

Executive Summary

CalHEERS Feature Release 17.2 (to be deployed on 02/13/2017) contains updates to following:

Key New Features that have been added or modified in this release:

- Technology
- Service Center
- Notices
- Eligibility & Enrollment
- Reporting

Key System Updates that have been deployed in this release:

- eHIT
- Notices
- MEDS
- Consumer Assistance
- Service Center
- Eligibility & Enrollment
- Interfaces

Key Fixes that have been updated or resolved in this release:

- None

Alternate Procedures that have been provided with this release:

No Longer in Effect with this release

- None

New with this release

- None

Purpose and Scope

This document describes the content of the CalHEERS Feature Release 17.2. Any known issues are described together with key features of the release contents, alternate procedures, and actions required.

Key New Features

The following summarizes the new features included in this release.

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
Technology				
CAPTCHA Software (Amend)				
32983	Change Request	This functionality did not previously exist.	Google’s ReCAPTCHA solution is now implemented on the <i>Username & Password</i> page. (The registration page uses a session counter when the user selects their username. Once the user reaches the threshold while attempting to select their username [user name is taken], Google’s ReCAPTCHA solution will implement to slow down the ability for username harvesting).	Username and Password
Service Center				
Reprint and Re-mail Document to Consumer				
65920	Change Request	This functionality did not previously exist.	CalHEERS now allows authorized users to request a reprint and remailing of any notice listed in the consumer’s inbox. Delivery will be based on the consumer’s communication preference (e-mail or mail).	Inbox
Bulk Document Upload				
66251	Change Request	This functionality did not previously exist.	<p>CalHEERS can now process and link documents in bulk from a source outside of the CalHEERS system.</p> <p>CalHEERS has the functionality to import a bulk upload document from external sources, including Novitex and Service Center.</p> <p>CalHEERS has the functionality to consume metadata that is associated to documents that are uploaded in bulk.</p> <p>CalHEERS has the functionality to automatically link documents uploaded in bulk to the correct case based on the metadata provided.</p> <p>CalHEERS creates a BPM work task for the Admin User to review documents when the document cannot be linked to a Case via bulk upload. The task is assigned to the Manual Verification queue.</p>	NA

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			CalHEERS has the functionality to move a document that was erroneously uploaded to a case to the correct case.	
Notices				
2017 Q1 Notice Change Request				
70049	Change Request	This functionality did not previously exist.	<p>CalHEERS now generates a notice to the employer under the following conditions:</p> <ul style="list-style-type: none"> • If all mandatory employer information is available, and • When a consumer has an Initial determination of eligibility for APTC and is in an (Effectuated) Enrolled status with active employer income, or • When a consumer renews for the next benefit year, is eligible for APTC, and is in an (Effectuated) Enrolled status and with active employer income, or • When a consumer, who is eligible for APTC and is in an (Effectuated) Enrolled status, reports a new current employer, or • When a consumer, who is eligible for APTC and is in an (Effectuated) Enrolled status, updates employer information and an employer notice has not been generated in the benefit year. <p>CalHEERS uploads a copy of the employer notice to the user's <i>Documents & Correspondence</i> page without triggering the secure mailbox notification to the user.</p> <p>CalHEERS now has a reason snippet for ineligibility to APTC/CCP/CSR programs during intake, or add a person during Report a Change, or add a person during Renewal, based on attestation to Medicare enrollment.</p> <p>CalHEERS now has a reason snippet for CalNOD1 for an individual who is a new applicant and reports a lump sum income</p>	Documents & Correspondence

