

Executive Summary

CalHEERS Feature Release 16.9 (to be deployed on 09/26/2016) contains the following:

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

- Cross-Business Area
- Technology
- Eligibility & Enrollment
- Plan Management
- Marketing
- eHIT

Key System Updates that have been deployed in this release:

- Technology
- Eligibility & Enrollment
- Financial Management
- Consumer Assistance
- Member Management
- Plan Management
- Federal Request

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

- eHIT
- Eligibility
- Enrollment-Financial Management
- Online Application
- Reports
- Security

Alternate Procedures that have been provided with this release:

No Longer in Effect with this release

- Online Application
- Enrollment-Financial Management
- Security

New with this release

- None

Purpose and Scope

This document describes the content of the CalHEERS Feature Release 16.9. 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 |
|---|----------------|--|--|--|
| Cross-Business Area | | | | |
| Discontinue/Disenrollment failed citizenship/lawful presence/deceased/incarceration over 95 days | | | | |
| 27819 | Change Request | This functionality did not previously exist. | <p>The CalHEERS system will now run a batch to discontinue program eligibility and disenroll consumers in a Covered California Plan (CCP) that were re-run through the FDSH for incarceration, citizenship, lawful presence, and deceased in an Insurance Affordability Program or an Unsubsidized application, that had verification pending over 95 days.</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> • The View Case History button has been added to the <i>Individual homepage</i>. • New snippets have been added to the <i>Eligibility Results</i> page. • Eligibility Determination – Reasonable Opportunity Period (ROP). ROP has been added as a Transaction Name on the <i>Transaction History</i> page. • The <i>Outstanding Verification</i> page has been added. • The <i>Personal Verification</i> page has Name and Date of Birth as table headers and are no longer editable attributes. • The <i>Personal Verification</i> page has Reasonable Opportunity Expiration Date column as non-editable. <p>New ROP eligibility evaluation reason codes for citizenship, lawful presence, deceased, and incarceration are added to send to SAWS on DER transaction.</p> | <ul style="list-style-type: none"> • Individual homepage • Eligibility Results • Transaction History • Outstanding Verification • Personal Verification |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|--|---|--|
| Technology | | | | |
| Automate workflow processes for Covered California | | | | |
| 28970 | Change Request | This functionality did not previously exist. | The purpose of this CR is to facilitate the upgrade of the BPM tool to Oracle 12c, enable and configure tool functionality for all roles, and enable the Paper Application, Manual Verification, and SEP Other workflows. | NA |
| Purchase and Deploy GOIP Subscription for OAAM | | | | |
| 65562 | Change Request | This functionality did not previously exist. | The purpose of this CR is to deploy GOIP feature in Oracle Adaptive Access Management (OAAM); with this feature CalHEERS now has the ability to identify user's location and allow/block users from logging in from identified regions and/or countries. | NA |
| Eligibility & Enrollment | | | | |
| Enhanced CalHEERS Functionality for Specific SCR Roles for Manual Overrides | | | | |
| 37095 | Change Request | This functionality did not previously exist. | <p>The purpose of this change request is to enhance CalHEERS functionality to allow specific SCR roles the ability to manually override enrollment data to correct inconsistencies.</p> <p>The following portal changes have been made and will be visible to users with the override enrollment enhanced user role:</p> <ul style="list-style-type: none"> • Enrollment ID will display on the <i>Current Enrollment</i> page and the <i>Enrollment History</i> page. • The Override Search button has been added to the <i>Search Individual</i> page. • The <i>Override Search</i> page has been added. | <ul style="list-style-type: none"> • Current Enrollment • Enrollment History • Search Individual • Override Search |
| Projected Annual Income (PAI) Logic Updates | | | | |
| 40758 | Change Request | This functionality did not previously exist. | Income collection pages in the CalHEERS portal have been updated to collect and accurately process Projected Annual Income (PAI) when entered by the user. | <ul style="list-style-type: none"> • Add Self-Employment Income • Self-Employment Income |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|--|--|
| | | | <p>The following elements have been added to the <i>Add Self-Employment Income</i> page:</p> <ul style="list-style-type: none"> • How often [dropdown] • You can enter your income in the Net income field below if you know how much you make. You can also use this calculator to help determine what to enter. If you selected that you get paid monthly above, be sure to enter monthly income and expense amounts below. If you selected annual income above, be sure to enter your yearly income and expense amounts below. [text] • Enter your Gross Self Employment Income in this field. This is your income before any expenses related to Self-Employment. [field] • Enter your Gross Self Employment Expenses in this field. This is your expenses related to Self-Employment. [field] • If you'd like additional help use this link to determine your Net income (line 31 on the Schedule C). [text] • How much net income (profits after expenses) will this person get from this source this <Frequency> (\$): [field] <p>The following text has been added to the <i>Income Summary</i> page:</p> <ul style="list-style-type: none"> • Based on your current monthly income, we have calculated your annual income to be: \$ <Income value in numericals> • You have stated your Projected Annual Income is: \$ <Income value in numericals> | <ul style="list-style-type: none"> • Income Summary • Expected Income for <year> • Employment Income • Personal Verification |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|--|---|---|
| | | | <p>The following columns have been added to the table on the <i>Expected Income for <year></i> page:</p> <ul style="list-style-type: none"> • Record Created • Record Superseded • For Year <p>The Return to Summary button will now be hidden on the <i>Employment Income</i> and <i>Self-Employment Income</i> pages when records have been modified.</p> <p>The following attributes have been added to the <i>Personal Verification</i> page:</p> <ul style="list-style-type: none"> • Household Income – Subsidy • MAGI Medi-Cal Current Monthly Income • MAGI Medi-Cal Projected Annual Income <p>New verification codes are added for MAGI Medi-Cal Projected Annual Income.</p> <p>Effective begin dates, end dates, and calendar year are also added in CalHEERS-SAWS eHIT interface.</p> | |
| Insurance Affordability Programs Transition Automation Enhancements | | | | |
| 46047 | Change Request | This functionality did not previously exist. | <p>This change is intended to address current gaps in functional and technical design by:</p> <ul style="list-style-type: none"> • enhancing the timing by which APTC/QHP eligibility and enrollment is terminated, • implementing a new notice to inform consumers about the transition from Covered CA programs to Medi-Cal, and • Enhancing reports available to Covered CA, DHCS, and Counties to monitor individuals/cases who | <ul style="list-style-type: none"> • Eligibility Results • Budget Worksheet |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|---|----------------|--|---|---|
| | | | <p>have been found Medi-Cal eligible by CalHEERS.</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> • New snippets have been added to the <i>Eligibility Results</i> page. • In “Carry Forward” transition? has been added to the <i>Budget Worksheet</i> page. <p>CalHEERS-SAWS interface added data elements at the individual level to support the IAP transition process and SAWS notice generation.</p> <p>New Eligibility Evaluation Reason Code is added corresponding to Carry Forward Status.</p> | |
| Dup App – Long Term CR - Provide Functionality to Close Identified Multiple/Duplicate Cases Created by Consumers | | | | |
| 52314 | Change Request | This functionality did not previously exist. | <p>CR 52314 provides for the ability to close user-identified multiple/duplicate cases. This functionality is provided via the CalHEERS Portal by administrative pages that allow users of the system with specific security privileges to close out the identified cases.</p> <p>Consumers are messaged, after authenticating their credentials, of their case as an identified multiple/duplicate case. The screen provides language of the cases’ current case situation.</p> <p>The functionality of the design calls for the modification of outbound transaction behavior to SAWS by suppressing an unsolicited transaction to the SAWS for the action of closing a case. From the inbound transaction path from SAWS to CalHEERS, business validation is put in place to prevent</p> | <ul style="list-style-type: none"> • Individual homepage • Case Status • Search Individual • Household Verifications • Personal Verification |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|---|----------------|
| | | | <p>incoming transactions associated to these closed cases from having effect. New eHIT Business Validations are added in CalHEERS-SAWS interface.</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> • The <i>Attention</i> popup (aka <i>Case Closed by Admin</i> popup or <i>Case Closure</i> popup) will display on the <i>Individual homepage</i> if the case is in Closed – Duplicate status. • The <i>Case Status</i> page has been created so that an admin can change a case from Open to Closed to prevent a user from accessing a case that has been flagged as a duplicate. • The following changes have been made on the <i>Search Individual</i> page: <ul style="list-style-type: none"> ○ The Manual Verification button will now display when a case is in Closed-Duplicate status. ○ The Manual Eligibility button will now be disabled if the case has been closed as a duplicate case. ○ The View Access Code button will now be disabled if the case has been closed as a duplicate case. ○ The Change Plan Effective Dates button will now be disabled if the case has been closed as a duplicate case. • The Redetermine Eligibility button on the <i>Household Verifications</i> page will now be disabled when a case is closed for being a duplicate. • The Save button on the <i>Personal Verification</i> page will now be disabled when a case is closed for being a duplicate. | |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|--|--|--|
| Pregnant Women Enrolled in QHP to remain in QHP with option to transition to Medi-Cal | | | | |
