

## CalHEERS Release Notes

### Feature Release 21.6

#### Executive Summary

CalHEERS Feature Release 21.6 (to be deployed on 06/21/2021) contains updates to the following:

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

- None

**Key System Updates** that have been deployed in this release:

- eHIT
- Eligibility & Enrollment
- Interfaces
- Marketing
- Notices
- Technology

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

- None

**Alternate Procedures** that have been provided with this release:

- None

**No Longer in Effect** with this release:

- None

**New** with this release:

- None

#### Purpose and Scope

This document describes the content of the CalHEERS Feature Release 21.6. 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
N/A	N/A	N/A	N/A	N/A

## Key System Updates

The following summarizes the modified features included in this release.

### eHIT

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
125997	Change Request	<p>The following issues exist with the COR:</p> <ul style="list-style-type: none"> <li>The Address Validation returns only the Zip code in the <i>Suggested Address</i> section of the <i>Confirm Your Address</i> popup. This <i>Suggested Address</i> section does not display the Zip +4 code which is an extension of the Zip code which can cause users to select the incorrect COR. CalHEERS HX05 transactions to MEDS for to an application during RAC/Renewal where COR is changed</li> <li>HX20 transactions fail because CalHEERS is not sending MEDS a county code for mailing address when CalHEERS does not receive a county code for a mailing address from SAWS in an EDR</li> </ul>	<p><b>Functional Changes:</b></p> <p>CalHEERS displays the Zip+4 code for the Zip code that the user enters on the <i>Suggested Address 1</i> section of the <i>Confirm Your Address</i> popup in both CalHEERS and the <i>flexible App in Admin View</i>, this helps users to select the correct address and to have the correct COR assigned.</p> <ul style="list-style-type: none"> <li>The following new warning message displays on the <i>Confirm your Address</i> popup when the address validation service finds a '<b>Close match</b>' to the user entered address during account creation or when submitting an application: <ul style="list-style-type: none"> <li><i>We could not find the address you entered because it may not be complete. We found addresses that closely match the one you gave us. Please pick the option that best matches the correct address, and click "Ok" to continue. If you made a mistake, click "Cancel" to go back and re-enter your address.</i></li> </ul> </li> </ul>	<p>Who is the Primary Contact for your Household?</p> <p>Select all Household Members Who do not Live with [Primary Contact]]</p> <p>Confirm These Home and Mailing Addresses Area Correct</p> <p>Create Account</p> <p>Authorized Representative Information</p> <p>Flexible Application</p>

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			<ul style="list-style-type: none"> <li>• The following new warning message displays on the <i>Confirm Your Address</i> popup when the original address is selected: <ul style="list-style-type: none"> <li>○ <i>IMPORTANT! Please make sure to check your information. A mistake in your address could affect your eligibility, your monthly payment, and the county your case is assigned to.</i></li> </ul> </li>   <li>• The following new warning message displays on the <i>Confirm your Address</i> popup when the address validation service finds a <b>'No match'</b> to a user entered address during account creation or submitting application: <ul style="list-style-type: none"> <li>○ <i>We could not find the address you entered because it may not be complete. We also could not find any addresses that closely match to the one you gave us. Please click "Cancel" and review the address you entered. If you made a mistake, you can fix it. If the address you entered is correct, then click "Ok" to continue.</i></li> </ul> </li>   <li>• The <i>Confirm your Address</i> popup message does not display if the address validation service finds a full match to a user entered</li> </ul>	

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			<p>address during the account creation or submitting application.</p> <p>The <i>Confirm Your Address</i> popup also displays the Zip+4 Code (as read only) for the suggested address output from the Address Validation Service.</p> <p><b>Technical Changes:</b> CalHEERS adds the following backend services:</p> <ul style="list-style-type: none"> <li>• Generate HX05 transactions when COR is updated for existing Household Members that are Eligible or Conditionally Eligible for APTC/State Subsidy/CCP/CSR/MCAP/CCHIP. Newly added Household Members do not have an HX05 generated</li> <li>• Update references to the old eligibility table <i>HBX_INDV_CASE_ELIG</i> with new eligibility table(s) for Disposition service implementation</li> <li>• The county code populates based on the zip code provided for mailing address, if the county code is not received in an EDR from SAWS, based on the county code to zip code mapping maintained in CalHEERS</li> <li>• CalHEERS persists the Zip+4 code for an address</li> </ul>	

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			returned by the address validation service	

### Eligibility & Enrollment

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44000	Change Request	CalHEERS is not in compliance with State and Federal Regulations to perform Periodic Verification Medicare-Death Confirmation (PVC) on a semi-annual basis. CalHEERS only verifies Medicare entitlement and Deceased during intake and renewals. Verifications for these attributes do not expire.	<p><b>Functional Changes:</b> CalHEERS implements a new PVC process to verify Medicare Part A and Deceased verification:</p> <ul style="list-style-type: none"> <li>• The semi-annual process verifies Medicare Part A entitlement for Consumers who have an active Health Enrollment with Enrolled/Pending status and their eligibility status is: <ul style="list-style-type: none"> <li>○ Eligible/Conditionally Eligible for APTC/CSR/CAPS</li> <li>○ They have an E-Verified SSN</li> </ul> </li> <li>• The semi-annual process verifies Death confirmation for Consumers who have an active Health and/or Dental Enrollment(s) (Enrolled/Pending) and their eligibility status is: <ul style="list-style-type: none"> <li>○ Eligible or Conditionally Eligible for CCP, and</li> <li>○ They have an E-Verified SSN</li> </ul> </li> <li>• The semi-annual process excludes cases with: <ul style="list-style-type: none"> <li>○ At least one Consumer is in Carry Forward Status or</li> <li>○ At least one Consumer is in a QHP Hold</li> </ul> </li> </ul>	<p>Consumer Home</p> <p>Check Your Information</p> <p>Review and Confirm Responses</p> <p>Personal Verification</p>

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			<p>CalHEERS allows Medicare Part A and Deceased flagged Consumers found by the PVC to agree or disagree with the results:</p> <ul style="list-style-type: none"> <li>• CalHEERS displays the following new alerts in the <i>Account Alerts</i> section on the Consumer Home page when there is at least one Household Member on the case with a Medicare Part A or Deceased periodic verification flag: <ul style="list-style-type: none"> <li>○ <b>Action Required by [MM/DD/YYYY]:</b> Our records show [one or more members of your household] may have Medicare. Please <b>click here</b> to respond.</li> <li>○ <b>Action Required by [MM/DD/YYYY]:</b> Our records show [one or more members of your household] may be deceased. Please <b>click here</b> to respond.</li> </ul> </li> <li>• CalHEERS displays the new <i>Check Your Information</i> page for Agents, CECs, CEWs, Consumers, and SCRs that allows each flagged member to agree or disagree to the Medicare Part A or Deceased attestation <ul style="list-style-type: none"> <li>○ SCRs and CEWs submit or save the Consumer</li> </ul> </li> </ul>	

