

Executive Summary

CalHEERS Feature Release 18.9 (to be deployed on 09/24/2018) contains updates to following:

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

- None

Key System Updates that have been deployed in this release:

- Cross-Business Area
- Notices
- eHIT
- Project
- Eligibility & Enrollment

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No Longer in Effect with this release

New with this release

- None

- None

Purpose and Scope

This document describes the content of the CalHEERS Feature Release 18.9. 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
None				

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
Cross-Business Area				
User Interface Updates for Renewals				
90113	Change Request	When a user came back to their application during renewals to renew the coverage, they found it difficult to navigate through the application, sometimes resulting in a confused experience.	CalHEERS now provides a better user experience with improved options for collecting consumer data during Renewals. Beginning with the Consumer’s Home Page, the renewal	All Renewal Pages.

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			<p>application process is focused on why the consumer is returning. Consumers now have the option to go through their information to verify and make changes to their application. If they do not need to make any changes then they can proceed directly to the final review of their application before submission. If you select the option to make changes then the consumer will be navigated to the new consumer flow introduced with CR 70497 in Release 17.9. However, if the Consumer chooses to proceed directly to verify their information, they will be directed to a list of summary pages they can review before submitting their renewal.</p>	
2019 Renewals CR				
115338	Change Request	<ul style="list-style-type: none"> CalHEERS did not have the functionality to suppress a DER-U when the case data or eligibility status was not changed for all members on the case. CalHEERS auto-determined eligibility for the next benefit year when Report a Change occurred between 11/1 and 12/31 for the current benefit year for MAGI Medi-Cal only case with at least 1 household member being ineligible/discontinued for all programs for the current benefit year and the case was not part of the Exchange Renewal population. CalHEERS generated ad-hoc reports from OBIEE. CalHEERS did not allow consumers to apply for the current benefit year starting from the open enrollment start 	<ul style="list-style-type: none"> CalHEERS sends a DER-U when the case data triggers an eligibility determination request or a change in aid code or eligibility status for any individual on the case. CalHEERS auto-determine eligibility for the next benefit year when Report a Change occurs between open enrollment start date and 12/31 for the current benefit year for MAGI Medi-Cal only case with at least 1 applicant household member being ineligible/discontinued for all programs for the current benefit year. CalHEERS will update functionality for income begin dates to ensure that we capture current calendar year income and open enrollment benefit year income information during Open Enrollment Period. 	<p>Sign and Submit Your Changed Application.</p> <p>Next, You Can Enroll Each Group in a Plan.</p> <p>Individual Home page.</p> <p>Extension11.</p> <p>Terminate Participation.</p>

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		<p>date to 12/31 of the current benefit year.</p> <ul style="list-style-type: none"> The Change Health Plan button on the <i>Next, You Can Enroll Each Group in a Plan</i> page was enabled after Dental Plan selection only. CalHEERS displayed the Renewal due date of 12/13 of the current benefit year on the Individual Home page for cases identified in the last batch sweep. CalHEERS did not call SSA Title II income for monthly and annual income and disabled person indicator in RRV batch. 	<ul style="list-style-type: none"> All CCA cases in renewal mode have access and submit <i>Report a Change</i> for the current benefit year. The <i>Sign and Submit Your Changed Application</i> page now displays the Consent for Verification option. CalHEERS now displays the <i>Terminate Participation</i> popup on the <i>Terminate Participation</i> page to consumers who discontinue/terminate enrollment in the current benefit year after passive or active renewal to confirm the intent to discontinue/terminate enrollment for the next benefit year coverage. CalHEERS now allows non-admin users to apply for the current benefit year starting from the open enrollment start date to 12/31 of the current benefit year. The Change Health Plan button on the <i>Next, You Can Enroll Each Group in a Plan</i> page is enabled after completing the consumer Health Plan selection regardless of Dental Plan selection status. CalHEERS processes the Passive Renewal Simulation on the Production Ops Copy database prior to Passive Renewals in Production to identify unknown issues. CalHEERS shall not call EDD or FTB during passive renewals when consent for verification is not on file. The Change Plan Effective Date for Enrollment extension is updated. 	

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			<ul style="list-style-type: none"> The Individual Home page displays the Open Enrollment extension dates during the Open Enrollment Period. CalHEERS now has the functionality to update the <i>Extension</i> page to include the following: <ul style="list-style-type: none"> Open Enrollment-Begin and End dates. Renewal Begin and End Dates. Preview Plan-Start Dates. RAC-End Date for Prior year. Over finish line-date. The fair share percentage table for the benefit year 2019 is updated. CalHEERS populates the renewal due date as [Renewal end date - 2 days] if the case is flagged for the last batch sweep at the time when the NOD12 is generated or, if NOD12 has not been generated and the system date is greater than the Renewal start date + 30 days. CalHEERS shall grant AI/AN limited cost sharing for AI/AN members when consent for electronic verification is not on file CalHEERS requests and store the SSA Title II for monthly and annual income and disabled person indicator in the RRV batch. 	
eHIT				
R18.9 EHIT Technical Schema v10.0				
113161	Change Request	The EHIT technical Schema was on v 9.1.	The EHIT technical Schema is now upgraded to v 10.0.	NA
Eligibility & Enrollment				
CalHEERS Verification Caching Rules Update				