| 59947 | Change Request | This functionality did not previously exist. | <p>The purpose of this CR is to add functionality in CalHEERS to allow certain pregnant women to retain their current Qualified Health Plan (QHP) or to transition to an Insurance Affordability Program (IAP).</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> • The Keep or Switch Coverage link has been added to the <i>Individual homepage</i>, and when clicked on navigates the user to the <i>Keep or Switch Coverage</i> page. • The <i>Keep or Switch Coverage</i> page has been added, which allows pregnant women to switch from a Covered California Plan (CCP) to Medi-Cal, from CCP with premium assistance (APTC) to Medi-Cal Access Program (MCAP), or MCAP to CCP/APTC. • New snippets have been added to the <i>Eligibility Results</i> page. • QHP pregnancy hold applies indicator has been added to the <i>Budget Worksheet</i> page. • The <i>Program Transition Override</i> page has been created so that admins can return the consumer to their previous eligibility if they're accidentally transitioned into the incorrect program. <p>A new Eligibility Evaluation Reason Code is added, and a Data Element is renamed in CalHEERS-SAWS interface.</p> | <ul style="list-style-type: none"> • Individual homepage • Eligibility Results • Keep or Switch Coverage • Budget Worksheet • Program Transition Override |
| 2017 Renewals Enhancements | | | | |
| 59948 | Change Request | This functionality did not previously exist. | Additional CalHEERS optimizations have been implemented for consumers who participate in renewals for 2017. This CR includes multiple enhancements to | <ul style="list-style-type: none"> • Income Introduction |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|--|--|
| | | | <p>improve the consumer experience during renewals.</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> • The text on the <i>Income Introduction</i> page has been updated. • Text on the <i>Expected Income for <year></i> page has been updated to show a dynamic date. • Text on the <i>Income Details</i> popup has been updated to show a dynamic year. • Text on the <i>Change Individual Expected Amount</i> popup has been updated to show a dynamic year. • Text on the <i>Update Expected Household Income for <year></i> popup has been updated to show a dynamic year. • The Maintaining your Verification section on the <i>Application Signature</i> page will no longer display if the application type is unsubsidized. • A new table has been added to the <i>Application Signature for Reported Changes</i> page that displays the following: <ul style="list-style-type: none"> ○ Type of Change ○ Change Element ○ Old Value ○ New Value ○ Reason ○ Event Date • The <i>This isn't an application for health coverage</i> popup (aka <i>Preview Coverage Warning</i> popup) has been created and will display when loading the <i>Preview Plans</i> page. | <ul style="list-style-type: none"> • Expected Income for <year> • Application Signature • Application Signature for Reported Changes • Preview Plans |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------------------------------|----------------|--|--|---|
| Plan Management | | | | |
| Cross Functional Dental | | | | |
| 60481 | Change Request | This functionality did not previously exist. | <p>In an effort to optimize the current dental experience for consumers, this change request:</p> <ul style="list-style-type: none"> • Allows a consumer to shop for a dental plan anytime that they can shop for a health plan. • Enables reenroll functionality in all scenarios (unless otherwise confirmed by CalHEERS as currently existing functionality). • Allows for passive and active renewal into dental plans for plan year 2017 and beyond. • Enables voluntary terminations at the plan-type level. • Removes the Dental Decline button and replaces it with the Opt Out of Dental Insurance button. • Updates notices. <p>The following changes have been made to the <i>Individual homepage</i>:</p> <ul style="list-style-type: none"> • The Select Health/Dental Plan link will now be enabled if 1 or more adult members is CCP eligible or conditionally eligible, it is OEP, and the family has opted out of dental coverage. • The Change Plan link will be disabled if the dental enrollment status is "Pending" or "Enrolled" and there is no QHP enrollment with "Pending" or "Enrolled" status. <p>The following buttons have been added to the <i>Eligibility Results</i> page:</p> <ul style="list-style-type: none"> • Continue Dental Plan Update • Renew Dental Plan • Continue Dental Plan Update • Renew Dental Plan | <ul style="list-style-type: none"> • Individual homepage • Eligibility Results • Household Enrollment Introduction • Dental Plan Selection • Terminate Participation |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|--|----------------|
| | | | <p>The following changes have been made to the <i>Household Enrollment Introduction</i> page:</p> <ul style="list-style-type: none"> • The following text has been added and will display if only 1 member is eligible or conditionally eligible for CCP/APTC/CSR programs OR if selecting only 1 health plan for the household: If you do not wish to include all family members in a dental plan, complete health plan selection first. After choosing a health plan, you will have an opportunity to select which family members to enroll in a dental plan. • The Choose Health & Dental Plans button has been added which when clicked, navigates the user to the plan selection page. • The <i>Dental Only Confirmation</i> popup (aka <i>Dental Only Active</i> popup) has been created so that consumers have to confirm that they only want dental coverage. • The <i>Dental Plan Not Available</i> popup has been created to inform consumers that they must be enrolled in a health plan through Covered California in order to choose a different dental plan. • The information regarding health plan renewal will not display if the system date is prior to the open enrollment period and the household can only renew their dental plan. • The information regarding dental plan renewal has been added and will not display if the household can only renew their health plan. | |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|--|---|---|
| | | | <p>The following changes have been made to the <i>Dental Plan Selection</i> page:</p> <ul style="list-style-type: none"> The Medical Plans w/ Embedded Pediatric Coverage link has been changed from an icon to a link which, when hovered over, displays a table with health insurance plans that include children’s dental coverage. The following revised text displays: Dental plans are optional and do not qualify for financial assistance. Dental plans are billed separately from your health plan and will not be included in your health plan's monthly premium. There is no tax penalty if you do not enroll in a dental plan. <p>The following changes have been made to the <i>Terminate Participation</i> page:</p> <ul style="list-style-type: none"> A checkbox was added next to the Program listed that allows users to terminate by plan type (i.e., health or dental). | |
| Plan Year 2017 - Adding New Issuer(s) and Extending standard payment WSDL | | | | |
| 60289 | Change Request | This functionality did not exist previously. | CalHEERS now allows annual addition of health or dental issuer(s) and displays the applicable plan data, at Covered California’s discretion, and provides the functionality to extend or remove the standard payment WSDL service to existing or new issuer(s). | NA |
| Marketing | | | | |
| Update CalHEERS to Include Consumer Consent to Share PII With Any Covered CA Certified Representative | | | | |
| 60571 | Change Request | This functionality did not previously exist. | The goal of this change request is to implement a business policy that allows consumers the opportunity to opt in or out of having their information shared for program purposes. | <ul style="list-style-type: none"> Application Signature Application Signature for Reported Changes |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|--|---|--|
| | | | <p>The following changes have been made to the <i>Application Signature</i> page, the <i>Application Signature for Reported Changes</i> page, and the <i>Signature for Renewal</i> page:</p> <ul style="list-style-type: none"> The Consent to Receive Text Messages and Calls section has been added. The <i>Phone Number Reminder</i> popup has been created and will display if the Primary Contact clicks on the Yes radio button for Click Yes to receive text messages and calls about your health care coverage and has not provided a phone number on the <i>My Profile</i> page. <p>The following changes have been made to the <i>Contact Information</i> page:</p> <ul style="list-style-type: none"> The Click Yes to receive text messages and calls about your health care coverage radio buttons have been added. The following text has been added: By clicking Yes, I consent to receive autodialed and pre-recorded calls and/or text/SMS messages at the telephone number I provided (including my cell phone number), from or on behalf of Covered California. I understand this is not a condition of purchase, and that message and data rates may apply. | <ul style="list-style-type: none"> Signature for Renewal Contact Information |
| eHIT | | | | |
| R16.9 Change Request Schema Impact Technical Implementation for External Partners | | | | |
| 61123 | Change Request | This functionality did not previously exist. | This CR has been implemented to update the CalHEERS SAWS eHIT schema to version 6.0 to align with functional changes in the 16.9 release. | NA |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|--|----------------|
| | | | <p>CR27819: New ROP eligibility evaluation reason codes are created to send to SAWS on DER transaction:</p> <ul style="list-style-type: none"> • CI - Reasonable Opportunity Period Citizenship • IR - Reasonable Opportunity Period Non-Incarceration • LP - Reasonable Opportunity Period Lawful Present • DC - Reasonable Opportunity Period Non-Deceased <p>CR 47058: CalHEERS-SAWS eHIT interface will populate the following verification codes for MAGI Medi-Cal Projected Annual Income:</p> <ul style="list-style-type: none"> • INC - MAGI Medi-Cal Current Monthly Income • PAI - MAGI Medi-Cal Projected Annual Income <p>Effective begin dates, end dates, and calendar year are also added in CalHEERS-SAWS eHIT interface.</p> <p>The following Verification Type attribute is deprecated. CalHEERS will not send or accept this element.</p> <ul style="list-style-type: none"> • RCB - Reasonable Compatibility <p>CR 46047: CalHEERS-SAWS interface added the following data elements at the individual level to support the IAP transition process and SAWS generated notices:</p> <ul style="list-style-type: none"> • CarryForwardTransitionFlag • CarryForwardBeginDate • IAPTransitionBeginDate • IAPTransitionEndDate • CarryForwardLiftInd | |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|---|----------------|
| | | | <p>The following Eligibility Evaluation Reason Code is added corresponding to Carry Forward Status:</p> <ul style="list-style-type: none"> PO: Program Transition Override – MAGI Medi-Cal to APTC <p>CR52314: The following Business Validations are added in CalHEERS-SAWS interface:</p> <ul style="list-style-type: none"> CalHEERS cannot process the EDR. CalHEERS case is closed. CalHEERS cannot process the Disposition. CalHEERS case is closed. CalHEERS cannot process the Update Inbound. CalHEERS case is closed. <p>CR59947:</p> <ul style="list-style-type: none"> The New Eligibility Evaluation reason Code added in the eHIT system: UP - Unmarried Pregnant Woman Under 21 Disregard. The renamed Data Element: From MCHIPPremium to TitleXXIPremium. | |