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			<p data-bbox="922 268 1271 338">attestation on the <i>Check your information</i> page</p> <ul style="list-style-type: none"> <li data-bbox="824 384 1235 1035"> <p data-bbox="870 384 1235 594">• CalHEERS adds the <i>Review and Confirm Responses</i> page to allow Agents, CECs, and Consumers to review and submit the attestations</p> <ul style="list-style-type: none"> <li data-bbox="870 604 1224 1035"> <p data-bbox="922 604 1224 709">○ The following popups display during the attestation process:</p> <ul style="list-style-type: none"> <li data-bbox="922 716 1224 852"> <p data-bbox="967 716 1224 852">▪ <i>Thank You</i> popup displays when the user submits attestation</p> </li> <li data-bbox="922 858 1224 1035"> <p data-bbox="967 858 1224 1035">▪ <i>Are you sure you want to cancel?</i> popup displays if user cancels attestation</p> </li> </ul> </li> </ul> </li> <li data-bbox="824 1079 1271 1839"> <p data-bbox="870 1079 1271 1255">• CalHEERS updates the following when the Consumer agrees to being entitled to Medicare Part A and eligibility is run:</p> <ul style="list-style-type: none"> <li data-bbox="870 1266 1271 1335"> <p data-bbox="922 1266 1271 1335">○ Remove the PVC flag and PVC expiration date</p> </li> <li data-bbox="870 1341 1271 1518"> <p data-bbox="922 1341 1271 1518">○ Set Medicare Part A entitlement question (“Are you eligible for free Medicare Part A?”) to <i>Yes</i></p> </li> <li data-bbox="870 1524 1271 1623"> <p data-bbox="922 1524 1271 1623">○ Update the Medicare Verification status to <i>E-Verified</i></p> </li> <li data-bbox="870 1629 1271 1766"> <p data-bbox="922 1629 1271 1766">○ Discontinue Consumer from APTC/CSR/CAPS using EERC <i>CN</i> (CCP Covered CA Ineligible)</p> </li> <li data-bbox="870 1772 1271 1839"> <p data-bbox="922 1772 1271 1839">○ Generate Non-MAGI Medi-Cal referral due to</p> </li> </ul> </li> </ul>	

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			<p>Medicare Self-Attestation</p> <ul style="list-style-type: none"> <li>○ Remove the ROP date for Medicare, if it exists</li> </ul> <ul style="list-style-type: none"> <li>● CalHEERS updates the following when the Consumer disagrees to being entitled to Medicare Part A and eligibility is run: <ul style="list-style-type: none"> <li>○ Remove PVC flag and PVC expiration date</li> <li>○ Update Medicare Part A Verification Status to <i>Pass</i></li> <li>○ Consumer becomes Eligible if otherwise Conditionally Eligible to APTC/CSR/CAPS</li> <li>○ Remove ROP date for Medicare, if it exists</li> </ul> </li> <li>● CalHEERS updates the following when the Consumer does not attest within the PVC expiration period and the ELG-1008-DD-01 no response batch runs: <ul style="list-style-type: none"> <li>○ Remove PVC flag and PVC expiration date</li> <li>○ Update Medicare Verification Status to <i>Pending</i></li> <li>○ Consumer becomes Conditionally Eligible if otherwise Conditionally Eligible to APTC/CSR/CAPS</li> <li>○ Set ROP date for Medicare, if it does not already exist</li> </ul> </li> <li>● CalHEERS updates the following if the Consumer</li> </ul>	



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			<p>agrees to the individual being Deceased:</p> <ul style="list-style-type: none"> <li>○ Remove the PVC flag and PVC expiration date</li> <li>○ <i>Deceased</i> on the <i>Personal Verification</i> page updates to <i>Yes</i>. (The value does not change back to <i>No</i>, unless an Admin clears the verification)</li> <li>○ Update Deceased Verification Status to <i>E-Verified</i></li> <li>○ Discontinue Consumer from APTC/CSR/CAPS/CCP using EERC <i>DX</i> (Deceased-PVC)</li> <li>○ Remove the ROP date for Deceased, if it exists</li> </ul> <ul style="list-style-type: none"> <li>● CalHEERS updates the following if the Consumer disagrees to the individual being Deceased: <ul style="list-style-type: none"> <li>○ Remove the PVC flag and PVC expiration date</li> <li>○ Update Deceased Verification Status to <i>Pass</i></li> <li>○ Consumer becomes Eligible if otherwise Eligible to APTC/CSR/CAPS/CCP</li> <li>○ Remove the ROP date for Deceased, if it exists</li> </ul> </li> <li>● CalHEERS updates the following if the Consumer does not respond to the individual being Deceased within the PVC expiration period:</li> </ul>	

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			<ul style="list-style-type: none"> <li>○ Remove PVC flag and PVC expiration date</li> <li>○ Update Deceased Verification Status to <i>Pending</i></li> <li>○ Consumer becomes Conditionally Eligible if otherwise Conditionally Eligible to APTC/CSR/CAPS/CCP</li> <li>○ Set ROP date for Deceased if it does not exist already</li> </ul> <ul style="list-style-type: none"> <li>● CalHEERS uses the latest verification data from the PVC Process to determine eligibility for flagged household members and uses existing verification cache rules for unflagged HHMs on the case</li> </ul> <p>CalHEERS removes the PVC flag and expiration date and uses existing verification caching and eligibility determination rules for the following scenarios:</p> <ul style="list-style-type: none"> <li>● When a data element which impacts Medicare Part A and/or Deceased verification has been updated</li> <li>● Consumer is no longer Eligible/Conditionally Eligible for APTC/CSR/CAPS and/or CCP</li> <li>● Consumer's case is closed as a duplicate</li> </ul>	


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			<ul style="list-style-type: none"> <li>• Consumer's Health plan is terminated for Medicare verification</li> <li>• Consumers Health and Dental plan is terminated for Deceased verification</li> <li>• Flagged Consumer Actively or Passively renews for the next benefit year for Covered California programs</li> </ul> <p>Consumer's eligibility determination uses PVC attestation for Medicare Part A and/or Deceased and the Consumer becomes Eligible or Discontinued to APTC/CSR/CAPS/CCP due to a Non-ESI or SSA service or Admin Verification.</p> <p><b>Technical Changes:</b> CalHEERS adds the following to the Single Streamlined Application:</p> <ul style="list-style-type: none"> <li>• CalHEERS adds new run reason and transaction code PV: <i>Periodic Reverification</i></li> <li>• CalHEERS adds the following new backend services: <ul style="list-style-type: none"> <li>○ Set expiration date for flagged household members</li> <li>○ Update the <i>PDM_MEDICARE_RES P</i> and <i>PDM_DECEASED_RES P</i> tables with the</li> </ul> </li> </ul>	

