Colorado Benefits Management System
Project Release Notes – February 2019

The *Project Release Notes* provide an informational view as to what projects are expected to be present in the **February 10, 2019** Build. Since testing is still in progress, there may be updates or modifications to these *Project Release Notes*, which will be reflected in yellow highlights.

Note: Technical projects, which are not visible to the user, are shown in gray highlights. Only high-level descriptions are provided for these projects.

Column	Description	
#	Displays CBMS/PEAK Project #.	
Title	Displays Project Title.	
TRN	Provides abbreviation for group providing training [SDC, PEAK Outreach (PO), HCPF, FA, EBD, etc.], if available.	
SP	Provides the abbreviaition for the Program Area or Agency sponsoring the project.	
Description	Provides an overview of the project, and explains why the project will be implemented (change in a specific policy, need to correct an issue, etc.).	
Changes	Explains the specific changes being made to CBMS or PEAK.	
Impacts	**CBMS User**	Explains how the Project will impact the CBMS user's data entry or results.
	PEAK Client	Explains what the PEAK client will see when he or she uses PEAK.
OLH Changes	Identifies changes made to Online Help associated with a Project.	

#	Title	TRN	SP	Description	Changes	Impacts		OLH Changes
						User	**Client**	
11733	**Non-MAGI Secondary Aid Code Logic Updates**	SDC Desk Aid	HCPF	Currently, the *AIRP* and *VCL* does not generate for MSP categories as a secondary aid code to other categories that do not require resources (such as but not limited to SSI, MAGI Parent/Caretaker, and Buy-In). Additionally, the system currently does not have logic to pend for verification of secondary aid codes. This project will ensure that the *AIRP* and *VCL* generate for secondary aid codes, as well as pend for verifications.	▪ *AIRP Packet* or *Verification Checklist* (*VCL*) will generate for secondary aid codes that require verification of additional information (resources) even if the primary aid code does not require resources. The case will pend with the standard MA due date. ▪ If the *Packet* is not returned by the due date, the secondary aid code will deny for failure to provide verification. ▪ This will also apply at RRR. If there is a secondary aid code, CBMS will pend and request the information needed. This will follow Project 10402 – MA Pend at RRR. ▪ This will also include verification of spouse's income and resources. A *VCL* will generate to request the needed information to make an eligibility determination for the secondary aid code. ▪ AVP will be sent as in Project 11212 – MA Asset Verification Program. ▪ Secondary aid code results will now display in both CBMS and PEAK.	Impact highlights are as follows (in-depth training will be provided by SDC prior to implementation): ▪ *AIRP* or *VCL* will be sent for secondary aid codes for applicant and spouses' additional information. ▪ If the *Packet* is not returned by the due date, the secondary aid code will deny for failure to provide verification. ▪ Results for secondary aid codes will display on CBMS Wrap Up pages.	Impact highlights are as follows (in-depth training will be provided by SDC prior to implementation): ▪ Member will receive *AIRP* or *VCL* if eligible for a secondary aid code. ▪ Member will deny or terminate for secondary aid code if information is not returned by due date. ▪ Member will receive a *Notice of Denial* or *Termination* for secondary aid code.	▪ **Display Individual Eligibility Summary, MA Tab (WU0005N_15)** - Added new columns **Secondary Result** and **Secondary Begin Date**.
11817	**MA – HUB VLP Upgrade to Version 37**		HCPF	CBMS must upgrade the existing HUB VLP (Verify Lawful Presence) service from Version 33 to Version 37 to comply with CMS and DHS regulations. The *DHS Systematic Alien Verification for Entitlements (SAVE) Program Interface Control Agreement (ICA) v37* is the basis for the *Verify Lawful Presence (VLP) v37 Business Service Definition (BSD).* The VLP v37 Service incorporates changes that significantly increase the number of cases the DHS SAVE Program can resolve in real-time compared to DHS SAVE Program v33.	▪ Verify Lawful Presence (VLP) interface will be updated from version 33 to version 37. ▪ CBMS VLP process will be updated to conduct next steps based on codes returned from FDSH service. ▪ Step 1b will be added to next steps process. ▪ Additional information will be sent with Step 1. ▪ With response from HUB, users will be notified to make necessary updates prior to CBMS VLP process taking the next step. ▪ There will be no change to eligibility requirements for non-citizens.	▪ Users will be notified with any response during Step 1, Step 2, or Step 3, so necessary updates can be made prior to the CBMS VLP process taking the next step. (i.e., review and/or data entry corrections, etc.).	▪ None	▪ None