Key System Updates

The following summarizes the modified features included in this release.

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|---|----------------|--|---|----------------|
| Technology | | | | |
| CalHEERS Header and Footer Provided by CoveredCA.com | | | | |
| 58014 | Change Request | The headers and footers on v.calheers.ca.gov and CoveredCA.com | The headers and footers on v.calheers.ca.gov and CoveredCA.com are in sync as they are now maintained solely by Covered California. | NA |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|---|----------------|---|---|---|
| | | were out of sync as they were maintained by CalHEERS and Covered California, respectively. | | |
| Onboarding of new UHC (United Healthcare) EDI Vendor | | | | |
| 73336 | Change Request | CalHEERS system was directly connected to United Healthcare (UHC) for Electronic Data Interchange (EDI) | <p>This CR facilitates the onboarding of new UHC vendor, Health Plan Service (HPS) who has been partnered by UHC for EDI. Below mentioned support has been provided to establish connectivity between CalHEERS and HPS.</p> <ul style="list-style-type: none"> • Bi-directional exchange of X12 (834) files with UHC via HPS • Connection to both test and production systems • Replaced the connectivity to UHC by connecting HPS directly to CalHEERS system • CalHEERS system sends files via Secured File Transfer Protocol (SFTP) and carriers are responsible for securing their SFTP site. | NA |
| Eligibility & Enrollment | | | | |
| Implement End of Month Terminations | | | | |
| 46384 | Change Request | <p>Consumers were allowed to select any midmonth date as their termination or end of coverage date as long as it was more than 14 days from the current date.</p> <p>The life event date was taken as the literal termination date instead of</p> | <p>The current system implementation of termination dates has been updated to align with policy guidance and to enhance system rules around reporting changes on a case with a future-dated termination.</p> <p>Termination dates will be defaulted to the end of the month in consideration of the 14 day rule (while still maintaining SCR rules for exception handling).</p> <p>The following portal changes have been made:</p> | <ul style="list-style-type: none"> • Enrollment History • Application Signature for Reported Changes • Terminate Participation |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|--|---|----------------|
| | | <p>applying correct termination rules. When a service center representative (SCR) reported a life event date (SEP), the system used the current date instead of defaulting the termination date to the end of the month.</p> <p>Users were also allowed to report a change on cases that had a future-dated termination. Although changes on terminated cases were allowed within the portal, these updates were never transmitted to Carriers since the case was in a terminated status.</p> <p>In certain scenarios for pending enrollments, if a consumer reported a change to their account, then the system sent a sequence of transactions including a termination</p> | <ul style="list-style-type: none"> • The Termination Reason column has been added to the Member Details table on the <i>Enrollment History</i> page and will display if the enrollment has at least one member in cancelled/terminated status, or the enrollment is cancelled/terminated. • New text including the effective termination date for the removed member(s) has been added to the <i>Application Signature for Reported Changes</i> page and will display when a household member is removed. • The Effective Date field on the <i>Terminate Participation</i> page was revised to the Date field, and explanatory text was added to describe that the effective termination date will be based on the date entered in the Date field. • Termination Date selections were added to the <i>Terminate Participation</i> page. | |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|-----------------------------------|----------------|---|---|---------------------|
| | | <p>followed by an enrollment with the termination actually being a cancellation in coverage back to the coverage start date. This created a gap in coverage. This outcome was paralleled in scenarios where the SCR terminated participation on Pending enrollments when the intention was not to cancel coverage back to the coverage start date but to terminate coverage with some active segment of enrollment for that policy.</p> | | |
| APTC recalculation updates | | | | |
| 47370 | Change Request | <p>Depending on the application date, the correct eligible APTC amount for the benefit year did not always display. When recalculating the APTC during the benefit year, APTC already authorized was not considered, which may have</p> | <p>The calculation for APTC has been updated to more accurately reflect the consumer’s APTC based on the number of applicable coverage months for the household in the benefit year and accommodating benchmark premiums that vary by month.</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> • New snippets have been added to the <i>Eligibility Results</i> page. | Eligibility Results |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|---|---|---|
| | | resulted in an inaccurate APTC calculation. | | |
| Get Insured (GI) 2.0 Integration Services | | | | |
| 57637 | Change Request | Get Insured 1.0 was in use. | <p>Get Insured 2.0 (GI 2.0) is in use. In addition to upgrading the 1.0 modules, GI 2.0 includes new modules available for use by CalHEERS. GI 2.0 will also include updates to existing GI portal pages.</p> <p>Module: Individual Comparison Shopping Suite</p> <ul style="list-style-type: none"> • Improved shopping experience • Advanced Tile View • Enhanced plan compare feature • Advanced filters and sort for viewing health and dental plans • Add to cart Lightbox to encourage dental shopping • Plan Preview integrated with post-application Plan Selection • Quality Ratings on a 5-star system, with configurable sub-category display • Configurable Lightbox message pop-ups for disclaimers/instructions prior to checkout • Integrated dental shopping • Includes Family and Pediatric dental • Preview Plan for dental <p>Module: Enrollment Management Suite</p> <ul style="list-style-type: none"> • Automatic effectuation of Special Enrollment changes • Transmission of Agent of Record Changes • Automated processing of Life Change events | <p>All GI pages:</p> <ul style="list-style-type: none"> • Getting Started - Shop For Health Plans • Find a Plan • Plan Comparison • Plan Details • Checkout – Cart • Checkout - Provide eSignature • Checkout – Confirmation |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--------|------|-------------------------|---|----------------|
| | | | <ul style="list-style-type: none"> • Enhanced auto-renewal flow to support improved performance <p>Module: Agent/Certified Enrollment Counselor Management Suite</p> <ul style="list-style-type: none"> • Significant usability enhancements to improve operational efficiency • Book of Business display to include enrollee, plan coverage, and eligibility details • Rich set of filter/sorting options, including due dates, plan, coverage, consumer • Download Book of Business in excel from Agent/CEC Portal – Work offline • Consolidated tracking of designation history to enable accurate reporting of Agents • Enhanced administrative function to manage CECs within and across Entities • Bulk transfer of consumers to another CECs within the same Entity <p>Module: Insurer Management Suite.</p> <ul style="list-style-type: none"> • Feature enhancements to improve operational efficiency: • “Shop as a Consumer” view from Issuer Portal to help facilitate self-service verification of QHP and Dental plans by the Issuers • Bulk update of plan certifications or verifications • Bulk download of Plan Benefits and Rates to facilitate offline verification <p>Module: Plan Management Suite</p> | |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|---|----------------|--|---|--|
| | | | <ul style="list-style-type: none"> Plan Service Area file download – Work offline, reconcile rating area mapping to zip codes <p>Module: Exchange Administrator Suite.</p> <ul style="list-style-type: none"> GI 2.0 platform architecture improvements Error Handling Framework to display user-friendly error messages (instead of 0000 error message) and better logging of error reasons Batch Infrastructure – Dynamic Batch Scheduling like 834 generation | |
| Apply MAGI Medi-Cal Effective Date Rules Year Round (including during Open Enrollment) | | | | |
| 59949 | Change Request | CalHEERS determined eligibility start/begin dates for IAP applications submitted through the CalHEERS portal during a Covered California open enrollment period to begin January first of the upcoming year. | <p>The purpose of this CR is to correct CalHEERS MAGI Medi-Cal start/begin dates to ensure that consumers determined initially eligible for MAGI Medi-Cal are effectuated during Open Enrollment and when adding a member during Covered CA Renewals.</p> <p>The following portal changes have been made:</p> <ul style="list-style-type: none"> When the Apply Now button is clicked on the <i>Individual homepage</i> during open enrollment, the household will be evaluated for MAGI Medi-Cal effective the month of application, and then a second determination will be performed for the open enrollment year for any non-Medi-Cal individuals. The maintain mode (Report a Change mode) of the <i>Individual homepage</i> will always be shown to a case that has only an active Medi-Cal enrollment unless they are in | <ul style="list-style-type: none"> Individual homepage Household Enrollment Introduction Household Enrollment Summary |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|---|---|----------------|
| | | | <p>renewal mode; the Apply Now mode will not display for these cases during open enrollment.</p> <ul style="list-style-type: none"> The following text has been added to the <i>Household Enrollment Introduction</i> page and the <i>Household Enrollment Summary</i> page, and will display when the individual is evaluated for the current year and for the open enrollment year in successive eligibility runs, and if the page is in the context of the open enrollment year: Your eligibility has also been evaluated for <current_benefit_year>. You are able to select a plan for that year by returning to your home page. | |
| MCAP Aid Code, OE Effective October 1, 2016 | | | | |
| 65541 | Change Request | Effective October 12, 2015, the California Healthcare Eligibility, Enrollment, and Retention System (CalHEERS) determined eligibility for the Medi-Cal Access Program (MCAP) and assigned aid code OD to eligible pregnant women. | Effective October 1, 2016, new applicants or renewals who are determined MCAP eligible/pending eligible will integrate into the Medi-Cal Managed Care delivery system, with aid code OE to mirror the full-scope pregnancy aid code, M7. | NA |
| Financial Management | | | | |
| Retroactive Billing for Per-Member Per-Month (PMPM) | | | | |
| 43965 | Change Request | The PMPM billing schedule invoiced Carriers in advance of the enrollment coverage period. Covered California | The purpose of this change request is to update the current PMPM billing schedule to invoice Carriers in arrears rather than in advance of the enrollment coverage period. | NA |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|--|----------------|--|---|----------------|
| | | billed Carriers in advance of the enrollment coverage month (e.g. April 15th for the May 1st –May 31st enrollment period). | The CalHEERS system bills Carriers an assessment fee in arrears for the previous month of coverage. For example, on April 15th when the PMPM billing cycle completes, the invoices generated to the Carriers should reflect and bill for the per-member-per-month count for the March 1 - March 31, enrollment coverage period. | |
| Change Per-Member Per-Month (PMPM) Billing to Percentage of Premium | | | | |
| 60324 | Change Request | The Accenture Billing Engine (ABE) generated invoices for Carriers based on a flat rate Per-Member Per-Month (PMPM) rate that was the same for all Carriers. | <p>The intended outcomes of this change are:</p> <ul style="list-style-type: none"> For ABE to generate invoices based on a percentage of the consumer's premium amount instead of a PMPM amount. For ABE to have the functionality to specify a different percentage amount for each Carrier each year. For ABE to maintain functionality to run retroactive additions and terminations on the current bill, including by PMPM for 2014-2016. For ABE to update the Member Level Detail Report to reflect the percentage amount calculation, along with reflecting historical information (e.g., by PMPM, etc.). | NA |
| Consumer Assistance | | | | |
| My Profile page changes for Get Insured (GI) users | | | | |
| 45954 | Change Request | <p>GI users were able to do the following things on the <i>My Profile</i> page:</p> <ul style="list-style-type: none"> Click on the Update Consent for Verification left navigation button and | <p>The following changes have been made to the <i>My Profile</i> page:</p> <ul style="list-style-type: none"> The Update Consent for Verification left navigation button will now be disabled for all Get Insured (GI) roles (Certified Enrollment Entities, Enrollment Entity Admin, Agents, Agent Managers, Plan Admin, Issuer Admin, and Issuers) | My Profile |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|---|----------------|--|---|----------------|
| | | <p>navigate to that page</p> <ul style="list-style-type: none"> Edit the following fields: <ul style="list-style-type: none"> First Name Last Name Street Address 1 Street Address 2 City State Zip Code Email Phone Number <p>In addition, if Email Address or Cell Phone Number changed in GI pages, users were not required to reset One Time Passcode.</p> | <ul style="list-style-type: none"> The following fields will now display as read-only fields for Certified Enrollment Entities, Certified Enrollment Counselors, Agents, and Issuers: <ul style="list-style-type: none"> First Name Last Name Street Address 1 Street Address 2 City State Zip Code Email Phone Number If Email Address changed in GI pages and an update has been received from IND35, remove prepopulated email address and require user to reset One Time Passcode If Cell Phone Number changed in GI pages and an update has been received from IND35, remove prepopulated cell phone number and require user to reset One Time Passcode | |
| Member Management | | | | |
| Book of Business Updates (Agent Extract Changes) | | | | |
| 56038 | Change Request | <p>Agents were not informed when someone made changes to cases on their book of business that may have required agent support.</p> | <p>By implementing this CR, agents will be better informed about their caseload, and will be able to more quickly reach out to consumers who need enrollment assistance.</p> <p>Specifically, agents will acquire a periodic extract/report that will inform agents when their consumers, SCR/CEWs, or the system make changes to enrollment status or eligibility; withdraw an application; report a change; or upload a verification or document.</p> | NA |