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			<p>individual responses from the cached information in the <i>HBX_PDM_VERIFICATION</i> table</p> <ul style="list-style-type: none"> <li>• CalHEERS adds the following new batch jobs: <ul style="list-style-type: none"> <li>○ PVC Process verifies Consumer death confirmation and Medicare Part A eligibility</li> <li>○ PDM-1001-DD-01 sets the expiration date and flags individuals who are found to be entitled to Medicare Part A or Deceased by the PVC Process</li> <li>○ ELG-1008-DD-01 runs eligibility for all flagged individuals who do not provide an attestation within the PVC expiration period</li> <li>○ ELG-1009-DD-01 runs eligibility batch at the end of each day for all flagged individuals who have a saved attestation</li> </ul> </li> </ul>	
160401	Change Request	CalHEERS does not have functionality to override an open plan shopping without a SEP or Account Transfer (AT) for issues such as exchange error or material error e.g., through no fault of the Consumer and where the issue does not map to an actual SEP event that can be used to trigger an AT.	<p><b>Functional Changes:</b> CalHEERS allows L3 Admin users the ability to override and open plan shopping:</p> <ul style="list-style-type: none"> <li>• The new <b>Open Shopping Window</b> button displays on the <i>Current Application</i> page on the most recent application within a given plan year where a Consumer can shop for a plan</li> </ul>	Current Application

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			<ul style="list-style-type: none"> <li>○ Displays when one Household Member is eligible to purchase a QHP</li> </ul> <p>The new <i>Override to Open Plan Shopping Window</i> popup displays when the L3 Admin users click the <b>Open Shopping Window</b> button:</p> <ul style="list-style-type: none"> <li>• Current calendar year and upcoming year display for Consumers during Open Enrollment</li> <li>• Current calendar year and the prior enrollment year display for Consumers during SEP</li> <li>• Users input the following information: <ul style="list-style-type: none"> <li>○ Select <b>Event Reason</b>: <ul style="list-style-type: none"> <li>▪ <i>Agency Error/Inaction</i></li> <li>▪ <i>Divorce/Death of Enrollee</i></li> <li>▪ <i>Exceptional Circumstance</i></li> <li>▪ <i>Other Exchange Recognized SEP</i></li> </ul> </li> <li>○ Enter <i>Plan Shopping Window</i> dates</li> <li>○ Select <b>Coverage Start Date</b></li> <li>○ Provide <b>Override Reason</b></li> </ul> </li> </ul> <p><b>Technical Changes:</b> CalHEERS adds new override reason <i>AI – No Reason Given</i></p>	

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			when Admin overrides SEP before plan selection.	
164544	Change Request	CEWs are not able to review MAGI Medi-Cal eligibility results to ensure that the results are correct prior to authorization.	<p><b>Functional Changes:</b> CalHEERS implements Eligibility Review functionality for MAGI Medi-Cal eligibility results that require County Eligibility Workers (CEWs) review.</p> <p>CalHEERS sends the MAGI Medi-Cal Eligibility Results determined by CalHEERS Business Rules Engine on the DER/DER-U when the MAGI Medi-Cal Eligibility Results in CalHEERS database are "Pending" for SAWS confirmation and is "Awaiting Review" in CalHEERS.</p> <p>The Eligibility Result sent on the DER/DER-U is the potential eligibility that will be finalized once the CEW reviews and confirms via Disposition. In order to finalize the Eligibility Results once the confirmation is received from SAWS via Disposition, CalHEERS triggers the BRE and the results in CalHEERS portal and the database are updated based on SAWS confirmed eligibility results for MAGI Medi-Cal program.</p> <p>Eligibility Results that are <i>Awaiting Review</i> and not yet confirmed by the CEW will not be used in subsequent redeterminations of eligibility. While a case is in <i>Awaiting Review</i> status, any subsequent redeterminations will use the</p>	<p>Consumer Home</p> <p>Case Summary - Program Eligibility by Person</p> <p>Household Eligibility Results Summary</p> <p>Individual Eligibility Details</p>

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<p>existing finalized Eligibility Results. If there is a subsequent RAC while Eligibility Results are in <i>Awaiting Review</i> state, the data from the RAC will remain.</p> <p>Programs other than MAGI Medi-Cal will not be impacted by Eligibility Review functionality except for the following specific scenarios:</p> <p><u>Covered California Programs</u></p> <ul style="list-style-type: none"> <li>When an individual is in <i>Awaiting Review</i> for a discontinuance from Full Scope MAGI Medi-Cal because they do not meet the Soft Pause criteria, the individual will be evaluated for Covered California programs until the CEW reviews and confirms the Discontinuance. If the Discontinuance is not for Full Scope MAGI Medi-Cal, the individual will be evaluated for Covered California Programs without waiting for CEW confirmation.</li> </ul> <p>MCAP/CCHIP</p> <ul style="list-style-type: none"> <li>When an MCAP or CCHIP Consumer completes a RAC that moves them into the MAGI Medi-Cal FPLs, their eligibility for MAGI Medi-Cal program will be in <i>Awaiting Review mode</i> and the consumer will remain in their existing eligibility until</li> </ul>	

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			<p>MAGI Medi-Cal eligibility results are confirmed by CEW.</p> <p>Once CalHEERS receives the Disposition from SAWS for an individual confirming MAGI Medi-Cal eligibility, the individual is Discontinued from MCAP or CCHIP as of the first of the following month from the run date.</p> <p>A chart listing, of the information listed above, is also available here:</p> <p> Appendix_Release Notes_21.2.docx</p> <p>CalHEERS displays the following new messages to Consumers whose MAGI Medi-Cal eligibility results are in Awaiting Review mode:</p> <ul style="list-style-type: none"> <li>• Current Eligibility Summary Section of the <i>Program Eligibility by Person</i> page: <ul style="list-style-type: none"> <li>○ Awaiting Review is displayed when MAGI Medi-Cal determination is under CEW review.</li> </ul> </li> <li>• Program Eligibility History Summary section of the <i>Program Eligibility by Person</i> page displays the below message as a merged cell for [Program], [Aid Code], [Status], and [Source EDBC] values: <ul style="list-style-type: none"> <li>○ <i>Medi-Cal: Awaiting Review: Your local County Office will review</i></li> </ul> </li> </ul>	