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			<p>amount which makes the individual MAGI Medi-Cal Ineligible in the application month, and MAGI Medi-Cal Eligible, Conditionally Eligible, or Potentially Eligible in the following month. (Informs the consumer of the current month Medi-Cal denial and the following month Medi-Cal potential eligibility.)</p> <p>CalHEERS has updated the appeals language on the CalNOD01 notice.</p> <p>CalHEERS has removed the duplicate text in CalNOD01 from snippet 165 that already exists in snippet 328. (The text removed was “About Special Enrollment Periods” and “What’s a qualifying life event?”)</p>	
Eligibility & Enrollment				
Implement Renewal Opt Out Reasons (Amend)				
70614	Change Request	This functionality did not previously exist.	<p>CalHEERS now collects the reason for opting out of renewal, providing the business an option to pull data on why users are opting out.</p> <p>When a user selects Off for the Renew Mode field on the <i>Renew Mode For Covered California Programs</i> page, the following text will display with reasons for user to choose from:</p> <p>Instead of Covered California, what will be your main source of health insurance?</p> <ul style="list-style-type: none"> • My employer or union, or a family member’s employer or union • A plan I purchased myself from an insurance company and not through Covered California • I will be covered by Medi-Cal • I will be covered by Medicare (Medicare is the federal health insurance program for all people ages 65 and older, regardless of income or medical history.) • I will receive health insurance from somewhere else • I will be uninsured 	Renew Mode For Covered California Programs

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			CalHEERS now adds the opt-out reasons to the Data Warehouse.	
Reporting				
Collect Employer Name and Address and Generate Notice to Employers with Employees eligible to APTC (Amend 3)				
29911	Change Request	This functionality did not previously exist.	<p>To comply with Federal and State regulations, CalHEERS now sends a notice to the employer when an employee of theirs is determined eligible for APTC. (Federal and state regulations require Covered California to notify any employer if one of their employees has been determined eligible for APTC through Covered California, and notify them of their appeals rights.)</p> <p>Users are required to provide Employer information (Name and Address) details for CalHEERS to be able to issue notice to the employers.</p> <p>Below are the changes in the user interface:</p> <p>The <i>Employer Contact Information</i> page is added. The page will only display for APTC eligible/conditionally eligible and “enrolled” consumers who are “employed” with current income.</p> <ul style="list-style-type: none"> • The Employer Contact Information transaction is added to the Change Log Table on the <i>Transaction History</i> page. • On the <i>Household Members</i> page, the SHOP Application option is removed from the dropdown list for If no SSN, why? field. For all existing users who have SHOP Application chosen, Select One will be displayed for the user to choose from the dropdown list. • The Does this person need help with long-term care or home and community-based services? question and question set are moved from the <i>Healthcare</i> page to the <i>Personal Data – Demographic Information</i> page. 	<p>Household Members</p> <p>Personal Data – Demographic Information</p> <p>Personal Data – Health Insurance Information</p> <p>Employment Income Add Employment Income (Help Page)</p> <p>Employer Contact Information</p> <p>Transaction History</p> <p>Eligibility Results</p>

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			<ul style="list-style-type: none"> • New page layout for the <i>Personal Data – Health Insurance Information</i> page. • The employer contact information question is removed from the <i>Personal Data-Health Insurance Information</i> page. • The ESI Question flow on the <i>Personal Data - Health Insurance Information</i> page is updated. • Rules added to the Delete link on the <i>Employment Income</i> page. • Rules added to the Continue Health Plan Update button on the <i>Eligibility Results</i> page. • The <i>Employment Income – Add Income</i> (help page) removed Employer Contact Person, Employer Phone Number, Employer Mailing Address Line 1, Employer Mailing Address Line 2, City, State, Zip Code, and County. • <i>Apply for Health Insurance</i> (landing page) In Apply Mode (New Application or Application in Progress) – The Update Employer Contact Information link is enabled if at least one member in the household has active APTC eligibility or conditional eligibility in the current month, or is eligible or conditionally eligible for APTC in the future month, and has an employment income record active in the current month or future month. • <i>My Health Insurance</i> (landing page) in Maintain Mode – The Continue Health Plan Update button is modified to direct consumer to the <i>Employer Contact Information</i> page if at least one member in the household has active APTC eligibility or conditional eligibility in the current month, 	