| Ref ID | Type | Previous Design/Problem | New Functionality In this Release | Pages Impacted |
|---|----------------|--|---|----------------|
| Plan Management | | | | |
| AHBX Plan Preview page updates | | | | |
| 67089 | Change Request | Covered California leveraged an independent Shop and Compare tool which allowed users to determine a preliminary eligibility and shop and compare for plans. This tool did not integrate with the CalHEERS application, eligibility or enrollment modules. Consumers were not navigated to the CalHEERS plan preview pages since they did not meet the Covered California business need. | In order to ensure a seamless consumer experience with the migration to the Get Insured (GI) 2.0 platform, and to eliminate Covered California management of duplicative consumer tools, the <i>Preview Plans</i> page has been updated as follows: <ul style="list-style-type: none"> The following text has been added: Enter the AGE of each person, whether they are enrolling or not. Uncheck the Enrolling box next to the age for those household members not enrolling. Enrolling checkboxes have been added next to each household member. | Preview Plans |
| Federal Request | | | | |
| 1095 Reporting in the month of termination for non-payment | | | | |
| 60493 | Change Request | When a consumer was terminated by a Carrier due to non-payment of premium, the 1095-A Part III displayed Gross Premium and APTC amounts for the last month of coverage. | When a consumer is terminated due to non-payment of premium, the 1095-A Part III will include APTC amount and zero out the Gross Premium for last month. This will allow the IRS to hold consumers accountable for APTC amounts paid to Issuers in the month of termination (due to non-payment). | NA |