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12192	**SNAP *VCL* Non-Standard Reporting**		FA	FNS has asked SNAP to create the ability to flag cases that have a **Non-Standard Verification Checklist (VCL)** due date (meaning we would flag cases where the *VCL* has been sent to *RRR*, etc.). This would include any date besides 10 + 1 for a regular *VCL* or 10 + 5 for an ACP case. This flag would then be used for reporting purposes.	▪ Changes will be behind the scenes and not impact users or clients.	▪ Changes will be behind the scenes and not impact users.	▪ Changes will be behind the scenes and not impact clients.	▪ None

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12205	**PEAK*Pro* – LTSS Updates**	**SDC Desk Aid**	**HCPF**	Project will make miscellaneous changes related to LTSS (SEPS and CCBs). Functionality will be updated in PEAK*Pro* in order to enhance usability.	**PEAK*Pro* Changes** ▪ **Communications** label will be changed to **Upload Documents**. ▪ Phone number will be added on the LTSS LOC PDF. ▪ "Axis" will be replaced with "LTSS Case Management System". ▪ Following will be needed when a SEP or CCB wants to select an institution on the ***LOC Assessment***: ▪ National Provider ID (NPI) ▪ Active Status. ▪ SEPs and CCBs will be allowed to transfer an unprocessed ***LOC Assessment*** between one another. ▪ There will be access to generic eligibility information. ▪ ***LOC Assessment*** referrals will be able to be accepted from CBMS. ▪ There will be the ability to distinguish if a referral came from PEAK or CBMS. ▪ SEPs and CCBs will be able to review and edit already processed assessments as needed. ▪ Corrected assessments will be identified as such for eligibility workers. ▪ The posting of duplicate assessments or referrals in PEAK*Pro* will be eliminated. **PEAK Changes** ▪ Pop up message will display for clients to enter phone number. ▪ **Middle Name** field will be added when adding a newborn. **CBMS Changes:** ▪ ***LOC Assessments*** will be able to be sent to PEAK*Pro*.	▪ SEPs and CCBs – see all PEAK*Pro* changes. ▪ CBMS – see all CBMS changes.	▪ See all PEAK changes.	▪ None

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					▪ Once assessments are sent, case comment will automatically generate.			
12208	**MA Eligibility Span Updates**	SDC W E B I N A R	HCPF	Project will update the current system functionality to allow for the correct generation of the Medical Assistance (MA) Medical Eligibility Spans. The purpose of this project is to ensure that accurate Medical Assistance Eligibility Span data will be sent to the interChange.	▪ EDBC will no longer need to run back to the Death Month in order to terminate MA as of the member's Date of Death (DOD). When a DOD is entered with the **Verification** field populated with **Received** and the **Source** field populated with **any value**, MA should terminate as of the DOD. ▪ When a DOD is entered and the **Verification** field is populated with any value other than **Received**, a *Verification Checklist* (*VCL*) will be generated, and the case will pend (standard time frame) for missing verifications. If the **Verification** field is not updated prior to the denial due date, EDBC will run, and the member will be denied for Missing Verification and Death. ▪ New edit will be added to the LTC Institution page, **Institution Name** field, **Search for Provider** button/page. Users will only be able to select providers that are in **Active Status** and have a National Provider ID (NPI) listed. This edit will only apply to the Search for Provider page when accessed via the LTC Institution page. ▪ New field will be added to the Search for Provider page – **National Provider ID**. Users will be able to search for providers within this page by the NPI. ▪ **Business Name** field within the Search for Provider page will be extended to 60 characters to allow users to enter in full names when searching. ▪ New edit will be added to the Individual Address page to no longer allow entry of a one character City Name.	▪ Refer to CBMS Edit Changes. ▪ New monthly Cognos report will be available – *MA Clients Terminated Due to Death*. This report will include all MA members who were terminated in the report month. ▪ New weekly Cognos report will be available – *Active MA Clients with a Date of Death*. This report will include all MA members with a DOD entered. ▪ New weekly Cognos report will be available –*MA Clients Terminated Due to Death with Extended Med Span*. This report will include all MA members who were terminated due to death and have a Med Span End Date that is greater than their DOD. ▪ New weekly Cognos report will be available –*MA Head of Household that does not have a Mailing Address*. This report will include all active MA cases where the Head of Household does not have a Mailing Address entered. ▪ New weekly Cognos report will be available – *MA Overdue Pregnancy Records*. This report will include all active MA members who have an active Pregnancy record and the Expected Due Date is 15 calendar days in the past and the **Pregnancy End Date** field is null.	▪ Refer to PEAK Edit Changes.	▪ **Long Term Care Institution (DC0122N)** - Added new field **National Provider ID** - **Institution Name** field is now mandatory when MA is pending or active. ▪ **Search for Provider (ES0059N)** - New field and column **National Provider ID**.