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			<p>or is eligible or conditionally eligible for APTC in the future month, and has an employment income record active in the current month or future month. Otherwise, the user is redirected to the <i>Household Enrollment Introduction</i> page.</p> <ul style="list-style-type: none"> • <i>My Health Insurance (landing Page)</i> In Maintain Mode – The Choose Health Plan Button is added to direct the consumer to the <i>Employer Contact Information</i> page if at least one member in the household has active APTC eligibility or conditional eligibility in the current month, or is eligible or conditionally eligible for APTC in the future month, and has an employment income record active in the current month or future month. • <i>My Health Insurance (landing Page)</i> – The Report a Change Button removed direction to the consumer to the <i>Employer Contact Information</i> page if at least one member in the household has active APTC eligibility or conditional eligibility in the current month, or is eligible or conditionally eligible for APTC in the future month, and has an employment income record active in the current month or future month. • <i>My Health Insurance (landing page)</i> – The Update Employer Contact Information link displays if at least one member in the household has active APTC eligibility or conditional eligibility in the current month, or is eligible or conditionally eligible for APTC in the future month, and has an employment income record active in the current month or future month. On click, the consumer is directed to the <i>Employer Contact Information</i> page. • <i>My Health Insurance (landing page)</i> – Renewal Mode – The Update Employer Contact Information link displays if at least 	

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			<p>one member in the household has active APTC eligibility or conditional eligibility in the current month, or is eligible or conditionally eligible for APTC in the future month, and has an employment income record active in the current month or future month. On click, the consumer is directed to the <i>Employer Contact Information</i> page.</p> <ul style="list-style-type: none"> • CalHEERS displays questions regarding the consumer’s employer contact information only if the consumer is eligible or conditionally eligible for APTC. • CalHEERS provides APTC consumers the ability to update answers to the employer contact information questions at any time. • The employer contact information question is removed from the <i>Personal Data-Health Insurance Information</i> page. • CalHEERS calls the Hub for the following federal-based verifications, and stores the outcome and response codes for eligibility determinations for the mentioned Covered California Programs: <ul style="list-style-type: none"> o Medicare, o Peace Corps, o TRICARE, and o VHA. • CalHEERS does not call the Hub for the following state-based verifications: <ul style="list-style-type: none"> o Medicaid, o CHIP, and o BHP. • CalHEERS determines ineligibility for APTC when there is an Admin Failure of any MEC verification attribute (ESI, NON-ESI, MEDS, Medicare), even if another is e-verified. 	

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			<ul style="list-style-type: none"> • CalHEERS now has the functionality to modify the existing hover text to the existing SSApp question on MEC (including Medicare) coverage. • The employer questions on the <i>Employer Information of the Earned Income Details</i> page are removed. • CalHEERS now sends health care, Non-ESI verification data, and hub responses codes and description for Medicare, Tricare, Veterans, and Peace Corps to the CalHEERS Data Warehouse. • The CalHEERS SAWS interface Other Health Care node is modified to align with the portal changes. • CalHEERS now preserves Employer Contact Information in Mixed Household scenarios. • CalHEERS SAWS interface is updated with new business validations to ensure conditional data elements within the Other Health Care node are sent when certain data within the Other Health Care node is sent. • CalHEERS determines a consumer ineligible for CCP when the consumer attests to having Medicare at intake, or adds a person during Report a Change or Renewal. • CalHEERS continues a consumer’s eligibility for CCP when the consumer has an active plan selection, attests to having Medicare at Report or Change or Renewal, and continues to be otherwise eligible for CCP. • The ESI Employer Notices Extract and project documentation now includes employer address information. 	

Key System Updates

The following summarizes the modified features included in this release.