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 |
|--------------------|------------|--|--|----------------|
| eHIT | | | | |
| 26824 | Defect Fix | When multiple Statewide Automated Welfare Systems (SAWS) initiated Eligibility Determination Requests (EDR/EDR-C) were processed within a short span of time, some of the EDRs returned an exception error. | When multiple SAWS initiated EDR/EDR-Cs are processed within a short span of time, all EDRs are processed successfully. | NA |
| 29112 | Defect Fix | The e-mail notice batch jobs did not pickup records for sending e-mails. <ul style="list-style-type: none"> EML-1000-DD-03 EML-1000-DD-04 EML-1000-DD-01 EML-1000-DD-02 | The e-mail notice batch jobs picks up records for sending e-mails. <ul style="list-style-type: none"> EML-1000-DD-03 EML-1000-DD-04 EML-1000-DD-01 EML-1000-DD-02 | NA |
| 29743 | Defect Fix | Multiple SAWS_SERIAL_NUM_IDENTIFIER were present per INDV_CASE_ID in HBX_INDV_CASE_SAWS. | Unique SAWS_SERIAL_NUM_IDENTIFIER is present per INDV_CASE_ID in HBX_INDV_CASE_SAWS. | NA |
| Eligibility | | | | |
| 27408 | Defect Fix | There were records in HBX_INDV_CASE_ELIG table with BGN_DT prior to year 2013. | There are no records in HBX_INDV_CASE_ELIG table with BGN_DT prior to year 2014. | NA |
| 27792 | Defect Fix | There were no high-dated active eligibility records for 209k individuals, and multiple high dated records for 906 individuals. | There are no discrepancies in high-dated active eligibility and multiple high dates records for individuals. | NA |
| 29212 | Defect Fix | Solicited Determination of Eligibility Response (DER) did not contain the Soft Pause Lift evaluation reason for Soft Pause Lift. | Solicited DER contains the Soft Pause Lift evaluation reason for Soft Pause Lift. | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--|------------|--|---|---|
| 29930 | Defect Fix | When a user in the Medi-Cal Eligibility Determination System (MEDS) decreased income by performing a Report a Change (RAC) to Modified Adjusted Gross Income (MAGI) limits, they received incorrect Eligibility Results. | When a user in MEDS decreases the income to MAGI limits, the correct Eligibility Results are displayed. | NA |
| 26644 CR 59677 | Defect Fix | When an admin marked a Former Foster Youth (FFY) status verification as "Failed," CalHEERS determined user either eligible for Insurance Affordability Programs (IAP) or M1. | When an admin marks the FFY status verification as "Failed," user continues to be eligible for 4M until negative action is applied by an admin. | NA |
| Enrollment-Financial Management | | | | |
| 27625 | Defect Fix | JAWS Contrast Analyzer failed for buttons on All GI pages. | JAWS Contrast Analyzer passes for buttons on All GI pages. | All GI pages (Getting Started - Shop For Health Plans Find a Plan Plan Comparison Plan Details Checkout – Cart Checkout - Provide eSignature checkout – confirmation) |
| 27414 | Defect Fix | JAWS did not read the Left Navigation plan progress bar on All GI pages. | JAWS reads the Left Navigation plan progress bar on All GI pages. | All GI pages (Getting Started - |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|--|---|
| | | | | Shop For Health Plans Find a Plan Plan Comparison Plan Details Checkout – Cart Checkout - Provide eSignature checkout – confirmation) |
| 28150 | Defect Fix | Premium Assistance amount displayed the value after decimal value as zero (0) on all GI pages. | Premium Assistance amount displays the numerical value after decimal value on all GI pages. | All GI pages (Getting Started - Shop For Health Plans Find a Plan Plan Comparison Plan Details Checkout – Cart Checkout - Provide eSignature checkout – confirmation) |
| 29750 | Defect Fix | When a user reported changes to household income and clicked the | When a user reports a change to household income and clicks the Submit button on the | Application Signature for |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|--|---------------------|
| | | Submit button on the <i>Application Signature for Reported Changes</i> page, an exception error message displayed. | <i>Application Signature for Reported Changes</i> page, the <i>Eligibility Results</i> page displays. | Reported Changes |
| 27604 | Defect Fix | JAWS did not read the collapse estimate costs while collapsing the estimate costs on the <i>Compare Preference</i> page. | JAWS reads the collapse estimate costs while collapsing the estimate costs on the <i>Compare Preference</i> page. | Compare Preference |
| 29763 | Defect Fix | When a user clicked the Choose a Health Plan button on the <i>Eligibility Results</i> page, an exception error message displayed. | When a user clicks the Choose a Health Plan button on the <i>Eligibility Results</i> page, the <i>Plan Selection Date</i> popup window displays. | Eligibility Results |
| 28453 | Defect Fix | When a user clicked the Choose Health Plan button on the <i>Eligibility Results</i> page after reporting a change to income, the following error message was displayed “Your request cannot be processed at this time. Please contact the help desk to request your change” | When a user clicks the Choose Health Plan button on the <i>Eligibility Results</i> page after reporting a change to the income, the <i>Plan Selection Date</i> popup window displays. | Eligibility Results |
| 27626 | Defect Fix | Below mentioned were JAWS-related issues on the <i>Find a Plan</i> page when navigated through arrow keys: <ul style="list-style-type: none"> The checkbox options for Filter By dropdown read the word Menu twice. The disabled arrows were read thrice. | Below mentioned are JAWS related fixes on the <i>Find a Plan</i> page while navigating through arrow keys: <ul style="list-style-type: none"> The checkbox options for Filter By dropdown reads the word Menu only once. The disabled arrows are read only once. | Find a Plan |
| 27183 | Defect Fix | When an enrollment was not processed, the following generic message “your enrollment could not be processed error | When an enrollment is not processed, the <i>GI e-Signature</i> page displays the following error message “your enrollment could not be processed error code: | GI e-Signature |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|--|---|-----------------------------------|
| | | code: 000" was displayed on the <i>GI e-Signature</i> page. | <p>000" along with the specific reason from the list below.</p> <ul style="list-style-type: none"> • Merge Case (Caseid, memberId Mismatch etc.). • Enrollment Type/Maintenance Reason Mismatch. • Mismatch of soft deleted flag in hbx_indv_plan_enrl and hbx_indv_plan_members table. • Enrollment status not in Sync with HBX and GI. • Incorrect enrollment Coverage Start date and Coverage end date. • Member not found on GI side with provided member identifier. • When details of the case doesn't match in GI like Address, ZIP code etc. • Member doesn't exist on GI when continue health plan is done for the existing enrollment id. | |
| 26843 | Defect Fix | When a user clicked the Continue button after entering the Plan Selection Date in the <i>Plan Selection Date</i> popup on the <i>Household Enrollment Introduction</i> page, a "We Apologize" error message displayed. | When a user clicks the Continue button after entering the Plan Selection Date in the <i>Plan Selection Date</i> popup on the <i>Household Enrollment Introduction</i> page, the <i>Shop for Health Plans</i> page displays. | Household Enrollment Introduction |
| 29476 | Defect Fix | When a user clicked the Continue button on the <i>Individual Payment Box</i> popup on the <i>Household Enrollment Summary</i> | When a user clicks the Continue button on the <i>Individual Payment Box</i> popup on the <i>Household Enrollment Summary</i> | Household Enrollment Summary |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|--|-------------------|
| | | page, a new window opened to the <i>Individual Homepage/Administration Homepage</i> . | page, a new window opens to the <i>Payment Process</i> page. | |
| 28096 | Defect Fix | When a user clicked the Find County Office button on the <i>Locate Assistance</i> page, a blank screen was displayed when accessed on Chrome browser. This issue was intermittent on Firefox browser. | When a user clicks the Find County Office button on the <i>Locate Assistance</i> page, the California Department of Health Care Services (DHCS) page is displayed on both Chrome and Firefox browsers. | Locate Assistance |
| 27340 | Defect Fix | When a user was terminated, the AHBX database updated the status as "Cancel" with the Coverage End Date being the Coverage Start Date ; however, the GI database updated the status as "Term" with the Coverage End Date being the Effective Date mentioned on the <i>Terminate Participation</i> page. | When a user is terminated, both the AHBX and GI databases have the same status and Coverage End Date . | NA |
| 19639 | Defect Fix | When a user removed the middle name, the AHBX database updated the middle name as NULL; however, the GI database persisted the previous values. | When a user removes the middle name, both the AHBX and GI databases update the middle name as NULL. | NA |
| 21164 | Defect Fix | When a member was added to an already effectuated enrollment, the AHBX database updated the enrollment status as "Enrolled"; however, the GI database updated the enrollment status as "Pending." | When a member is added to an already effectuated enrollment both the AHBX and GI databases update the enrollment status as "Enrolled." | NA |
| 15147 | Defect Fix | Get Insured (GI) invoked multiple IND21 for every | GI invokes one IND21 for all members in the enrollment. | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|--|---|----------------|
| | | member in the enrollment. | | |
| 27648 | Defect Fix | Batch Job PR1_GI_834_OUT_XML_TO_EDI_* reported incorrect Advance Premium Tax Credits (APTC) effective dates for cases where a user had reported a change and chosen a new plan. | Batch Job PR1_GI_834_OUT_XML_TO_EDI_* reports the correct APTC effective dates for cases where a user reports a change and chooses a new plan. | NA |
| 28217 | Defect Fix | Approximately 6648 enrollments had multiple subscriber ids. This impacted Data Warehouse reporting. | All enrollments have only one subscriber id per enrollment. | NA |
| 28574 | Defect Fix | When an enrollment was terminated, the AHBX database updated the status as "Terminated," with the termination date being the earliest coverage start date amongst the household members; however, the GI database updated the status as "Cancelled" with the cancelled date being the Coverage start date of the individual. | When an enrollment is terminated, both the AHBX and GI databases update the status as "Terminated" with the termination date being the Coverage start date of the individual. | NA |
| 28774 | Defect Fix | When IND21 was received with the Coverage End Date being earlier than the Coverage Start Date, the AHBX database updated the Coverage End date to be the same as the Coverage Start date. | When IND21 is received with the Coverage End Date being earlier than the Coverage Start Date, the AHBX database rejects IND21 without processing the transaction. | NA |
| 28513 | Defect Fix | Approximately 18k enrollees had duplicate records in the GI database enrollment table. | There are no duplicate enrollee records in the GI database enrollment table. | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|--|--------------------|
| 29361 | Defect Fix | There were some records in the GI database with NULL as the user id in the Enrollee table. | All records in the GI database have valid user ids in the Enrollee table. | NA |
| 29446 | Defect Fix | There were 180k records for year 2015 and 98k records for year 2016 with NULL as the auto renewal date in BX_INDV_CASE_RENEWAL for CIT and MIX. | All records have valid auto renewal date in BX_INDV_CASE_RENEWAL for CIT and MIX. | NA |
| 29871 | Defect Fix | IRS Void Batch job updated the incorrect tax year (2015 for 2014) in tax_year for HBX_IRS_1095_RECIPIENT_DATA. | IRS Void Batch job updates the correct tax year in tax_year for HBX_IRS_1095_RECIPIENT_DATA. | NA |
| 28687 | Defect Fix | GI batch job (IND 19) did not update the GI database with the enrollment details from the AHBX database. | GI batch job (IND 19) updates the GI database with the enrollment details from the AHBX database. | NA |
| 28862 | Defect Fix | Approximately 580 records had two enrollment ids for the same enrollment. | All records have one enrollment id for each enrollment. | NA |
| 28439 | Defect Fix | ENR-1000-DD-01 batch job did not populate the LASTMODIFIEDDTM column in HBX_INDV_CASE_RENEWAL table. | ENR-1000-DD-01 batch job populates the LASTMODIFIEDDTM column in the HBX_INDV_CASE_RENEWAL table with correct values. | NA |
| 27666 | Defect Fix | JAWS did not read the checkbox for children dental plans on the <i>Plan Selection</i> page. | JAWS reads the checkbox for children dental plans on the <i>Plan Selection</i> page. | Plan Selection |
| 29775 | Defect Fix | When a user clicked the Choose Dental Plan button on the <i>Plan Selection</i> page, an exception error message displayed. | When a user clicks the Choose Dental Plan button on the <i>Plan Selection</i> page, the <i>Plan Selection Date</i> popup window is displayed. | Plan Selection |
| 27409 | Defect Fix | When a user clicked the Enroll button on the | When a user clicks the Enroll button on the <i>Provide eSignature</i> | Provide eSignature |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|---------------------------|------------|---|--|--------------------|
| | | <p>Provide <i>eSignature</i> page without entering PIN and Signature, Job Access with Speech (JAWS) read the following “The following error have been found : Error 1 Please Enter Your PIN. Error 2: Please Enter Your First & Last Name required” and the focus reached the first textbox (PIN).</p> | <p>page without entering PIN and Signature, JAWS reads the error message “Error 1 Please Enter Your PIN. Error 2: Please Enter Your First & Last Name required” as links, and focus reaches the respective error message textbox upon clicking the link.</p> | |