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					▪ New edit will be added to the Pregnancy page to no longer allow entry of an **Effective End Date** (**EED**) if the **Pregnancy End Date** field is null for the active record. ▪ New edit will be added to the Pregnancy page to no longer allow entry of a new record if the **Pregnancy End Date** field is null for the active record. ▪ New edit will be added to the Pregnancy page to no longer allow entry of an **Effective End Date** (**EED**) if the **Postpartum End Date** is a future date for the active record. ▪ New edit will be added to the LTC Level of Care page to no longer allow selection of a **Level of Care Type** that does not align with the member's age. ▪ New edit will be added to the Medicare Expense page to require correct alpha/numeric format data entry within the **Health Insurance Claim #** field. ▪ New edit will be added in PEAK (all modules) to require correct alpha/numeric format data entry within the **Medicare Claim #** field. ▪ There will be new and updated Cognos Reports	▪ Existing daily Cognos report – *MA Eligibility Span Error* will be updated to include nine additional error codes such as *Mailing City is not Valid*.		
12310	**CDHS RT for Income Expenses and Expenses**		FA	CDHS will create an RT for Income Expenses and Expenses. The purpose of the creation of a new RT will allow CDHS to make changes as needed through the RT process instead of creating new projects.	▪ RT Change will not impact users or clients.	▪ RT Change will not impact users.	▪ RT Change will not impact clients.	▪ None
12369	**Send Email at ACF File Transmittal**		EBD	Project will automate an email to be sent whenever a file is transmitted to ACF.	▪ Purpose of this project is to comply with new requirements from ACF that we notify them via email of a file being transmitted to them.	▪ None	▪ None	▪ None

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12374	Increase/Decrease *NOA* Updates		EBD	Project will update the logic for when to trigger an *Increase/Decrease NOA* for EBD programs. Program Area identified that the logic used to trigger an *Increase/Decrease NOA* is incorrect and needs to be updated.	▪ CBMS will compare the most recent authorized benefit amount for each month of the run. If there is a change, a *NOA* will be triggered. ▪ If multiple changes are authorized in one day, only the last change will be considered when determining if a *NOA* is necessary.	▪ None	▪ None	▪ None
12398	**Pend for Required Verification for Adult Financial**		EBD	Currently, AF cases will immediately deny when verification and Lawful Presence and Identification are not received. This project will add functionality to set cases to **Pending** and allow the client time to provide the verification before denying. This project will also not trigger a *VCL* for a Colorado Works program for Shelter or Utilities.	▪ AF will pend and create a *VCL* for Lawful Presence and/or Identification. If verification is not received by the due date, case will deny for **Failure to Provide Verification**. ▪ CW cases will no longer create a *VCL* for Shelter Expenses.	▪ None	▪ None	▪ None
12400	**Repayment Percentage Logic Updates**		EBD	Project will update the Adult Financial logic in CBMS to match the Colorado Works rules for repayment percentages.	**Record Repayment Agreement** ▪ **Percentage** field will be modified to accept an amount of **5%** or more. **Amount** field will be modified to accept an amount of **$10** or more. ▪ If hardship is entered, user will be able to enter an amount less than **5%** or **$10**. ▪ For both AE and CW claims, there will be a new error message if the percentage amount is less than the required amounts and there is no hardship entered.	▪ None	▪ None	▪ None
12401	**Add Provider ID to *Remittance Form***		EBD	Project will update the *Provider Remittance Advice Statement* to add the **License Number** or the **EFT Account ID** for the Provider ID.	*Provider Remittance Advice Statements* will be updated to populate the Provider ID based on the check box on the Maintain Provider Details, Category tab: ▪ If **LTC Facility** is checked, the **License Number** will be populated. ▪ If **EFT Paid** is checked, the **EFT Account ID Number** will be populated. ▪ If **LTC Facility** and **EFT Paid** are checked, the License Number will be populated.	▪ None	▪ None	▪ None