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			<p data-bbox="922 268 1260 483"><i>your Medi-Cal eligibility and contact you if additional information is needed. You do not need to take any action at this time.</i></p> <ul data-bbox="824 527 1276 1291" style="list-style-type: none"> <li data-bbox="824 527 1276 1035">• Household Eligibility Results Summary and the Individual Eligibility Details section of Household Eligibility Results Summary page: <ul data-bbox="873 709 1276 1035" style="list-style-type: none"> <li data-bbox="873 709 1276 1035">○ <i>Medi-Cal: Awaiting Review: Your local County Office will review your Medi-Cal eligibility and contact you if additional information is needed. You do not need to take any action at this time.</i></li> </ul> </li> <li data-bbox="824 1077 1276 1291">• <i>The Household Summary Section of the Account Home Page displays Program Eligibility as</i> <ul data-bbox="873 1224 1192 1291" style="list-style-type: none"> <li data-bbox="873 1224 1192 1291">○ <i>Medi-Cal: Awaiting Review</i></li> </ul> </li> </ul> <p data-bbox="824 1333 1276 1438"><b>Technical Changes:</b> CalHEERS sends the following new EERCs:</p> <p data-bbox="824 1480 1276 1627"><i>MAGI Medi-Cal: Awaiting Review (RV) on the DER and DER-U when eligibility review is required by SAWS</i></p> <p data-bbox="824 1669 1276 1877">MAGI Medi-Cal Eligibility Result: Prospective Change (PM) when an individual has a prospective change to MAGI Medi-Cal Eligibility Result that is not being sent on</p>	

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			<p>the DER/DER-U for the benefit month.</p> <p>CalHEERS sends a DER-U with <i>Exchange Info Update</i> and defaulted to "Yes" when confirmation for MAGI Medi-Cal Discontinuance is received from SAWS.</p>	
164783	Change Request	<p>CalHEERS does not have configurable SEP reasons or the ability to add SEP reasons in a short timeframe when Covered California requests an SEP reasons that need to be implemented quickly. Covered California uses and modifies current SEP reasons as a workaround.</p>	<p><b>Functional Changes:</b> CalHEERS creates seven new configurable placeholder SEP reasons allowing Covered California the flexibility to add new SEP reasons quickly.</p> <p>The following attributes are configurable based on Covered California's request for all SEP reasons:</p> <ul style="list-style-type: none"> <li>• Description (English/Spanish)</li> <li>• Coverage Effective Start Date</li> <li>• Coverage Effective End Date</li> <li>• Priority in the SEP drop down</li> <li>• Coverage Code Category</li> <li>• Consideration for OSEP</li> </ul> <p>The SEP reasons follow the coverage date and application rules:</p>	<p>Chose an Event that Best Applies to This Household</p> <p>Chose an Event that Best Applies to You</p> <p>Open Enrollment</p> <p>Special Enrollment</p>

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			<ul style="list-style-type: none"> <li>• CalHEERS applies the SEP first of the following month rule in the following scenarios:               <ul style="list-style-type: none"> <li>○ Currently enrolled Consumer reports a change but does not attest to an SEP, and the RAC results in a detected SEP</li> <li>○ Currently enrolled Consumer reports a change with no attested or detected SEP, and the RAC results in a detected increase or decrease in their financial assistance</li> </ul> </li> <li>• CalHEERS applies the QLE effective dating rule for the <i>Birth/Adoption/Placement for Adoption/Placement in Foster Care</i> SEP reasons</li> <li>• All other SEP reasons, other than <i>Birth/Adoption/Placement for Adoption/Placement in Foster Care</i> SEP reasons, will follow first of the following month effective dating rule</li> <li>• No SEP reasons are currently configured to follow the 15-day rule</li> </ul> <p>CalHEERS implements the flexibility for Covered California to configure any SEP reasons that displays during Open Special Enrollment Period (OSEP).</p>	

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			<ul style="list-style-type: none"> <li>• The SEP reasons display in the QLE dropdown menu in the order of priority configured on the following pages:               <ul style="list-style-type: none"> <li>○ <i>Choose an Event that <b>Best Applies to You</b></i></li> <li>○ <i>Choose an Event that <b>Best Applies to This Household</b></i></li> <li>○ <i>Special Enrollment</i></li> <li>○ <i>Open Enrollment</i></li> </ul> </li> </ul> <p>CalHEERS renames the radio button <b>MEC or Marriage/Domestic Partnership</b> to <b>First of the following month</b> on the <i>Coverage Date Category</i> section of the following pages:</p> <ul style="list-style-type: none"> <li>• <i>Special Enrollment</i></li> <li>• <i>Chose an Event that <b>Best Applies to This Household</b> page</i></li> </ul> <p>CalHEERS hides the <b>Regular</b> radio button on the <i>Coverage Date Category</i> section of the following pages:</p> <ul style="list-style-type: none"> <li>• <i>Special Enrollment</i></li> <li>• <i>Chose an Event that <b>Best Applies to This Household</b> page</i></li> </ul> <p><b>Technical Changes:</b> The new placeholder SEP reasons are mapped to the following not in use SEP codes</p>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<p>when a transaction is sent to SAWS:</p> <ul style="list-style-type: none"> <li>• MS</li> <li>• BM</li> <li>• AD</li> <li>• DM</li> <li>• LJ</li> <li>• MR</li> <li>• IS</li> </ul> <p>The following SEP reasons are mapped differently in eHIT transactions:</p> <ul style="list-style-type: none"> <li>• <i>Victim of domestic abuse or spousal abandonment</i></li> <li>• <i>Newly qualifies for app-based driver</i></li> </ul> <p>Updates to the <i>Victim of domestic abuse or spousal abandonment</i> SEP Code are as follows:</p> <ul style="list-style-type: none"> <li>• CalHEERS removes the mapping of <i>Victim of domestic abuse or spousal abandonment</i> SEP code from the <i>Returned from Active Duty Military Service</i> SEP Code</li> <li>• CalHEERS maps <i>Victim of domestic abuse or spousal abandonment</i> SEP code to the SEP code <i>DV</i> in eHIT</li> </ul> <p>CalHEERS updates the <i>Newly qualifies for app-based driver stipend</i> SEP code as follows:</p>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>• CalHEERS removes the mapping of <i>Newly qualifies for app-based driver stipend</i> SEP code from the <i>Loss of MEC</i> SEP code</li> <li>• CalHEERS maps <i>Newly qualifies for app-based driver stipend</i> SEP code to the existing SEP code <i>NH</i> in eHIT</li> </ul>	
166386	Change Request (Agile)	<p>The <i>Household Eligibility Results Summary</i> page and the <i>Household Eligibility Individual Results</i> page require updates to display accurate information that is clear and concise to CalHEERS users.</p>	<p>This Change Request is piloting CalHEERS transition to Agile development according to Scrum methodology.</p> <p>This Change Request design is broken into the following seven Sprints:</p> <ul style="list-style-type: none"> <li>• Sprint 1 and 2: <i>Household Eligibility Results Summary</i> page</li> <li>• Sprint 3 through 7: <i>Household Eligibility Individual Results</i> page</li> </ul> <p>Sprint 3 through Sprint 7 are still in the design phase and the changes to the <i>Household Eligibility Individual Results</i> page will be included in the next version of the release notes.</p> <p>The following detail is specific to Sprint 1 and Sprint 2.</p> <p>Updates to the <i>Household Eligibility Results Summary</i> page are as follows:</p>	<p>Household Eligibility Results Summary</p> <p>Household Eligibility Individual Results</p>