| 27416 | Defect Fix | Asterisk (*) size on the <i>Provide eSignature</i> page was smaller than other pages. | Asterisk (*) size on the <i>Provide eSignature</i> page is the same size as other pages. | Provide eSignature |
| 27639 | Defect Fix | <p>Below mentioned were issues on the <i>Your Cart</i> page:</p> <ul style="list-style-type: none"> JAWS did not read the column and row number while reading the contents in the table. Upon disabling Cascading Style Sheets (CSS), the Adjust button was displayed as a link and two Close buttons were displayed. | <p>Below mentioned are fixes on the <i>Your Cart</i> page:</p> <ul style="list-style-type: none"> JAWS reads the column and row number while reading the contents in the table. Upon disabling CSS, the Adjust button displays as a button and only one Close button displays. | Your Cart |
| 27277 CR 59677 | Defect Fix | The Premium Assistance amount for subsidized plans was not displayed on the <i>Enrollment History</i> page. | The Premium Assistance amount for subsidized plans is displayed on the <i>Enrollment History</i> page. | Enrollment History |
| Online Application | | | | |
| 29628 | Defect Fix | When a user selected CalFresh and/or CalWORKs for non-magi referrals and clicked the Apply button on the | When a user selects CalFresh and/or CalWORKs for non-magi referrals and clicks the Apply button on the <i>Additional</i> | Additional Options |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|---|--|
| | | <i>Additional Options</i> page, DER-U was not generated. | <i>Options</i> page, DER-U is generated. | |
| 29777 | Defect Fix | When a user reported a change to the address and clicked the Submit button on the <i>Application Signature for Reported Changes</i> page, an exception error message was displayed. | When a user reports a change to the address and clicks the Submit button on the <i>Application Signature for Reported Changes</i> page, the <i>Eligibility Results</i> page is displayed. | Application Signature for Reported Changes |
| 29506 | Defect Fix | When a Children’s Health Initiative Program (CCHIP) worker changed the CCHIP Enrollment Date to the day when CCHIP Conditional Eligibility was determined and clicked the Save button on the <i>CCHIP</i> page, the following validation message “Enrollment date cannot be before eligibility start date” was displayed. | When a CCHIP worker changes the CCHIP Enrollment Date to the day when CCHIP Conditional Eligibility was determined and clicks the Save button on the <i>CCHIP</i> page, the save is successful. | CCHIP |
| 29235 | Defect Fix | The Appeal Decision header under the Important Information & Options section on the <i>Eligibility Results</i> page was not aligned. | The Appeal Decision header under the Important Information & Options section on the <i>Eligibility Results</i> page is aligned. | Eligibility Results |
| 28783 | Defect Fix | Below mentioned were issues on the <i>Household Members</i> page when accessed via Firefox browser: <ul style="list-style-type: none"> • Dropdown list for the Document Type* field were not displayed completely. • Dropdown list for the Please Select the Immigration Status that best applies* field were not displayed completely. | Below mentioned are fixes on the <i>Household Members</i> page when accessed via Firefox browser: <ul style="list-style-type: none"> • Dropdown list for the Document Type* field are displayed completely. • Dropdown list for the Please Select the Immigration Status that best applies* field are displayed completely. • The Horizontal Scroll bar for the Please Select the | Household Members |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|--|---------------------|
| | | <ul style="list-style-type: none"> The Horizontal Scroll bar for the Please Select the Immigration Status that best applies* field dropdown list was missing. | Immigration Status that best applies* field dropdown list is present. | |
| 28202 | Defect Fix | When an admin clicked the Flexible Admin View button in the <i>View Confirmation</i> popup on the <i>Individual Homepage</i> , an exception error message was displayed. | When an admin clicks the Flexible Admin View button in the <i>View Confirmation</i> popup on the <i>Individual Homepage</i> , the application is displayed on the <i>Flexible Application</i> page. | Individual Homepage |
| 28919 | Defect Fix | Notice CalNOD01ab was not generated for cases after renewal. | Notice CalNOD01ab is generated successfully for cases after renewal. | NA |
| 28213 | Defect Fix | Approximately 3k records had multiple high-dated active records in the HBX_INDV_PREGNANT table. This impacted Data Warehouse (DWH) reporting for pregnancy data. | All records have only one high-dated active record in the HBX_INDV_PREGNANT table. | NA |
| 28216 | Defect Fix | Approximately 251 records had multiple high-dated active records in the HBX_INDV_ID_ALIAS table. This impacted DWH reporting for Individual Attributes. | All records have only one high-dated active record in the HBX_INDV_ID_ALIAS table. | NA |
| 28626 | Defect Fix | Approximately 3311 submitted applications had Submit Date as NULL in the SUBMIT_DT table. This impacted DWH reporting for date an application was first submitted in the enrollment year. | All submitted applications have a valid submit date in the SUBMIT_DT table. | NA |
| 29338 | Defect Fix | Approximately 92 records had multiple high-dated active records in the | All records have only one high-dated active record in the | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|--|---|--|
| | | HBX_INDV_CASE_VERIF_CONSENT table. This impacted DWH reporting for consent records. | HBX_INDV_CASE_VERIF_CONSENT table. | |
| 29250 | Defect Fix | When a user attempted to access the Covered California website on multiple tabs, the multi-tab popup displayed in English for a Spanish user, and the popup was not aligned. | When a user attempts to access the Covered California website on multiple tabs, the multi-tab popup displays in Spanish for a Spanish user, and the popup is aligned. | NA |
| 29106 | Defect Fix | The user id for notes entered via the <i>Flexible Application</i> page, reflected the user who first viewed notes on the <i>Notes</i> page. | The user id for notes entered via the <i>Flexible Application</i> page, reflects the user who entered notes on the <i>Flexible Application</i> page when viewed on the <i>Notes</i> page. | Notes |
| 29303 | Defect Fix | When a user reported a change to the response for the question Is this person pregnant?* on the <i>Personal Data – Demographic Information</i> page and clicked the Continue button, a “We Apologize error message” displayed. | When a user reports a change to the response for the question Is this person pregnant?* on the <i>Personal Data – Demographic Information</i> page and clicks the Continue button, Report a Change Summary page is displayed. | Personal Data – Demographic Information |
| 29236 | Defect Fix | When a user clicked the Case Notes link on the <i>Personal Verification</i> page, a “We Apologize error message” displayed. | When a user clicks the Case Notes link on the <i>Personal Verification</i> page, the <i>Notes</i> page is displayed. | Personal Verification |
| 28226 | Defect Fix | When an admin changed the Renew Mode option and clicked the Update button on the <i>Renew Mode for Covered California Programs</i> page, a “We Apologize error message” displayed. | When an admin changes the Renew Mode option and clicks the Update button on the <i>Renew Mode for Covered California Programs</i> page, the <i>Opt-In / Opt-out Confirmation</i> popup is displayed. | Renew Mode for Covered California Programs |
| 29753 | Defect Fix | When an admin clicked the Search button on the <i>Search Individual</i> page, a | When an admin clicks the Search button on the <i>Search Individual</i> | Search Individual |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|---|--|--------------------------------|
| | | "We Apologize error message" displayed. | page, the <i>Search Results</i> page is displayed. | |
| 29368 | Defect Fix | The Update my Consent for field on the <i>Update Consent and Attestation</i> page displayed 5-years irrespective of the value of the consent year chosen. | The Update my Consent for field on the <i>Update Consent and Attestation</i> page displays the value of the consent year chosen. | Update Consent and Attestation |
| 29369 | Defect Fix | The Update my Consent for field on the <i>Update Consent and Attestation</i> page and AHBX table HBX_INDV_CASE_VERIF_CONSENT in AHBX database did not depreciate the number of consent years with time. | The Update my Consent for field on the <i>Update Consent and Attestation</i> page and AHBX table HBX_INDV_CASE_VERIF_CONSENT in AHBX database depreciates the number of consent years with time. | Update Consent and Attestation |
| 28114 | Defect Fix | Below mentioned were issues in the <i>Upload Document</i> popup on the <i>Upload Documents</i> page: <ul style="list-style-type: none"> Clicking the Document Name input box in the <i>Upload Document</i> popup triggered the <i>Choose File to Upload</i> popup. Upload button was enabled in the <i>Upload Document</i> popup before the Document Name was populated. Clicking Document Name or double clicking in the white space between Document Type and Document Name text | Below mentioned are fixes in the <i>Upload Document</i> popup on the <i>Upload Documents</i> page. <ul style="list-style-type: none"> Clicking the Document Name input box in the <i>Upload Document</i> popup does not trigger the <i>Choose File to Upload</i> popup. Upload button is enabled in the <i>Upload Document</i> popup after the the Document Name is populated. Clicking Document Name or double clicking in the white space between Document Type and Document Name text does not trigger anything. Clicking the Select the file to upload link does not move | Upload Documents |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|-------------------|---------------|--|--|-------------------------|
| | | <p>triggered the <i>Choose File to Upload</i> popup.</p> <ul style="list-style-type: none"> Clicking the Select the file to upload link moved focus to the Document Name field. | focus to the Document Name field. | |
| 18889 CR 59677 | Defect Fix | When an admin attempted to approve Special Enrollment, the Special Enrollment Section on the <i>Household Verifications</i> page was not displayed. | When an admin attempts to approve Special Enrollment, the Special Enrollment Section on the <i>Household Verifications</i> page is displayed. | Household Verifications |
| 25037 CR 59677 | Defect Fix | When an admin attempted to deny a life event, the Special Enrollment Period section on the <i>Manual Verifications</i> page was not displayed. | When an admin attempts to deny a life event, the Special Enrollment Period section on the <i>Manual Verifications</i> page is displayed. | Manual Verifications |
| 26971 CR 59677 | Defect Fix | When an admin clicked the Submit button on the <i>Application Signature</i> page, an exception error message was displayed. | When an admin clicks the Submit button on the <i>Application Signature</i> page, the <i>Eligibility Results</i> page is displayed. | Application Signature |
| 26878 CR 59677 | Defect Fix | When a user clicked the View Medi-Cal Details button on the <i>Eligibility results</i> page, there was no response. | When a user clicks the View Medi-Cal Details button on the <i>Eligibility results</i> page, the Medi-Cal related fact sheet is displayed | Eligibility Results |
| Reports | | | | |
| 28176 | Defect Fix | <p>An Individual had multiple active records.</p> <p>Impacted Attributes: All</p> <p>Impacted Subject Area: Submitted</p> | Every individual has only one active record. | NA |
| 28635 | Defect Fix | A few of the submitted applications missed their | All of the submitted applications have their pending application | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|--|--|----------------|
| | | <p>corresponding pending application attributes and had invalid time spans for effective date.</p> <p>Impacted Attributes: Application</p> <p>Impacted Subject Area: All</p> | attributes and valid effective date. | |
| 28730 | Defect Fix | <p>Approximately 130 enrollees had NULL for the first plan selection date for that year.</p> <p>Impacted Attributes: Enrollee</p> <p>Impacted Subject Area: All</p> | All enrollees have valid first plan selection dates for that year. | NA |
| 28732 | Defect Fix | <p>Approximately 17 enrollments had NULL for the first plan selection date for that year.</p> <p>Impacted Attributes: Enrollment</p> <p>Impacted Subject Area: All</p> | All enrollments have valid first plan selection dates for that year. | NA |
| 28750 | Defect Fix | <p>A few of the submitted applications did not have the last submitted date.</p> <p>Impacted Attributes: Application</p> <p>Impacted Subject Area: All</p> | All of the submitted applications have the last submitted date. | NA |
| 29210 | Defect Fix | <p>A few of the applications which were assisted did not have assister id.</p> <p>Impacted Attributes:</p> | All applications which are assisted have assister id. | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|--------|------------|--|--|----------------|
| | | Assister Impacted Subject Area: Application | | |
| 28348 | Defect Fix | The DM_SUBMIT_INDV_F's E\$ table has record counts greater than 1000: Impacted Attributes: <ul style="list-style-type: none"> • Application Next Year WID • Current Delegation Begin Date • Current Delegation End Date • Current Delegate WID • Enrollee Previous Year FK • Enrollee Next Year FK • Eligibility Previous Year WID • Eligibility Next Year WID • Initial Application Submit Delegation Begin Date • Initial Application Submit Delegation End Date • Initial Application Submit Delegation WID • Last Submitted Delegation Begin Date • Last Submitted Delegation End Date • Last Submitted Delegation WID Impacted Subject Areas: Submitted Individual SA | The attributes in the Submitted Individual SA mentioned in the previous design will reflect the updated value when the error records for these attributes have been fixed. | NA |