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12403	*Claim Determination Form* **Addition for EBD Programs**		EBD	Project will add the **Claim Number** and **Error Type** to the *Colorado Works/Adult Financial Claim Calculation Form (CWCL-1)* for EBD programs, improving client correspondence.	*Colorado Works/Adult Financial Claim Calculation Form (CWCL-1)*: ▪ **Claim Number** will be added. ▪ **Error Type** will be added.	▪ None	▪ None	▪ None
12410	**PEAK***Health* **Push Notifications**		HCPF	Project will enable the ability to send push notifications to PEAK*Health* users via the Salesforce Marketing Cloud.	▪ HCPF will have the ability to send push notifications to PEAK*Health* app users related to their benefits. This includes changes in coverage, *VCL* due dates, and events happening nearby.	▪ None	▪ Users will be able to opt in to receiving push notifications regarding their medical benefits.	▪ None
12416	**FA Incomplete App Updates**	SDC WBT	FA	Currently, there is a high volume of incomplete Food Assistance applications, which are showing denied after sixty (60) days. This project will modify portions of that process.	▪ Incomplete applications will be cancelled rather than denied after sixty days. ▪ The **Cancel Reason** fields will be updated to be more accurate. ▪ A new *CBMS FA Incomplete App Updates Report* will be created, which will display applications that have not been associated with a case, cancelled, or denied.	▪ *CBMS FA Incomplete App Updates Report* can be used to ensure that all applications have been processed timely and appropriately.	▪ None	▪ None
12500	**Updated IRC/Road Map for Diversion**	SDC Desk Aid	EBD	Project will replace the current IRC/Road Map for Diversion and make changes to the Diversion Detail page in CBMS.	▪ Information entered on the Diversion page will be used to populate a Road Map for Diversion, so counties will no longer have to manually create them. ▪ New field will capture the reason a customer does not need ongoing cash assistance.	▪ County users will need to document the reason a customer does not need ongoing BCA in the new **I do not need ongoing assistance at this time because** field.	▪ None	▪ **Diversion Details (DC0118N)** - New field **I do not need ongoing assistance at this time because**.

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12529	ACSES Modifications	SDC WBT	EBD	Project will make modifications to the ACSES interface from CBMS to provide better, more accurate data to ACSES.	**Parent Details – Parent Not in the Home Detail** ▪ New fields will be added for user to indicate if the parent is in the home or not (**Yes/No** radio button) and the date of the change. This will create spans rather than end date the record. **Parent Details- Claim Details, Good Cause** ▪ Good Cause record will be effective end dated at every new application for Colorado Works. ▪ Users will now create a new record for each instance of Good Cause. ▪ Three Good Cause radio buttons: **Yes**, **No**, and **Pending**. Option of **Pending** will be removed from **Good Cause Status**. ▪ When **Pending** is selected, all other fields under **Good Cause** will be disabled. ▪ A data fix for existing cases will be conducted if the **Good Cause Status** is **Pending**. Several changes will be made to the interface between CBMS and ACSES.	▪ None	▪ None	▪ None
12535	Update CS Referral File		EBD	Project will update the programs that are accessed in the Child Support locate file.	▪ Processing of the Locate file from ACSES to CBMS will be modified to include Adult Financial and Medical Assistance.	▪ None	▪ None	▪ **Parent Details (DC6109N)** - Added new fields **In Home** and **Date.** - Added **Pending** to **Good Cause** drop-down menu.