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
eHIT				
EHIT Schema Technical Update v7.0				
67666	Change Request	CalHEERS SAWS EHIT schema interface was on version 6.0.	CalHEERS SAWS EHIT schema interface is updated to version 7.0.	NA
County of Responsibility Electronic EICT (Amend)				
52600	Change Request	CalHEERS did not support Servicing Counties and Case Management Counties to be different counties.	<p>CalHEERS now supports Servicing Counties and Case Management Counties to be different counties.</p> <ul style="list-style-type: none"> The CalHEERS System conducts a scheduled process to identify triggering events that satisfy specific case conditions to determine if the CalHEERS System can set the enablement flag to reassign the County of Responsibility (COR) of the case in the future event that the assigned Primary Contact's residence address changes to a different county. CalHEERS identifies cases for evaluation based on any of the following triggering conditions: <ol style="list-style-type: none"> Eligibility is processed successfully from the last successful run of the batch to the current batch run. A Disposition is processed successfully from the last successful run of the batch to the current batch run. A 90-day Discontinuance cure period for the CalHEERS Case's eligibility evaluation has expired. CalHEERS allows reassignment of the County of Responsibility after the process has evaluated that the case meets all of the following conditions: <ol style="list-style-type: none"> All applying members are Denied, Ineligible, or Discontinued from MAGI Medi-Cal. 	NA

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			<p>2. For MAGI Medi-Cal Discontinuance, at least one Disposition corresponding to the MAGI Medi-Cal Discontinuance determination is processed.</p> <p>3. The 90-day cure period of a discontinuance for “failure to provide” has expired.</p> <p>4. The CalHEERS case has no open referrals for Non-MAGI Medi-Cal.</p> <p>5. All CalHEERS Non-MAGI referrals reported per case member have a status of Ineligible or Discontinued.</p> <ul style="list-style-type: none"> • CalHEERS’ process of evaluation accounts for the 90-day cure period from the first day of the benefit month of discontinuance for each case member incurring a “Failure to Provide” reason of discontinuance. • CalHEERS uses the established CalHEERS county of responsibility for the corresponding MEDS transactions HX12, HX18, HX20, HX20U, HX34, and HX40 county of responsibility for all individuals on the case based on the residence address of the primary applicant. • CalHEERS communicates and updates the county of responsibility for the primary contact (all co-applicants will have their county of responsibility aligned with the primary contact) to MEDS for APTC, CSR, CCP, MCAP, and CCHIP members via HX05 transaction. • CalHEERS SAWS interface validates an individual’s residential zip and county code for processing in CalHEERS. • CalHEERS SAWS interface changes the county of responsibility upon request of an ICT by the SAWS for a prospective benefit month. 	

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			<ul style="list-style-type: none"> • CalHEERS SAWS interface processes case eligibility received via ICT for a prospective benefit month. • A business validation is added in CalHEERS to accept ICT EDRs for prospective benefit months only. • CalHEERS SAWS interface routes traffic according to the original source system that sent it. • CalHEERS does not maintain SAWS Case and corresponding person linkage after the release of county of responsibility. • CalHEERS updates consumer messaging when a change in residence address is made on the portal • CalHEERS shall trigger HX05 transaction to convert existing cases where a county of responsibility change is required up through the implementation of this change request. 	
Add Business Validation to Primary Contact Match in the CalHEERS SAWS eHIT Interface to Mitigate Against Case Data Overlay				
10021	Change Request	All SAWS eHIT updates in CalHEERS were made based on Case person number only (CalHEERS SAWS eHIT Interface uses the Case person number (ergo MEDS person number) for case linkage).	<p>All SAWS eHIT updates in CalHEERS are now validated against the following primary contact details, along with Case person number (these measures avoid demographic data overlay for person mismatches at the primary contact level):</p> <ul style="list-style-type: none"> • First Name • Last Name • Gender • Date of Birth • Social Security Number <ul style="list-style-type: none"> • The CalHEERS SAWS eHIT Interface creates a logging event and rejects the EDR transaction to inform SAWS of a person data mismatch at the primary contact level. 	NA

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			<ul style="list-style-type: none"> The CalHEERS SAWS eHIT Interface provides an administrative flag at person level to bypass the matching criteria validation, and allows correction of demographic information within CalHEERS by SAWS. CalHEERS SAWS implements a periodic report based on the business validation rejection occurrences logged from the mismatch occurrences. The CalHEERS SAWS Interface provides an ability to update the designation of the Primary Applicant and Primary Contact with CalHEERS by SAWS. 	
Notices				
Implement NOD01 in twelve threshold languages (Amend)				
4187	Change Request	CalHEERS CalNOD01 notice was issued in English and Spanish only.	<p>The CalHEERS CalNOD01 notice is now issued in all 12 Medi-Cal Managed Care Threshold languages listed below.</p> <ol style="list-style-type: none"> English Spanish Arabic Armenian Chinese Farsi Hmong Khmer Korean Russian Tagalog Vietnamese <p>The CalHEERS System generates the CalNOD01 notice according to the Language Preference (Written) noted in CalHEERS Portal.</p> <p>CalHEERS continues to generate Babel page for English CalNOD01.</p>	NA

