the ongoing weekly STNA process.		CR is planned for implementation in R17.6.

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2017 Q2	42058	Allow County Admins to Unlock and Reset their Own User Accounts and Passowrds	DHCS	This CR will allow Service Center Representatives (SCRs) and Counties Users (CEW) to reset passwords and unblock accounts for their own users. The CR also creates a single page for Password Reset and Account unblock to decrease call time for password reset and account unblock requests for Service Center Representatives (SCR). County users (CEW) will also use this same page to reset passwords and unblock accounts. This increases the operational efficiency for all CalHEERS users as it reduces the dependence on CalHEERS Help Desk L1 support for basic password resets/unblocks.		CR is planned for implementation in Q2 of 2017.
R16.7 R16.9 2017 Q2	56179	Provider Directory Functionality	CovCA	This CR is intended to implement an integrated provider directory available to consumers directly through the CalHEERS website.		This CR is planned for implementation in Q2 of 2017.

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R17.9 - Quarter 3 - (Planned Deployment Date TBD)						
2017 Q3	64475	NQI Wrap (Plan Selection)	DHCS	This CR will add the refinements needed to fully implement CR 3124. This CR will allow NQI individuals who eligible for the Affordability and the Benefit Program to select the lowest silver and the second lowest silver plan during plan selection in the eligibility process. This CR will also update the static attestation language on the checkout page NQI individuals who opt into the program. This CR will also allow pregnant women who are in the Affordability and Benefit Program to have the option to keep or switch her health care coverage at the point in which she reports her pregnancy. The proposed change will utilize (in concept) the QHP pregnancy hold logic implemented in CR 59947 (QHP pregnancy hold) and allow her to make a choice.		This CR is planned for Q3 of 2017.
R16.2- 2017 Q3	4469 82977	State Inmate Program	DHCS	First Level Request: Implement the State Inmate Program in CalHEERS. DHCS Staff will enter the application(s) into CalHEERS access channel. DHCS will be responsible for case management. If the "First Level Request" is not viable for Release 3 then please see "Second Level Request" below. (Based on discussion 4/24/2014 change request development will be first request implementation). Second Level Request: - Add the Inmate Program Aid Codes to the "Manual" drop-down list in the admin environment so DHCS Staff can override the CalHEERS Eligibility Determination Aid Code with the appropriate "Inmate Program Aid Codes" via a manual work-around process. DHCS would be responsible for case management. Add the ability to suppress Notices of Action.	(3/20/15) What NOAs are currently being generated that this CR will help suppress? DHCS> No current CalHEERS notices would be suppressed. This CR implements state inmate eligibility in CalHEERS. NOAs currently generated by state staff will continue to be generated by state staff until this CR is implemented.	This CR is planned for Q3 of 2017.
R16.2 2017 Q3	9428 82978	County Inmate Program	DHCS	The CalHEERS System shall have the County Inmate program indicator and said indicator will also be in the eHIT interface and will drive the county inmate aid code determination. 19 - 64 - N7 (Limited Scope) N8 (Restricted Scope) ACWDL 13-18 page 8, generate the MAGI-MC NOA with county inmate snippet language. The CalHEERS System shall treat county inmate application indicator as self attestation for Covered California programs eligibility determination purposes. The CalHEERS System shall generate the CALNOD01 Notice for County Inmate applications. The CalHEERS System will deny eligibility to APTC/CSR for an individual that attests to being incarcerated.		This CR is planned for Q3 of 2017.

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2017 Q4 2017 Q3	69974	Eligibility for IAP Based on Immigration Status - Phase 2	DHCS	This CR will add additional refinements to the CalHEERS system related to immigrant eligibility. This CR will make immigration document information fields optional and will refine what individuals to request the grant date and when to call the federal hub for immigration status verification. CR 69974 will update the immigration status drop down menus to include a detailed list of lawfully present immigration statuses and will add functionality related to the eligibility of lawfully present pregnant women and children. This CR will also add the functionality necessary to identify immigrants who are eligible for the Affordability and Benefit program which is scheduled for 2018 implementation.		CR is planned for implementation in Q3 of 2017.
2017 Q3	83286	BREfS Phase C - Eligibility Preview Service	DHCS	Currently, the eHIT interface is a single service wherein the Eligibility Determination Request (EDR) operation engages the verification services (VIED) and eligibility business rules engine (BRE) in CalHEERS to return an eligibility determination via the Determination of Eligibility Response (DER) operation. The CalHEERS eligibility determination results must be accepted by counties, since neither the existing eHIT interface, nor the BRE functionality on the CalHEERS portal currently provide a "preview" of eligibility or the ability to override a CalHEERS eligibility determination.		CR is planned for implementation in Q3 of 2017.

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2017 Q3	82920	BREfS Phase D - Separating Verification Service	DHCS	Currently, the eHIT interface is a single service wherein the Eligibility Determination Request (EDR) operation engages the verification services (VIED) and eligibility business rules engine (BRE) in CalHEERS. CalHEERS uses VIED to coordinate the verifications responses into the BRE and return an eligibility determination via the Determination of Eligibility Response (DER) operation.		CR is planned for implementation in Q3 of 2017.