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12596	**PEAK Salesforce Concurrent Request Limit Exceeded in RTE - PO**		**OIT**	Salesforce only allows for 25 long running webservice requests (<5 seconds) at a time. Once a synchronous Apex request (webservice) runs longer than 5 seconds, then it begins counting against this limit. If the limit is reached, any new synchronous Apex request results in an error page. This behavior occurs until the organization's requests are below the limit. For example, these occur when PEAK is calling another web service (i.e., PEAK RTE sends information to CBMS) and is awaiting a response. These requests are often out of the control of the PEAK Team and impact RTE. A proof of concept project is needed in order to test Deloitte's solution.		▪ None	▪ None	▪ None
12599	**FA IPV *NOA* Trigger Standard Eligibility (SE) Household Update**	SDC WBT	**FA**	Project will change some functionality created with Project 11650 (CBMS FA BBCE Updates) when a household is rolling from Basic Categorical Eligibility (BCE) or Expanded Categorical Eligibility (ECE) to Standard Eligibility (SE). This will fix an issue that was discovered after Project 11650 was implemented, causing some noticing to not be generated to the SE households.	▪ *Resource Letter* will not be sent out when moving from BCE or ECE to SE.	▪ None	▪ None	▪ None
12615	**Identify Cognos Reports that Have Potential for Conversion**		**OIT**	Project will identify current Cognos reports able to be discarded due to not having been opened in the last two years. The project will also identify existing Cognos reports that have traits making them potential candidates for conversion to the dashboards using Saleesforce Einstein Analytics.		▪ None	▪ None	▪ None

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12672	**Modifications to the Existing Reports for Cost Allocation Purposes**		**OIT**	Development Team (Deloitte) deployed Project 12142 (Automation Reports for Cost Allocation Purposes) in June 2018. After thorough analysis of the existing reports for Cost Allocation Purposes, the Team determined that modifications should be made in order to make the report more effective in meeting the clients' needs. Capturing additional data and making modifications to the existing calculations will help to ensure that the project pulls consistent data specific to the needs of OIT, so management can allocate CBMS and PEAK maintenance operational costs accordingly.		▪ None	▪ None	▪ None
12693	**MA *1094-B* Updates for Tax Year 2018** **(Project Moved to March 10, 2019 Build)**		**HCPF**	Project will align with Tax Year 2018 AIR Schema Business Rules changes for *IRS 1094-B* electronic submission.	▪ No changes are expected in CBMS with this project.	▪ CBMS users will not see a change with this project.	▪ Clients will not see a change with this project.	▪ None

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12713	**MA CHP+ Other Health Insurance Interface Updates – CHP+ Prenatal**	SDC WBT	HCPF	Project will add CHP+ Prenatal (N2) to the CHP+ Other Health Insurance eligibility functionality created with Project 11718 (CBMS MA CHP+ Other Health Insurance Interface).	▪ CHP+ Prenatal will be added to the CHP+ Other Health Insurance eligibility functionality created with Project 11718. ▪ CHP+ Prenatal members will deny at intake and terminate in ongoing mode, when the health coverage remains open and dated after the due date for the *CHP+ Other Insurance Information* letter. ▪ Other Health Insurance will be removed as an exception to Continuous Eligibility for CHP+ Children (N1). Any child approved for CHP+ will remain approved for CHP+ if their approval is authorized prior to Health Insurance being added to the case (This exception only applies to the first verified health insurance interface record and following initial eligibility determination or an annual redetermination). This new logic will also apply to CHP+ Newborn (N4). The Health Insurance will not affect the case until RRR. If Health Insurance is added to the case before the child is approved and authorized for CHP+, then the child will be denied for having other health insurance.	▪ Worker(s) will start to receive the *Health Insurance* forms from CHP+ Prenatal member(s) and will need to update CBMS based on the information provided on the form.	▪ Active CHP+ Prenatal members will receive a form to review and respond to if notification of other health insurance is received via the CHP+ Other Health Insurance Interface. Eligibility may be impacted based on the interfaced records.	▪ None