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MEDS				
Change MEDS HX18 and HX20 batch process to Generate at an Individual Level				
10675	Change Request	MEDS HX18 (this batch process is responsible to read the interface events table where all new applications created in CalHEERS waiting to be sent to MEDS reside), and HX20 (this batch process is responsible for managing changes to the existing Program Eligibility information in CalHEERS System received from MEDS), batch processes were generated at a case level. (In the event that one individual on the case had no CIN, the entire case transaction was on hold until a CIN was returned, causing large backlogs.)	<p>CalHEERS now sends any/all MEDS transactions to MEDS at an individual level.</p> <p>CalHEERS now sends MEDS transactions for individuals who have an assigned CIN immediately upon the triggering action.</p> <p>CalHEERS sends MEDS transactions for individuals who do not have an assigned CIN only after a CIN has been assigned to the individual.</p>	NA
Consumer Assistance				
CEC Delegations				
65685	Change Request	CalHEERS automatically removed the CEC delegation when a user enrolled in a plan.	<p>CalHEERS does not automatically remove the CEC delegation when a user enrolls in a plan.</p> <ul style="list-style-type: none"> The CEC's delegation will persist after the application is submitted unless the CEE, CEC, SCR admin, or the consumer removes the delegation. The CEC's delegation will persist after the enrollment is effectuated unless the CEE, CEC, SCR admin, or the consumer removes the delegation. The CEC will continue to have the privileges to work on the case the same way as before enrollment (Report a Change, Submit Application, Plan Selection, Renewals, etc.) 	NA

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Service Center				
Upload Documents to a Case Anytime by Any User				
65922	Change Request	SCR's had access to upload documents to a case in Conditionally Eligible status only.	<p>All user's now have access to upload documents to a case in any status at any time.</p> <ul style="list-style-type: none"> CalHEERS allows users to link existing documents that have already been transferred to CalHEERS ECM/WCC by Novitex to a case. CalHEERS creates a BPM (manual verification) task when a consumer uploads a document via the <i>Documents and Correspondence</i> page. CalHEERS allows for one document to be associated to more than one outstanding verification to more than one consumer on a case. 	Documents and Correspondence
Eligibility & Enrollment				
Dropdowns for Citizenship Documents				
70676	Change Request	<p>CalHEERS functionality for uploading citizenship documents did not match Covered California's policy. Specifically:</p> <p>If a consumer uploaded a document from the Primary list, they could continue.</p> <p>If a consumer uploaded a document from the Secondary List A, then they were required to upload a document from the Secondary List B, before they could continue.</p>	<p>CalHEERS now displays explanatory text on the <i>Uploads Documents</i> popup on the <i>Uploads Documents</i> page when an individual selects a document type on the "Secondary List A."</p> <ul style="list-style-type: none"> The following text: "If you upload this document type, then you must upload a second document to verify your citizenship" is displayed when a user chooses the Document Category* dropdown value as Proof of Citizenship or Lawful Presence and any of the following Document Type*: <ul style="list-style-type: none"> Consular Report or Certificate of Child Born Abroad U.S. Public Birth Certificate U.S. citizen identification card Federal or State census record Northern Mariana Identification Card Final adoption decree U.S. military records Evidence of U.S. Civil Service employment before June 1, 1976 U.S. Medical records with child's name and indicating a U.S. place of birth 	Upload Documents