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
109700	Change Request	<ul style="list-style-type: none"> • CalHEERS called the SSA Composite service to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ First Name ▪ Middle Name ▪ Last Name ▪ Date of Birth ▪ SSN • CalHEERS called the IRS, FTB and EDD services to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ First Name ▪ Middle Name ▪ Last Name ▪ Date of Birth ▪ SSN ▪ Gender ▪ Relationship ▪ Taxation ▪ Income • CalHEERS called the VLP service to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ Alien/USCIS Number ▪ Card/Receipt Number ▪ Document Expiration Date ▪ I94 Number ▪ Passport Number ▪ Country of Issuance ▪ SEVIS ID ▪ Visa Number ▪ First Name ▪ Middle Name ▪ Last Name ▪ Date of Birth • CalHEERS called the ESI-MEC service to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ First Name ▪ Middle Name 	<ul style="list-style-type: none"> • CalHEERS now calls the SSA Composite service to verify SSN changes only. • CalHEERS now calls the IRS, FTB and EDD services to verify the income amount or SSN changes only. • CalHEERS now calls the VLP service to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ Alien/USCIS Number ▪ Card/Receipt Number ▪ Document Expiration Date ▪ I-94 Number ▪ Citizenship Number ▪ Naturalization Number ▪ Passport Number ▪ Country of Issuance ▪ SEVIS ID ▪ Visa Number • The <i>Individual Information Menu</i> page now includes the mentioned questions for all U.S Citizens. <ul style="list-style-type: none"> ▪ Earlier, you said that [Household Member Name] is a U.S citizen. Are they a Naturalized or Derived citizen? ▪ Do you have any of the following information? Choose the one that applies. <ol style="list-style-type: none"> 1. Certificate of Citizenship Number 2. Certificate of Naturalization Number 3. None of these • CalHEERS sends the naturalized or derived citizenship information to SAWS via eHIT and to MEDS through HX18, HX34, HX20 (ESAC1/ESAC6), HX20 (E2/E7), HX12 & HX05 transactions. 	Individual Information Menu.

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
		<ul style="list-style-type: none"> ▪ Last Name ▪ Date of Birth ▪ SSN ▪ Gender ▪ State of residence address ▪ Question "Is this person currently enrolled in any of these Health Plans/Health Coverage?" <ul style="list-style-type: none"> • CalHEERS called the Non-ESI-MEC service to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ First Name ▪ Middle Name ▪ Last Name ▪ Date of Birth ▪ SSN ▪ Gender ▪ Residence Address State ▪ Question "Is this person currently enrolled in any of these Health Plans/Health Coverage?" ▪ Question "Is this person eligible for free Medicare Part A?" • CalHEERS called the SSA, VLP, ESI-MEC, Non-ESI-MEC services based on caching rules. 	<ul style="list-style-type: none"> • CalHEERS now calls the ESI-MEC service to verify SSN changes only. • CalHEERS now calls the Non-ESI-MEC service to verify changes to any of the mentioned data elements. <ul style="list-style-type: none"> ▪ SSN ▪ Question "Is this person currently enrolled in any of these Health Plans/Health Coverage?" ▪ Question "Is this person eligible for free Medicare Part A?" • CalHEERS now calls the SSA, VLP, ESI-MEC, and Non-ESI-MEC services based on the refresh cycle set by the services. • CalHEERS now logs the reason for making or not making FDSH service calls based on each service's caching rules. • The CalHEERS eHIT schema is updated with a Naturalized or Derived Indicator. 	

Notices

Enhancement to Fax Cover Page on NOD01 and NOD03

117094	Change Request	<ul style="list-style-type: none"> • The CalNOD01 snippet table had separate static snippets within the table. 	<ul style="list-style-type: none"> • The cover page of CalNOD01 and CalNOD03 notices now requests the consumer to include cover page along with verification documents. • Cover page is the first page of the CalNOD01 and CalNOD03 notices. • The CalNOD01 snippet table now have embedded word documents in place of static snippets. 	NA
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Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
2018 18.9 Notice Change Request				
116755	Change Request	New enhancements that have been added.	<p>CalNOD01:</p> <ul style="list-style-type: none"> Snippet 877 is part of CalNOD01 when Report a Change results in CCHIP discontinuance and eligibility for Medi-Cal. The verbiage for snippet 821 in CalNOD01 has been updated. <p>CalNOD12:</p> <ul style="list-style-type: none"> The agent's business address is now populated in the CalNOD12. The Renewal End Date is displayed based on the cases that are in the last batch sweep. The CalNOD12 notices are generated based on prioritization. <p>CalNOD66:</p> <ul style="list-style-type: none"> The Agency Legal Business Name is now displayed in a separate line to avoid truncation. The notice text now includes the Legal Business Name. <p>CalNOD67:</p> <ul style="list-style-type: none"> The PDF generated now includes fillable space for those fields which are not populated by CalHEERS, the filled fields will be present when printed but will remain blank in the admin's secure mailbox. <p>CalNOD68:</p> <ul style="list-style-type: none"> This is a new notice for Admin Staff. A notice will be sent to all Agency Managers in the agency when a new Admin Staff role is created and approved. 	NA
Project				
R18.9 Carriers Integration Testing				
122434	Change Request	Carriers' integration test with CalHEERS for 2018 Renewal & Open enrollment has been completed.	This CR supports Carriers integration tests with CalHEERS for 2019 Renewal & Open enrollment preparation.	NA