| Ref ID | Type | Previous Design/Problem | Updated/Resolved Functionality In this Release | Pages Impacted |
|-----------------|------------|---|---|--|
| Security | | | | |
| 29773 | Defect Fix | When a user clicked the Continue button after answering the security questions on the <i>Answer Questions</i> page, a “We Apologize error message” displayed. | When a user clicks the Continue button after answering the security questions on the <i>Answer Questions</i> page, the <i>Individual Homepage</i> is displayed. | Answer Questions |
| 29748 | Defect Fix | When a user clicked the Log In button on the <i>Log in or Create an Account</i> page, a “We Apologize error message” displayed. | When a user clicks the Log In button on the <i>Log in or Create an Account</i> page, the <i>Login Assistance - Register Email And Phone Number</i> page displays. | Login Assistance - Register Email And Phone Number |
| 29837 | Defect Fix | When a user clicked the Send Text button after completing the text registration section on the <i>Login Assistance - Register Email And Phone Number</i> page to generate a One Time Passcode (OTP), a “We Apologize error message” displayed. | When a user clicks the Send Text button after completing the text registration section on the <i>Login Assistance - Register Email And Phone Number</i> page to generate an OTP, the OTP generated is sent to the respective cell phone number. | Login Assistance - Register Email And Phone Number |
| 29749 | Defect Fix | When a user clicked the Send Email or Send Text button after completing the applicable email or text registration section on the <i>Login Assistance - Register Email And Phone Number</i> page to generate an OTP, a “We Apologize error message” displayed. | When a user clicks the Send Email or Send Text button after completing the applicable email or text registration section on the <i>Login Assistance - Register Email And Phone Number</i> page, the OTP generated is sent to the respective email address or cell phone number. | Login Assistance - Register Email And Phone Number |