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			<ul style="list-style-type: none"> ○ U.S. Insurance records indicating a U.S. place of birth ○ School records showing the child’s name and U.S. place of birth ○ Official religious records recorded in the U.S ● CalHEERS now prompts the individual to upload a document from the “Secondary List B” if the consumer uploads a document from “Secondary List A.” ● The Secondary Document Type conditional box is added with the following dropdown list for Secondary Document Type*: <ul style="list-style-type: none"> ○ ID card or Driver's License ○ School ID card ○ U.S. military card/draft record/Military dependent’s ID card ○ U.S. Coast Guard Merchant Mariner card ○ A clinic, doctor, hospital, or school record, including preschool or day care records ○ Employer ID card ○ High school or college diploma ○ Foreign birth certificate ○ Social Security card ○ Marriage Certificate ○ Divorce Decree ○ Property deed or title ● The following document names are added to the Document Type* dropdown list: <ul style="list-style-type: none"> ○ U.S. Passport/U.S. Passport Card ○ Certificate of U.S. Citizenship/Naturalization ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Tribal enrollment card ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Certificate of Degree of Indian Blood 	

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			<ul style="list-style-type: none"> ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Tribal census document ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Document on Tribal letterhead, issued under the signature of the appropriate Tribal official ○ Consular Report or Certificate of Child Born Abroad ○ U.S. Public Birth Certificate ○ U.S. citizen identification card ○ Federal or State census record ○ A Northern Mariana Identification Card ○ A final adoption decree ○ U.S. military records ○ Evidence of U.S. Civil Service employment before June 1, 1976 ○ U.S. Medical records with child’s name and indicating a U.S. place of birth ○ U.S. Insurance records indicating a U.S. place of birth ○ School records showing the child’s name and U.S. place of birth ○ Official religious records recorded in the U.S <p>CalHEERS consolidated the following document type names for verification of citizenship:</p> <ul style="list-style-type: none"> ○ Certificate of U.S. Citizenship/Naturalization ○ Consular Report or Certification of Child Born Abroad ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Tribal enrollment card ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Certification of Degree of Indian Blood ○ Documentary evidence issued by a federally-recognized American Indian 	

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			<p>or Alaska Native Tribe: Tribal census document</p> <ul style="list-style-type: none"> ○ Documentary evidence issued by a federally-recognized American Indian or Alaska Native Tribe: Document on Tribal letterhead, issued under the signature of the appropriate Tribal official 	
Income Data Quality and Usability Enhancements				
57638	Change Request	<p>CalHEERS did not contain clear instructions about which income types are countable and not countable, leading to income types being entered into the miscellaneous field that should not be included in the consumer's MAGI budget, or omitting income types that should be counted. This resulted in incorrect eligibility determinations for some users.</p>	<p>CalHEERS now contains clear instructions about which income types are countable and not countable, and which non-countable income types can be excluded, thereby reducing user error.</p> <p>Below are the Business Rules Engines (BREs) and validations updated in CalHEERS, resulting in correct eligibility results:</p> <ul style="list-style-type: none"> • CalHEERS provides access to the Income and Deduction Types chart on the DHCS Website. • When a One-Time Lump Sum is entered for the month of application and one or more members are not MAGI Medi-Cal eligible, CalHEERS determines eligibility for the month of application and for the month after application. • When a One-Time Lump Sum is entered for a future month for a Medi-Cal beneficiary, CalHEERS disregards the One-Time Lump Sum for the MAGI Medi-Cal determination. • CalHEERS applies an exception to the counting of income based on the member's role in the tax filing household under evaluation (this includes whether or not they are a Tax Filer, or whether they are a dependent or child under 19 or 21 if a full time student with a parent living in the household. These are contained in 42 CFR Section 435.603 (f) and 42 CFR 435.603 (d) (2) (i)). 	Add Other Income