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>• Updates to the header, title and subtitle</li> <li>• Household members default to the card view and display the following information: <ul style="list-style-type: none"> <li>○ <i>Name</i></li> <li>○ <i>Age</i></li> <li>○ <i>See full details</i> link</li> </ul> </li> <li>• A table view icon is available. The following displays in table view: <ul style="list-style-type: none"> <li>○ Program Headers <ul style="list-style-type: none"> <li>▪ <i>Covered California</i></li> <li>▪ <i>Medi-Cal</i></li> </ul> </li> <li>○ Sub-Programs <ul style="list-style-type: none"> <li>▪ <i>CCP</i></li> <li>▪ <i>Financial Help</i></li> <li>▪ <i>Enhanced Silver Benefits</i></li> <li>▪ <i>Medi-Cal</i></li> <li>▪ <i>MCAP</i></li> <li>▪ <i>CCHIP</i></li> </ul> </li> <li>○ <i>Name</i> (hyperlink), <i>Age</i></li> <li>○ Household Members display in the order in which they were added to the Application/Case</li> <li>○ <i>Ellipses</i> <ul style="list-style-type: none"> <li>▪ Clicking the Ellipses icon displays the <i>See Full Details</i> hyperlink</li> </ul> </li> </ul> </li> <li>• The following display on the <b>Contact Us</b> section if at least one household member on the case is MAGI Medi-Cal Eligible or Conditionally Eligible: <ul style="list-style-type: none"> <li>○ Local county office, corresponding phone number and hyperlink to full list of locations</li> </ul> </li> </ul>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>○ Covered California phone number</li> <li>○ MCAP phone number displays if at least one household member on the case is MCAP Eligible or Conditionally Eligible</li> <li>○ CCHIP Phone number displays if at least one household member on the case is CCHIP Eligible or Conditionally Eligible</li> </ul>	
175148	Change Request	CalHEERS does not have the functionality to implement the American Rescue Plan 2021. This plan locks the APTC FPL for those individuals receiving Unemployment Insurance.	<p>The changes needed for the American Rescue Plan 2021 are in the design phase and details will be provided in version 2.</p> <p>High Level Overview:</p> <ul style="list-style-type: none"> <li>• Admin Users receive a dynamic message <i>Deleting an income record could impact coverage status</i>. When an Unemployment Insurance income record is deleted</li> <li>• Income is overridden to 138.1% of the FPL if the Primary Tax Filer or their spouse in the APTC household have attested to any type of Unemployment Insurance Benefits (UIB) for the current benefit year which is either end dated or ongoing and their APTC household FPL is over the MAGI Medi-Cal limit for the current benefit year</li> </ul>	TBD

## Interfaces



Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
95607	Change Request	CalHEERS must update the FTB monthly file process for receiving Form 540 data to real time due to security concerns with the move to the Amazon Web Services (AWS) cloud platform. CalHEERS does not have the mechanism to make external calls to FTB.	<p><b>Functional Changes:</b> FTB real time API calls are limited to once a week, on Tuesday, per verified SSN when none of the impacted data elements for income verification have changed.</p> <p><b>Technical Changes:</b> CalHEERS integrates with the FTB Interface in real time, including the ability to request Form 540</p> <ul style="list-style-type: none"> <li>• FTB performs an exact, case insensitive match on First Name, Last Name, SSN, and DOB of the taxpayer to retrieve Form 540 data <ul style="list-style-type: none"> <li>○ CalHEERS makes parallel FTB calls for each household member during eligibility determination to avoid processing delays</li> <li>○ CalHEERS implements a new database schema in existing CalHEERS HBX database with additional security controls to store the FTB Interface call log and FTB Verification Cache data</li> </ul> </li> </ul>	N/A
159518	Change Request	CalHEERS current Remote Identity Proofing (RIDP) and Fraud Archive Reporting Service (FARS) schemas are no longer compatible with CMS.	<p><b>Functional Changes:</b> The following updates made to the CalHEERS current RIDP and FARS schemas to allow compatibility with CMS: A new FARS response code displays on the <i>Identify Confirmation Failed</i> page:</p> <ul style="list-style-type: none"> <li>• <i>HS000000 – RF3 - Use Limit Violation - User has</i></li> </ul>	Identity Confirmation Failed

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<p><i>attempted to remote identity proof 6 times within 16 hours through Hub and must wait allotted time before attempting identity proofing again</i></p> <p><b>Technical Changes:</b> CalHEERS makes the following updates to be compatible with CMS:</p> <ul style="list-style-type: none"> <li>• CalHEERS makes the following schema updates: <ul style="list-style-type: none"> <li>○ RIDP updates from H1.1 to H139</li> <li>○ FARS updates from H66.1 to H140</li> </ul> </li> <li>• CalHEERS can receive and process new FARS Final Decision Code <i>RF3 – Use Limit Violation / Prompt to Experian Call Center</i></li> </ul>	
160257	Change Request	<p>CalHEERS does not allow the users listed below to view and correct an AT error prior to processing an enrollment update or plan selection during a new eligibility period:</p> <ul style="list-style-type: none"> <li>• Agents</li> <li>• Agency Managers</li> <li>• Approved Admin Staff L1 and L2</li> <li>• Authorized Representatives</li> <li>• Consumers</li> <li>• CECs</li> <li>• CEWs</li> <li>• PBEs</li> <li>• SCRs</li> <li>• SCR Admins</li> </ul>	<p><b>Functional Changes:</b> CalHEERS displays a new warning message with a <b>View Details</b> hyperlink on the Consumer Home and <i>Household Eligibility Results Summary</i> pages that directs Agents, Agency Managers, Approved Admin Staff L1 and L2, Authorized Representatives, Consumers, CECs, CEWs, SCRs, and SCR Admins that there is an AT error.</p> <ul style="list-style-type: none"> <li>• <i>The We apologize, there has been an error processing your case.</i> popup displays when the above users click the <b>View Details</b> hyperlink</li> </ul>	<p>Account Transfer</p> <p>Consumer Home</p> <p>Household Eligibility Results Summary</p>