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 |
|--|--|-------------------|-------------------|
| Online Application | | | |
| 209 | The Document Type and Immigration Status dropdowns on the Household Members page have display issues (Firefox browser only). | 28783 | 16.9 |
| Enrollment-Financial Management | | | |
| 210 | Clicking Pay Now button on the <i>Current Enrollment</i> page for Chinese Community Health Plan and Western Health carriers displays <i>Administration Home</i> page popup instead of payment site. | 29476 | 16.9 |
| 213 | When a user clicks the Choose Health Plan button on the <i>Plan Selection – In Progress</i> page, a “We Apologize” error message is displayed. | 29763 | 16.9 |
| 137 | The <i>Timeout Warning</i> popup does not display when the session timed out on the <i>Application Signature Page</i> . | 19495 CR 57637 | 16.9 |
| Security | | | |
| 212 | When a user clicks the Log In button on the <i>Log in or Create an Account</i> page, a “We Apologize” error message is displayed | 29748 | 16.9 |
| 211 | When a user clicks the Send Email or Send Text button on the <i>Login Assistance - Register Email And Phone Number</i> page, a “We Apologize” error message is displayed. | 29749 | 16.9 |
| 215 | When a user clicks the Continue button on <i>Answer Questions</i> page, a “We Apologize” error message is displayed. | 29773 | 16.9 |
| 218 | When a user clicks the Send Text button on the <i>Login Assistance - Register Email And Phone Number</i> page to generate a One Time Passcode (OTP), a “We Apologize” error message is displayed. | 29837 | 16.9 |

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 | | | |