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			<ul style="list-style-type: none"> • CalHEERS prevents a non-tax filer from claiming a dependent. • CalHEERS identifies per capita gaming distributions of American Indian/American Native (AI/AN) income and counts them for the MAGI Medi-Cal and APTC determinations. • CalHEERS has the ability to count shared income between Registered Domestic Partners (RDP) and apply it while determining eligibility. • CalHEERS requires a consumer who applies on their own and indicates they are a Registered Domestic Partner (RDP) to add the other Registered Domestic Partner (RDP) before continuing the application. • CalHEERS compares the individual's countable MAGI Medi-Cal income to the appropriate dollar income limit while determining eligibility for MAGI Medi-Cal and Exchange programs. • CalHEERS makes all members of a MAGI-MC household eligible only when all of the countable income of that MAGI-MC household is verified. • CalHEERS applies the exception to the counting of income based on the member's role in the tax filing household. • "Miscellaneous" is renamed to "Other Taxable Income" in the What type of income? dropdown options on the <i>Add Other Income</i> page. 	
MAGI Income Information Passed to SAWS (Amend)				
30049	Change Request	CalHEERS-SAWS eHIT Interface for both MAGI and APTC did not include	CalHEERS-SAWS eHIT Interface for both MAGI and APTC now includes the following OPA budget elements:	NA

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		these OPA budget elements.	<ol style="list-style-type: none"> 1. Soft Paused Due To 2. Person Primary Tax Filer 3. Person Included in Primary Tax Filer's Tax Household 4. Person Plans to File Taxes 5. Person Expected to be Required to File Taxes 6. Person Tax Filing Status 7. Person Tax Dependent Status 8. Who claims this person as a tax dependent 9. MAGI - Employment Income (Monthly) 10. MAGI - Self-Employment Income (Monthly) 11. MAGI - Other income (Monthly) 12. MAGI - Total Income 13. MAGI - Allowable deductions (Monthly) 14. MAGI - Total Income after Deductions 15. MAGI - Projected Monthly Income 16. MAGI - Countable Income 17. MAGI - Number of household member + Number of expected babies 18. MAGI - List of Household Members 19. MAGI - Federal Poverty Level 20. MAGI - Federal Poverty Level % for individual 21. MAGI - MAGI Medi-Cal Eligible 22. MAGI- Meets 435.603(f)(2)(I-iii) to use a non-tax filer household composition for MAGI Medi-Cal 23. MAGI - Meets 435.603(I) exception to use APTC income/deduction calculations for MAGI Medi- Cal determination 24. MAGI - Meets 435.119(c): Adults ineligible to the New Adult Group due to dependent child under age 19 without Minimum Essential Coverage 	
Interfaces				
Business Rules Exposure for SAWS (BREfS) – Phase A: Modify the eHIT interface to provide reasons and detailed data for eligibility determination results to SAWS.				
72004	Change Request	CalHEERS-SAWS eHIT Interface for both MAGI and APTC did not include the reasons and detailed data for eligibility determination results to SAWS.	<p>CalHEERS-SAWS eHIT Interface for both MAGI and APTC now includes the reasons and detailed data for eligibility determination results to SAWS; the following details are now included in the interface:</p> <ol style="list-style-type: none"> 1. Income determination details – What income was used (and excluded) for each 	NA

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
			<p>individual for the determination, including the income limit.</p> <ol style="list-style-type: none"> 2. Income deduction details – What deductions were used for the determination. 3. Tax Household size/ detail – What persons were included in the tax household(s) for purposes of the eligibility determination. <ul style="list-style-type: none"> • The following OPA budget worksheet elements are populated in the CalHEERS-SAWS eHIT Interface for both MAGI and APTC: <p>MAGI: By person to whom income/deduction is assigned, by income/deduction type and by income source:</p> <ul style="list-style-type: none"> ○ MC - Non countable income (not currently on Budget display, not in CR 30049). Included source and amount. ○ MC - Employment Income (total is included in CR 30049) expanded to include source and amount provided for each employment income record entered). ○ MC - Self-Employment Income (total is included in CR 30049) expanded to include source and amount provided for each self-employment income record entered). ○ MC - Other income (total is included in CR 30049), expanded to include source and amount provided for each other income record entered). ○ MC - Allowable deductions (total is included in CR 30049), expanded to include source and amount provided for each allowable deduction entered). ○ MC - Disallowed Deductions (not on budget worksheet) added source and amount. 	