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2017 Q3	82343	CalHEERS-MEDS Reconciliation	DHCS	<p>CalHEERS is the system of record for COVCA/Exchange, MCAP, CCHIP, and State Inmate program eligibility. MEDS must be reconciled periodically with CalHEERS for consumers eligible to these programs (excludes Medi-Cal eligibility records). The process should mirror the SAWS-MEDS reconciliation. CalHEERS must send a full set of all current month eligibility records for consumers active in these programs to MEDS. The data will be sent using a MEDS transaction (e.g., RX20) which has the same format as the existing HX transactions. MEDS will generate the necessary transactions (e.g. RX20, RX40, RX12, etc.) based on the comparison between the MEDS records and the CalHEERS records. As a result, consumer's eligibility in MEDS will be updated or terminated, and/or client or case information will be updated, accordingly. MEDS will also generate and send to CalHEERS reconciliation alerts and reports. CalHEERS must process and analyze the reconciliation alerts and reports to identify and remediate the issues/errors identified.</p> <p>CalHEERS is the system of record for COVCA/Exchange, MCAP, CCHIP, and State Inmate program eligibility. MEDS must be reconciled periodically with CalHEERS for consumers eligible to these programs (excludes Medi-Cal eligibility records). The process should mirror the SAWS-MEDS reconciliation. CalHEERS must send a full set of all current month eligibility records for consumers active in these programs to MEDS. The data will be sent using a MEDS transaction (e.g., RX20) which has the same format as the existing HX transactions. MEDS will generate the necessary transactions (e.g. RX20, RX40, RX12, etc.) based on the comparison between the MEDS records and the CalHEERS records. As a result, consumer's eligibility in MEDS will be updated or terminated, and/or client or case information will be updated, accordingly. MEDS will also generate and send to CalHEERS reconciliation alerts and reports. CalHEERS must process and analyze the reconciliation alerts and reports to identify and remediate the issues/errors identified.</p>		CR is planned for implementation in Q3 of 2017.

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R16.4 R16.9 2017 Q3	45852	MEDS Batch Transactions to Indicate Created Date and Time of CalHEERS Event in Header Field of the Transaction Line	DHCS	CalHEERS transactions are processed out of order of the events for various Interface Integration reasons. Individual level transactions may process even though the higher Case level transaction may not have processed. MEDS has identified that the Batch Transactions created in CalHEERS should represent the event date and time in the header of each of the MEDS Batch HX transactions. The intent is that the MEDS system can order by the Created Date and Time of the transactions sent from CalHEERS. The outcome is to reduce the amount of alerts that are produced from processing. CalHEERS will modify MEDS Batch Transactions HX20u, HX12, HX34, and HX40 to use the Event Date and Time in the header of the individual level batch transactions. This change is critical to ensure proper processing of MEDS transactions for both Medi-Cal and CovCA programs.		CR has been withdrawn.
R15.9- R16.2- R16.7+ TBD	8703	Medi-Cal Plan Selection Changes	DHCS	This CR is based on advocate feedback subsequent to design approval. Medi-Cal plan selection will enable consumers to use either the CalHEERS portal or existing county / HCO processes to make Medi-Cal Plan selection. Those plan selections will then be available on the CalHEERS portal. Changes and plan updates reported at either source will also appear through the CalHEERS portal.	(3/20/15) Advocates support moving eligibility determinations before online plan selection. We gave design input in Spring 2014 and request the opportunity to review changes before design is finalized.	The implementation timeframe for this initiative is TBD.
2017 Q3	70678	NCOA and CASS	CovCA	This CR is being implemented as an operational efficiency. The intended outcome of this CR is to: 1. CASS certify outbound mailings to standardize addresses, increase the number of notices that are delivered, and achieve the lowest automated, presorted rates. 2. Perform NCOA on outbound mailings to properly forward mail to consumers who have moved to a new address.		CR is planned for implementation in Q3 of 2017.
2017 Q3	6614	Auto Discontinue Members/Cases	CovCA	This CR continues the automation begun with CR 27819. It automates the eligibility discontinuance/redetermination for consumers that fail to provide valid documentation to verify an inconsistency for Income, Social Security Number (SSN), Minimum Essential Coverage (MEC), and/or American Indian/Alaska Native.		CR is planned for implementation in Q3 of 2017.

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2017 Q3	44000	Semi-annual redetermination for death, Medicare, Medicaid, CCHIP	CovCA	The intended outcome of this CR is to implement State regulations that require the Exchange to examine available data sources on a semiannual basis to identify the certain changes of circumstances for consumers in receipt of APTC or CSR.		CR is planned for implementation in Q3 of 2017.
2017 Q3	82949	Renewals 2018	CovCA	This CR is to implement additional CalHEERS optimizations for consumers who participate in renewals for 2018. This CR will include multiple enhancements to improve the consumer experience during renewals in areas including, but not limited to: Notices, consumer portal functionality, batches, and portal content.		This CR is planned for Release 17.9 Currently, Covered CA staff manually renew consumers that age-out of Minimum Coverage Plans.