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12714	MA CHP+ Other Health Insurance Interface Updates	SDC WBT	HCPF	Project will make updates to the CHP+ Other Health Insurance functionality created with Project 11718 (CBMS MA CHP+ Other Health Insurance Interface). Eligibility updates for CHP+ Continuous Eligibility and CHP+ Newborn (N4) individuals will be included in this project.	▪ Other Health Insurance records will be removed as an exception for CHP+ (N1) Continuous Eligibility (This exception only applies to the first verified health insurance interface record following initial eligibility determination or an annual redetermination). This new logic also applies to CHP+ Newborn (N4). ▪ A child ,who is ongoing CHP+ (N1) who reports they have other health insurance (**manually data entered into CBMS or PEAK – NOT by the CHP+ Interface**), will remain eligible for CHP+ under Continuous Eligibility. Any child, who is placed on CE and reports other health insurance coverage, will remain eligible under CE, because the record was manually entered and did not interface. If the CHP+ Other Health Insurance Interface reports other health insurance after the manual record was entered, it will be ignored until the CE period is over. Any child, who is approved for ongoing CHP+ Newborn (N4) and reports other health insurance (**manually data entered into CBMS or PEAK – NOT by the CHP+ Interface**),will remain eligible for CHP+ Newborn through the guaranteed period. If other health insurance is reported and entered manually, the newborn will remain eligible under the Guaranteed Coverage period, because the record was manually entered and did not interface. If the CHP+ Other Health Insurance Interface reports other health insurance after the manual record was entered, it will be ignored until the Guaranteed Coverage period ends.	▪ Users will see fewer members failing for other health insurance due to Continuous Eligibility and Guaranteed Coverage for CHP+ newborns and CHP+ Child.	▪ CHP+ children will remain approved under Continuous Eligibility. ▪ CHP+ Needy Newborns will remain approved due to Guaranteed Coverage.	▪ None
12718	Upgrade Corticon to the Latest Version		OIT	Project will upgrade Corticon to the latest version.		▪ None	▪ None	▪ None

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12751	MA – Change Healthcare Data Exchange Updates for MBI		HCPF	Project will modify the current Change Healthcare (formally Social Service Coordinators) data exchange file layout to include the Member's Medicare Beneficiary Identifier (MBI).	▪ Change Healthcare (formally Social Service Coordinators) data exchange file layout will be modified to list the member's Medicare Beneficiary Identifier (MBI).	▪ None	▪ None	▪ None
12821	Update *DOR Notice*		FA	For State Tax Intercepts (any Program Area), appeals need to go to the Office of Administrative Courts. Corrections will be made on the *Notice of Intent to Offset and Intercept* to reference the correct appeals office.	▪ *Notice of Intent to Offset and Intercept Form* will have the current office listed.	▪ None	▪ The correct office will be listed on the *Notice of Intent to Offset and Intercept Form*.	▪ None
12846	**Salesforce Implement LogRocket POC**		OIT	Project will implement the LogRocket tool in Salesforce Pipe 3 SIT and UAT environments to assist in Transformation testing activities and inform long term production benefits following Phase 2 Go-Live.	▪	▪ None	▪ None	▪ None
12850	**NFS Mounts to EFS**		OIT	Currently, various CBMS components rely on Network File System (NFS) service to share the filesystem across multiple servers. With Phase 0 of Transformation, the same architecture was migrated to AWS platform. However, AWS offers Amazon Elastic File System (EFS) as a managed service, which provides advantages over NFS. All NFS will be migrated to EFS for CBMS.	▪ None	▪ None	▪ None	▪ None
12615	**Identify Cognos Reports That Have Potential for Conversion**		OIT	We cleaned up 1105 Cognos reports in December 2017. There are more than 1300 reports left to clean up. Some of them have never been opened or used in the last couple of years and need to be cleaned up in Cognos. We also need to create a final active report list, as well as identify existing Cognos reports that have traits revealing them as potential candidates for conversion to the dashboards, which will benefit County and Program Areas.		▪ None	▪ None	▪ None

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12672	**Modifications to the Existing Reports for Cost Allocation Purposes**		**OIT**	Development Team (Deloitte) deployed Project 12142 – Automation Reports for Cost Allocation Purposes in June 2018. After thorough analysis of the existing reports for Cost Allocation Purposes, we determined that modifications should be made in order to make the report more effective to meet the client's needs. Capturing additional data and making modifications to the existing calculations will help to ensure that the project pulls consistent data specific to the needs of OIT, so management can allocate CBMS and PEAK maintenance operational costs accordingly.	▪	▪ None	▪ None	▪ None
12881	**CBMS Medical Assistance (MA) PEAK Updates for Non-MAGI**		**HCPF**	Look for a forthcoming CBMS Communication and *Desk Aid* on the specifics of this project.	▪	▪ None	▪ None	▪ None

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