Ref ID	Type	Previous Design/Problem	Updated/Resolved Functionality In this Release	Pages Impacted
			<p>Carriers will be informed of renewal enhancements and processing of 834 transactions will be tested.</p> <p>The testing will be done in 2 phases detailed below.</p> <ul style="list-style-type: none"> Phase 1: 2019 Renewal (validation of active and passive renewals for one plan for all and Custom Grouping). Phase 2: 2019 Open Enrollment (validation of enrollment in 2019 plans, changing plans). <p>The integration test includes the following schedule:</p> <ul style="list-style-type: none"> CalHEERS shall retest the connectivity with all existing Carriers (Health and Dental) and correct any connectivity issues identified during the test. CalHEERS shall perform Integration tests to ensure that the carriers are able to accept, process, and provide response to transactions including 834, TA1 and 999. 	

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

#	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	IVR	Interactive Voice Response
AHBX	Accenture Health Benefit Exchange	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)
AI	American Indian	LFP	Lawful Presence
ALM	Application Lifecycle Management	LV	Life event needs verification
AN	Alaskan Native	MCAP	Medi-Cal Access Program
APTC	Advance Premium Tax Credits	MCIEP	Medi-Cal Inmate Eligibility Program
BOB	Book of Business	MEC	Minimal Essential Coverage
BPM	Business Process Management	MEDS	Medi-Cal Eligibility Determination System
BRE	Business Rules Engine	MNE	Manual Eligibility
CCHCS	California Correctional Health Care Services	NHeLP	National Health Law Program
CCHIP	County Children’s Health Initiative Program	NIST	National Institute of Standards and Technology
CCP	Covered California Programs	NMEC	Non-MAGI MEC AID Code
CDCR	California Department of Corrections and Rehabilitation	NQI	New Qualified Immigrants
CEC	Certified Enrollment Counselor	OAM	Oracle Access Manager
CEE	Certified Enrollment Entities	OBIEE	Oracle Business Intelligence Enterprise Edition
CEW	County Eligibility Worker	OIM	Oracle Identity Manager
CFS	Carry Forward Status	OPA	Oracle Policy automation
CIN	Client Index Number	PAI	Projected Annual Income
CMI	Current Monthly Income	PBE	Plan Based Enroller
CMS	Centers for Medicare & Medicaid Services	PBPS	Pitney Bowes Presort Services
COR	County of Responsibility	PDF	Portable Document Format
CR	Change Requests	PLR	Policy Level Reporting
CSR	Cost Share Reduction	QDP	Qualified Dental Plan

Glossary			
Acronym	Full Form	Acronym	Full Form
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)	QHP	Qualified Health Plan
CSV	Comma Separated Value	RDP	Registered Domestic Partner
DER	Determination of Eligibility Response	ROP	Reasonable Opportunity Period
DHCS	Department of Health Care Services	RTC	Rational Team Concert
DIVS	Document Imaging and Verification Solution	SA	Subject Area
DWH	Data Warehouse	SAWS	Statewide Automated Welfare Systems
ECM	Electronic Content Management System	SCIN	Statewide Client Index Number
EDD	Employment Development Department	SCR	Service Centre Representative
EDI	Electronic Data Interchange	SFTP	Secured File Transfer Protocol
EDR	Eligibility Determination Request	SIR	Service Investigation report
EERC	Eligibility Evaluation Reason Code	SLCSP	Second Lowest cost silver plan
EPO	Exclusive Provider Organization	SNOW	Service Now
ESI	Employer Sponsored Insurance	SQL	Structure Query Language
ETL	Extract, Transform and Load	SSA	Social Security Administration
FDSH	Federal Data Services Hub	SSN	Social Security Number
FIPS	Federal Information Processing Standard	STNA	Short Term Negative Action
FPL	Federal Poverty Level	UAT	User Acceptance Test
FTB	Franchise Tax Board	UPW	Unplanned Pregnant Woman
FTI	Federal Tax Information	URL	Uniform Resource Locator
FTR	Failure to Reconcile	USPS	United States Postal Service
GI	Get Insured	VLP	Verify Lawful Presence
IAP	Insurance Affordability Programs	WAT	Web Accessibility Toolbar
ICT	Inter County Transfer	WCC	Web Center Content
IDD	Interface Definition Document	WP	Work Products
IMM	Immigrant	WSDL	Web Services Descriptor Language
IRS	Internal Revenue System	High Dated	The record/data end date is set far off into the future with a pseudo date, such as the year 2500.