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>• Based on the users' profile, CalHEERS displays the AT error message(s) and steps to fix the AT error(s)               <ul style="list-style-type: none"> <li>○ The following users can see all fixable and non-fixable errors:                   <ul style="list-style-type: none"> <li>▪ Agency Managers</li> <li>▪ Agents</li> <li>▪ Approved Admin Staff L1 and L2</li> <li>▪ CECs</li> <li>▪ PBEs</li> </ul> </li> <li>○ The following users can address all fixable errors:                   <ul style="list-style-type: none"> <li>▪ Agency Manager</li> <li>▪ Agents</li> <li>▪ Approved Admin Staff L1 and L2</li> <li>▪ CECs</li> <li>▪ CEWs</li> <li>▪ PBEs</li> <li>▪ SCRs</li> </ul> </li> <li>○ The following users will only see one fixable error, can only address one fixable error, and can call the service center to address any additional fixable errors:                   <ul style="list-style-type: none"> <li>▪ Consumers</li> <li>▪ Authorized Representative</li> </ul> </li> </ul> </li> <li>• A new page, <i>Account Transfer History</i>, displays when CEWs and SCRs select the <b>Account Transfer History</b> tab on the <i>Case Summary</i> page</li> </ul>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>○ The <i>Account Transfer History</i> page displays a table of AT transactions for the Consumer's case for the past 90 days with the following information: <ul style="list-style-type: none"> <li>▪ <i>Determination Date</i></li> <li>▪ <i>Transaction ID</i></li> <li>▪ <i>Transfer ID</i></li> <li>▪ <i>AT Status (Successful/Failed)</i></li> </ul> </li> <li>○ By default, the AT transactions are sorted by the <i>Determination Date</i> in descending order</li> <li>○ CEWs and SCRs can filter and sort AT transactions by the following information: <ul style="list-style-type: none"> <li>▪ <i>Determination Date</i> (must be within a 90-day range when filtering)</li> <li>▪ <i>Transaction ID</i></li> <li>▪ <i>Transfer ID</i></li> <li>▪ <i>AT Status</i></li> </ul> </li> <li>○ The following information is available for each AT record: <ul style="list-style-type: none"> <li>▪ <i>AT Error message(s)</i></li> <li>▪ <i>User Role</i> who triggered the AT</li> <li>▪ <i>BRE ID</i></li> <li>▪ <i>Time</i></li> <li>▪ <i>Application Year</i></li> </ul> </li> <li>○ AT transactions prior to the 21.6 release do not display on the <i>Account Transfer History</i> page</li> </ul>	

## Marketing

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
161277	Change Request	CalHEERS does not allow the Agent and Entity portals to complete bulk transfers of Consumer cases or of entire BoBs. Additional updates to the Agent and Entity portals are required. .	<p>The functional and technical changes of the CR are in the design phase and details will be provided at a later date.</p> <p>High Level Overview:</p> <ul style="list-style-type: none"> <li>• CalHEERS allows Broker Admins and Entity Admins to complete bulk transfers of BoBs to other users</li> <li>• CalHEERS allows Agency Mangers and Entity Managers to transfer up to 100 Consumer cases at one time</li> <li>• CalHEERS updates the address character limits in the Address fields</li> <li>• CalHEERS allows the following list of users to search for a Consumer's First name or Last name using the contains search functionality: <ul style="list-style-type: none"> <li>○ Agents</li> <li>○ CECs</li> <li>○ Entity Admins</li> <li>○ Entity Managers</li> </ul> </li> <li>• CalHEERS displays <i>California Premium Subsidy</i> column after the <i>APTC</i> column in the <i>Premium and APTC Table</i></li> <li>• CalHEERS allows the following users to export household cases: <ul style="list-style-type: none"> <li>○ Entity Managers</li> <li>○ CECs</li> </ul> </li> </ul>	TBD

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>CalHEERS generates 834 EDI transactions for Agent delegation changes associated with terminated enrollments</li> </ul>	

### Notices

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
161531	Change Request	<p>The Notices/Snippets below do not support the changes introduced as part of Release 21.6.</p> <p>In addition, new notices are needed to support the changes in the release.</p> <ul style="list-style-type: none"> <li>CalNOD01 requires updates to its trigger cadence and language for ROP Snippets</li> <li>CalNOD64 requires updates to the text</li> <li>CalNOD69 requires updates to the Notice Name, Subject Title, trigger conditions, and language</li> </ul>	<p><b>Functional Change:</b> The following Notices/Snippets are updated to support the 21.6 Release:</p> <ul style="list-style-type: none"> <li>The CalNOD01 notice is updated as follows: <ul style="list-style-type: none"> <li>Generates with the most recent enrollment information and the correct coverage start dates when the BRE runs and the case is selected for CalNOD01</li> </ul> </li> <li>The CalNOD01a, b, and c notices are updated as follows: <ul style="list-style-type: none"> <li>Does not generate when all members in the case are subject to eligibility review and the potential eligibility status for MAGI Medi-Cal is discontinued</li> <li>Generates when one or more members in a mixed household case are subject to eligibility review and the potential eligibility status for MAGI Medi-Cal is discontinued regardless if there is a change to</li> </ul> </li> </ul>	N/A

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<p>Covered California eligibility for other members in the case</p> <ul style="list-style-type: none"> <li>○ Snippets 443 suppresses when Snippet 480 or 775 generates</li> <li>○ Generates with new Snippet 921 for Consumers whose income is above the County Children's Health Initiative Program limit</li> <li>○ Triggers when: <ul style="list-style-type: none"> <li>▪ Snippet 718 triggers and;</li> <li>▪ Snippet 702 or 703 triggers and;</li> <li>▪ Consumer's FPL is over 322%</li> </ul> </li> </ul> <p>• The CalNOD01a and b notices are updated as follows:</p> <ul style="list-style-type: none"> <li>○ Generates the new enrollment Snippet 923 containing the most recent enrollment information for a household in intake mode when Consumers enroll into a plan on the same day as the BRE run <ul style="list-style-type: none"> <li>▪ Two notices generate containing most recent enrollment information for benefit year 2021 and another notice for benefit year 2022</li> </ul> </li> </ul>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>• The CalNOD01c notice is updated as follows:               <ul style="list-style-type: none"> <li>○ Language updates are made to the following Snippets and scenarios:                   <ul style="list-style-type: none"> <li>▪ Snippet 434: Unable to verify US Citizenship or national status</li> <li>▪ Snippet 435: Unable to verify immigration status</li> <li>▪ Snippet 436: Person is deceased (has died)</li> <li>▪ Snippet 437: Incarcerated on in jail</li> </ul> </li> <li>○ Does not generate for Consumers when all members in the case are subject to eligibility review and the potential eligibility status for MAGI Medi-Cal is discontinued</li> <li>○ New Snippet 923 generates for all Consumers on a case who are enrolled in a Covered CA Health and/or Dental plan containing the most recent enrollment plan details</li> <li>○ New Snippet 922 to generate for a case where the Consumer is not eligible for CCP, there is a soft pause on the Consumer's</li> </ul> </li> </ul>	



Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<p>application, or the Consumer is in Eligibility Review with a potential MAGI Medi-Cal status of Discontinued</p> <ul style="list-style-type: none"> <li>• The CalNOD64 inserts <i>1</i> in front of all county phone numbers</li> <li>• The CalNOD69 notice is updated as follows: <ul style="list-style-type: none"> <li>○ Notice name updated to <i>Plan Selection Summary</i></li> <li>○ Subject title updated to <i>Your Health and dental plan summary</i></li> <li>○ Generates when one or more household members are newly enrolled in a plan or changed/updated their plan and BRE did not run, thereby not generating CalNOD01 for that case</li> <li>○ Populates with the most recent enrollment information (pending or confirmed) for the benefit year that is available at the time of batch run</li> <li>○ Does not generate when a Consumer terminates from a plan</li> </ul> </li> <li>• CalHEERS adds the new CalNOD70 notice: <ul style="list-style-type: none"> <li>○ The new CalNOD70a notice generates when at least one individual in the household:</li> </ul> </li> </ul>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>▪ Is Eligible/Conditionally Eligible and enrolled in APTC/CSR/CAPS/CCP</li> <li>▪ Periodic Data Matching verification returns the Consumer as Medicare enrolled</li> <li>▪ Periodic Verification Medicare-Death Confirmation response has been received for all Consumers requested by CalHEERS</li> <li>○ The CalNOD70b generates when at least one HHM: <ul style="list-style-type: none"> <li>▪ Is Eligible/Conditionally Eligible and enrolled in APTC/CSR/CAPS/CCP</li> <li>▪ Is identified by the PVC process as <i>Yes Deceased</i></li> <li>▪ PVC response has been received for all Consumers requested by CalHEERS</li> </ul> </li> <li>• CalHEERS adds the new CalNOD72 notice: <ul style="list-style-type: none"> <li>○ The CalNOD72a generates to the Consumer when a delegation change request is successful</li> </ul> </li> </ul>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>○ The CalNOD72b generates to the Consumer when a delegation change request is unsuccessful</li> <li>● CalHEERS add the new CalNOD73 notice that generates to the Consumer when the delegation change request is unsuccessful due to multiple matches found</li> <li>● The CalNOD01 notice now triggers during the PVC process</li> <li>● The CalNOD01a, b, and c notice is updated as follows: <ul style="list-style-type: none"> <li>○ Snippet 443 suppresses when Snippet 480 or 775 is triggered for the consumer</li> <li>○ Snippet 918 triggers for a case where the Consumer is in eligibility review with a potential MAGI Medi-Cal status of Discontinued</li> </ul> </li> <li>● The CalNOD01a, b notice is updated as follows: <ul style="list-style-type: none"> <li>○ Snippet 917 triggers when Consumers attest to a non-compliance reason</li> <li>○ Snippets 910, 911, 912, and 913 do not suppress when the run reason is ROP batch</li> </ul> </li> </ul>	

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>• The CalNOD01c notice is updated as follows:               <ul style="list-style-type: none"> <li>○ Snippet 718 is suppressed when Snippet 480 or 775 generates</li> <li>○ Snippet 702 is suppressed when snippet 480 generates</li> <li>○ Updated Snippet 169 for CalNOD01c triggers when the run reason is Periodic Reverification</li> <li>○ Trigger updates are made to the following Snippets:                   <ul style="list-style-type: none"> <li>▪ Snippet 169</li> <li>▪ Snippet 718</li> <li>▪ Snippet 702</li> </ul> </li> </ul> </li> </ul>	

### Technology

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
171601	Change Request	CalHEERS does not prevent files with malware or viruses from uploading. Additionally, CalHEERS does not notify Consumers and users that the file they are uploading contains malware or a virus.	<p><b>Functional Change:</b> CalHEERS rejects files with malware or viruses from uploading.</p> <ul style="list-style-type: none"> <li>• A new warning message displays for Broker Admins, CEWs, Entity Admins, Issuer Admins, Issuer Representatives and SCR's when attempting to upload a document with a malware or virus:               <ul style="list-style-type: none"> <li>○ <i>The document you are trying to upload may have a virus or malware. We cannot accept the document as it is. Please upload a new document.</i></li> </ul> </li> </ul>	<p>Bulk User Operation</p> <p>Certified Enrollment Counselors</p> <p>Company Profile</p> <p>Confirm Your Identity</p> <p>Document Upload</p> <p>Documents and</p>

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<ul style="list-style-type: none"> <li>• A new warning message displays for Agency Managers, Agent, Approved Admin Staff L2, Authorize Representatives, CEC's, Consumers, Entity Managers and PBEs when attempting to upload a document with a malware or virus:               <ul style="list-style-type: none"> <li>○ <i>The document you are trying to upload may have a virus or malware. We cannot accept the document as it is. Please upload a new document or contact us at [phone number] for help.</i></li> </ul> </li> <li>• A new warning message displays for Broker Admins, CEWs, Entity Admin, Issuer Admin, Issuer Representatives and SCR when attempting to upload a photograph with a malware or virus               <ul style="list-style-type: none"> <li>○ <i>The photograph you are trying to upload may have a virus or malware. We cannot accept the photograph as it is. Please upload a new photograph.</i></li> </ul> </li> <li>• A new warning message displays for Agency Managers, Agents, Approved Admin Staff L2, Authorized Representatives, CECs, Consumers, Enrollers,</li> </ul>	<p>Correspondence</p> <p>Flexible Application</p> <p>Household Primary Contact</p> <p>Individual Market Profile</p> <p>Manage Provider File Uploads</p> <p>Plan ID Crosswalk</p> <p>Public Profile</p> <p>Profile</p> <p>Quality Rating</p> <p>RIDP</p> <p>Registration Status</p> <p>Upload Eligibility Documents</p> <p>Upload E&amp;O Declaration</p> <p>VLP Summary</p>

Ref ID	Type	Previous Design/Problem	New Functionality In this Release	Pages Impacted
			<p>Entity Managers and PBEs when attempting to upload a photograph with a malware or virus:</p> <ul style="list-style-type: none"> <li>○ <i>The photograph you are trying to upload may have a virus or malware. We cannot accept the photograph as it is. Please upload a new photograph or contact us at [phone number] for help.</i></li> <li>• The phone number display rules are as follows: <ul style="list-style-type: none"> <li>○ Agents: 877-453-9198</li> <li>○ CECs and PBEs: 855-324-3147</li> <li>○ Consumers and Authorized Representatives: 800-300-1506</li> </ul> </li> </ul> <p><b>Technical Change:</b> CalHEERS records all failed upload attempts caused by users and Consumers attempting to upload files with malware or viruses into the <i>HBX_ATTACHMENT</i> table.</p>	