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> ○ MC - Countable Income (total is included in CR 30049) expanded to include source and amount provided for each countable income record entered (added PAI/CMI indicator to indicate which income is being used) Projected Monthly Income (total is included in CR 30049), expanded to include individual amount) ● APTC: <ul style="list-style-type: none"> ○ APTC -Total Income after Deduction Monthly (needed for mixed household notices). ○ APTC -Total Income after Deduction Annual (needed for mixed household notices). ○ APTC - Federal Poverty Level (needed for mixed household notices). ○ APTC - Federal Poverty Level % for Individual (needed for mixed household notices). ○ APTC - Monthly APTC Amount (needed for mixed household notices). ○ APTC - Annual APTC Amount (needed for mixed household notices). ● UPW Income Disregard. ● The <i>Portal Budget Summary</i> Page now includes new elements added in BR1 for MAGI Medi-Cal Only: <ul style="list-style-type: none"> ○ MC - Total Non-countable income and details. ○ MC - Current Monthly Income details. ○ MC - Allowable deductions details. ○ MC – Total Countable Income details (add PAI/CMI indicator to indicate which income is being used and amount details). ● CalHEERS-SAWS eHIT interface adds “PA” as an income category and send PAI amounts for each individual when available. 	

Key Fixes

The following summarizes the key defect fixes implemented in this release.

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
None				

Alternate Procedures

Summary of Alternate Procedures

This section summarizes Alternate Procedures **No Longer in Effect** as of this release. Except for the following (and those noted in previous release notes), all other Alternate Procedures from previous releases remain in effect.

#	Alternate Procedures No Longer in Effect	Ref ID	Release Delivered
None			

This section summarizes the **NEW** Alternate Procedures for known issues agreed to be resolved in a future release.

#	New Alternate Procedures	Ref ID	Planned Release
None			

Glossary

Acronym	Full Form	Acronym	Full Form
ABE	Accenture Billing Engine	ISO	Information Security Officer
ADA	Americans with Disabilities Act	JAWS	Job Access With Speech (JAWS is a computer screen reader program for Microsoft Windows that allows blind and visually impaired users to read the screen either with a text-to-speech output or by a Refreshable Braille display)
ALM	Application Lifecycle Management	MCAP	Medi-Cal Access Program
APTC	Advance Premium Tax Credits	MEDS	Medi-Cal Eligibility Determination System
BRE	Business Rules Engine	NQI	New Qualified Immigrants
CCHIP	Children's Health Initiative Program	OBIEE	Oracle Business Intelligence Enterprise Edition

Glossary				
Acronym	Full Form		Acronym	Full Form
CCP	Covered California Programs		OPA	Oracle Policy automation
CEC	Certified Enrollment Counselor		PBE	Plan Based Enroller
CEE	Certified Enrollment Entities		QHP	Qualified Health Plan
CEW	County Eligibility Worker		RTC	Rational Team Concert
CFS	Carry Forward Status		SA	Subject Area
CR	Change Requests		SAWS	Statewide Automated Welfare Systems
CSR	Cost Share Reduction		SCR	Service Centre Representative
CSS	Cascading Style Sheets (CSS is a style sheet language used for describing the look and formatting of a document written in a markup language)		SIR	Service Investigation report
DER	Determination of Eligibility Response		SNOW	Service Now
DHCS	Department of Health Care Services		SQL	Structure Query Language
DWH	Data Warehouse		SSA	Social Security Administration
EDI	Electronic Data Interchange		SSN	Social Security Number
EDR	Eligibility Determination Request		WAT	Web Accessibility Toolbar
FPL	Federal Poverty Level		WP	Work Products
SCIN	Statewide Client Index Number		FIPS	Federal Information Processing Standard
RDP	Registered Domestic Partner		CIN	Client Index Number
IRS	Internal Revenue System		PDF	Portable Document Format
ICT	Inter County Transfer		ECM	Electronic Content Management System
WCC	Web Center Content		BPM	Business Process Management
AI	American Indian		AN	Alaskan Native
PAI	Projected Annual Income		CMI	Current Monthly Income