### 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
N/A	N/A	N/A	N/A	N/A

### 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.

AP#	Alternate Procedures No Longer in Effect	Ref ID	Release Delivered
N/A	N/A	N/A	N/A

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

AP#	CIT #	New Alternate Procedures	Ref ID	Planned Release
N/A	N/A	N/A	N/A	N/A

## Glossary

Acronym	Full Form
<b>ABE</b>	Accenture Billing Engine
<b>ADA</b>	Americans with Disabilities Act
<b>Administrator (Admin)</b>	SCR and CEW user roles
<b>AHBX</b>	Accenture Health Benefit Exchange
<b>AI/AN</b>	American Indian/Alaskan Native
<b>ALM</b>	Application Lifecycle Management
<b>APTC</b>	Advance Premium Tax Credits
<b>BoB</b>	Book of Business
<b>BPM</b>	Business Process Management
<b>BRE</b>	Business Rules Engine
<b>CCHCS</b>	California Correctional Health Care Services
<b>CCHIP</b>	County Children's Health Initiative Program
<b>CCP</b>	Covered California Programs
<b>CDCR</b>	California Department of Corrections and Rehabilitation
<b>CEC</b>	Certified Enrollment Counselor
<b>CEE</b>	Certified Enrollment Entities
<b>CEW</b>	County Eligibility Worker
<b>CFS</b>	Carry Forward Status
<b>CIN</b>	Client Index Number
<b>CMI</b>	Current Monthly Income
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>COR</b>	County of Responsibility
<b>CR</b>	Change Requests
<b>CSR</b>	Cost Share Reduction
<b>CSS</b>	Cascading Style Sheets (CSS is a style sheet language used for describing the look and formatting of a document written in a markup language)

<b>Acronym</b>	<b>Full Form</b>
<b>CSV</b>	Comma Separated Value
<b>DER</b>	Determination of Eligibility Response
<b>DER-U</b>	Determination of Eligibility Response Unsolicited
<b>DHCS</b>	Department of Health Care Services
<b>DIVS</b>	Document Imaging and Verification Solution
<b>DWH</b>	Data Warehouse
<b>ECM</b>	Electronic Content Management System
<b>EDD</b>	Employment Development Department
<b>EDI</b>	Electronic Data Interchange
<b>EDR</b>	Eligibility Determination Request
<b>EERC</b>	Eligibility Evaluation Reason Code
<b>EPO</b>	Exclusive Provider Organization
<b>ESI</b>	Employer Sponsored Insurance
<b>ETL</b>	Extract, Transform and Load
<b>FDSH</b>	Federal Data Services Hub
<b>FFY</b>	Former Foster Youth
<b>FIPS</b>	Federal Information Processing Standard
<b>FPL</b>	Federal Poverty Level
<b>FTB</b>	Franchise Tax Board
<b>FTI</b>	Federal Tax Information
<b>FTR</b>	Failure to Reconcile
<b>GHIX</b>	GetInsured Health Insurance Exchange
<b>GI</b>	Get Insured
<b>HBX</b>	Health Benefit Exchange
<b>HCV</b>	Health Coverage Verification
<b>HHM</b>	Household Member name
<b>High Dated</b>	The record/data end date is set far off into the future with a pseudo date, such as the year 2500.
<b>HMS</b>	Health Management System
<b>IAP</b>	Insurance Affordability Programs
<b>ICT</b>	Inter County Transfer
<b>IDD</b>	Interface Definition Document
<b>IMM</b>	Immigrant
<b>IRS</b>	Internal Revenue System
<b>ISO</b>	Information Security Officer
<b>IVR</b>	Interactive Voice Response
<b>JAWS</b>	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)
<b>LP</b>	Lawful Presence
<b>LV</b>	Life event needs Verification
<b>MAGI</b>	Modified Adjusted Gross Income
<b>MCAP</b>	Medi-Cal Access Program
<b>MCIEP</b>	Medi-Cal Inmate Eligibility Program



<b>Acronym</b>	<b>Full Form</b>
<b>ME</b>	Manual Eligibility
<b>MEC</b>	Minimal Essential Coverage
<b>MEDS</b>	Medi-Cal Eligibility Data System
<b>NHeLP</b>	National Health Law Program
<b>NIST</b>	National Institute of Standards and Technology
<b>NMEC</b>	Non-MAGI MEC AID Code
<b>NOA</b>	Notices of Action
<b>NQI</b>	New Qualified Immigrants
<b>OAG</b>	Oracle API Gateway
<b>OAM</b>	Oracle Access Manager
<b>OBIEE</b>	Oracle Business Intelligence Enterprise Edition
<b>OIM</b>	Oracle Identity Manager
<b>OPA</b>	Oracle Policy automation
<b>PAI</b>	Projected Annual Income
<b>PBE</b>	Plan Based Enroller
<b>PBPS</b>	Pitney Bowes Presort Services
<b>PDF</b>	Portable Document Format
<b>PLR</b>	Policy Level Reporting
<b>QDP</b>	Qualified Dental Plan
<b>QHP</b>	Qualified Health Plan
<b>QLE</b>	Qualifying Life Event
<b>RAC</b>	Report A Change
<b>RDP</b>	Registered Domestic Partner
<b>ROP</b>	Reasonable Opportunity Period
<b>RTC</b>	Rational Team Concert
<b>SA</b>	Subject Area
<b>SAWS</b>	Statewide Automated Welfare Systems
<b>SCIN</b>	Statewide Client Index Number
<b>SCR</b>	Service Center Representative
<b>SDI</b>	State Disability Insurance
<b>SEP</b>	Special Enrollment Period
<b>SFTP</b>	Secured File Transfer Protocol
<b>SIR</b>	Service Investigation report
<b>SLCSP</b>	Second Lowest cost silver plan
<b>SNOW</b>	Service Now
<b>SQL</b>	Structure Query Language
<b>SSA</b>	Social Security Administration
<b>SSApp</b>	Single Streamlined Application
<b>SSN</b>	Social Security Number
<b>STNA</b>	Short Term Negative Action
<b>UAT</b>	User Acceptance Test
<b>UI</b>	User Interface
<b>UIB</b>	Unemployment Benefits
<b>UPW</b>	Unmarried Pregnant Woman

<b>Acronym</b>	<b>Full Form</b>
<b>URL</b>	Uniform Resource Locator
<b>USPS</b>	United States Postal Service
<b>VLP</b>	Verify Lawful Presence
<b>WAT</b>	Web Accessibility Toolbar
<b>WCC</b>	Web Center Content
<b>WP</b>	Work Products
<b>WSDL</b>	Web Services Descriptor Language
<b>XML</b>	Extensible Markup Language